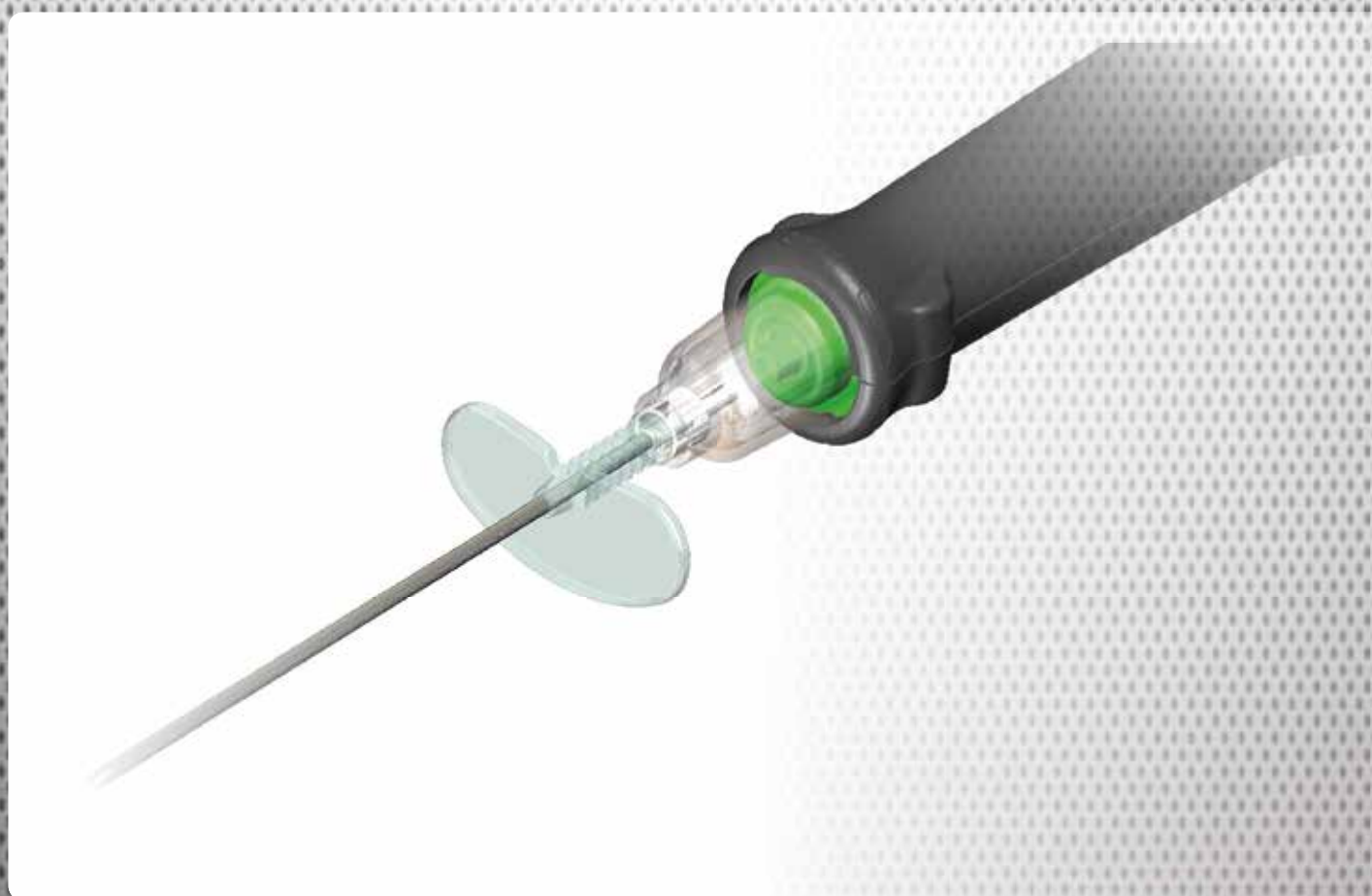


HERNIATOME

PERCUTANEOUS DISCECTOMY DEVICE



Lumbar Radiculopathy related to disk herniation is a leading cause of morbidity in most countries. The usual treatment includes conservatively implemented medical treatment including analgesia, physiotherapy and rest. In the event of failure of these treatments the only alternative is surgical discectomy under general anaesthetic. The lack of alternative treatments has encouraged the development of new therapeutic options taking advantage of developments in interventional imaging. The HERNIATOME has evolved from the combination of surgical decompression and intradiscal guided imaging.



PERCUTANEOUS DISCECTOMY

Percutaneous Discectomy using Herniatome is a safe, effective and non aggressive procedure. The herniectomy, performed with CT and fluoroscopic monitoring is a minimally invasive procedure on the spine, the aim of which is identical to that of surgery to extract the hernia or a portion of the hernia to reduce the pressure on the nerve root.

Herniatome is a clinically proven alternative to surgical intervention.

The duration of the procedure varies between 15 and 30 minutes and doesn't require an extended hospital stay.

PROCEDURE DESCRIPTION

After local Anaesthesia a 20ga Introducer Needle is inserted at the exact level of the Hernia (Intra-Hernial approach) **(STEP 1)**

■ A Discography is performed to confirm disc-radicular conflict. Detach the hub of the 20ga Introducer **(STEP 2)**

■ Under fluoroscopy carefully introduce the Discal Curved Cannula over the 20ga needle **(STEP 3)**

After radiological confirmation the 20ga introducer needle can be removed from the Discal Curved Cannula and the Herniatome device is then inserted and locked to the Discal curved Cannula hub **(STEP 4)**

■ Depress the switch to activate the cutting thread and apply rotating movements to activate a decompression by the removal of a portion of the disc nucleus. Decompression must be done on the periphery of the disc adjacent to the disco-radicular conflict **(STEP 5)**

■ The procedure is completed when the decompression is sufficient to reduce the resistance felt

Improved System

PRODUCT ADVANTAGES

- Evaluation in real time of the decompression
- Qualitative and quantitative evaluation
- **20ga** Introducer Needle that ensures the safe and correct positioning of the HERNIA-TOM
- Discal Curved Cannula with lateral window, that allows a better decompression and extraction of the hernia by covering a wider area with minimal movement.

Curved distal end with lateral window



Straight distal end with lateral window



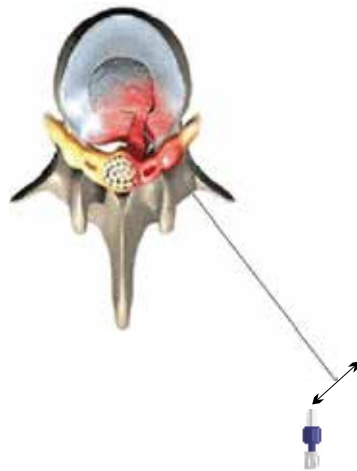
Introducer Needle



STEP 1



STEP 2



STEP 3



STEP 4



STEP 5



Procedure advantages

Percutaneous Herniectomy appears to provide significant clinical improvement and can be considered a valid alternative to open surgery.

- Minimal invasiveness
- Avoidance of general anesthesia
- No overnight hospital stays
- Quick recovery time

Straight distal end with lateral window

Curved distal end with lateral window



Cervical type

| Order Code | Size | Description |
|------------|-------------|-------------------------------------|
| 5091709 | 17ga - 9 cm | Curved distal end, lateral window |
| 5091749 | 17ga - 9 cm | Straight distal end, lateral window |
| 5091809 | 18ga - 9 cm | Curved distal end, lateral window |
| 5091849 | 18ga - 9 cm | Straight distal end, lateral window |

Lumbar type

| Order Code | Size | Description |
|------------|--------------|-------------------------------------|
| 5091715 | 17ga - 15 cm | Curved distal end, lateral window |
| 5091745 | 17ga - 15 cm | Straight distal end, lateral window |
| 5091815 | 18ga - 15 cm | Curved distal end, lateral window |
| 5091845 | 18ga - 15 cm | Straight distal end, lateral window |

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