Lung Marker System

The CT-guided Marking of Pulmonary Nodules before VATS

SAFETY TO THE MAX

www.somatex.com
The Somatex® Lung Marker System is used for the CT-guided marking of non-visible round foci near the pleura before VATS. Clinical experience with the Spiral wire marking system has shown that pre-operative marking of pulmonary foci may be a significant factor in the reliable tracing and identification of the tissue requiring resection. Problems in tracing round foci near the pleura constitute a significant limitation in the scope of VATS and often necessitate a switch from thoracoscopy to thoracotomy. The use of wire markers specially developed for lung parenchyma extends the scope of application of VATS and so constitutes a major step towards lower impact, minimally invasive interventions.

Percutaneous CT-guided puncture is a widely-used and reliable method. By using high-tech material, the wire system can be located very close to the round focus because it uses a needle with only 18-Gauge thickness. The spiral form of the marker gives the wire the best possible anchoring characteristics given the softness of lung tissue. If the wire is located in the wrong place it can be recovered with the cannula still in position, released and replaced in the correct location.

Advantages at a glance
- Wire system can be corrected because of the coaxial loading cannula technique
- CT fluoroscopy enables easy location
- Special spiral form enables reliable anchoring in the soft lung parenchyma
- Acceptable puncture risk with 18-gauge access
- No time pressure between marking and VATS as there is with colour marking

Use
- Histology determination where dignity is unclear
- Resection of small, round foci near to pleura where VATS is indicated

Product options
- Gauge: 18
- Diameter: 1.2 mm
- Length: 120 mm
- Order no: 272.015

CT-guided resection of pulmonary metastases
RöFo – Fortschritte auf dem Gebiet der Röntgenstrahlen und der bildgebenden Verfahren 2005; 177: 877–883

Spiral wire

CT-guided resection of pulmonary metastases
RöFo – Fortschritte auf dem Gebiet der Röntgenstrahlen und der bildgebenden Verfahren 2005; 177: 877–883

Spiral needle

Order no. Gauge Diameter Length

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<th>Order no.</th>
<th>Gauge</th>
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<td>150 mm</td>
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Sources:
- CT-gesteuerte Lungenherdmarkierung vor minimalinvasiver Operation
  Radiologie 2001; 41: 201-204 © Springer-Verlag 2001

Using a Dedicated Lung-Marker System for Localization of Pulmonary Nodules Before Thoracoscopic Surgery
Bernhard L. Partik, Ann N. Leung, Michael R. Müller, Martin Breitenseher, Franz Eckersberger, Gerhard Dekan, Thomas H. Helbich, Viktor Metz
AJR 2003; 180: 805–809 0361-803X/03/1803–805 © American Roentgen Ray Society

CT-guided Resection of Pulmonary Metastases
K. Krüger, D. Brück, W. Wilke, C. Hohendorf, M. B. Schlegel, R. Felix
RöFo – Fortschritte auf dem Gebiet der Röntgenstrahlen und der bildgebenden Verfahren 2005; 177: 877–883

Success and Complication Rate of CT-Guided Marking of Pulmonary Nodules with Coil Wires for Video-Assisted Thoracoscopic Surgery (VATS)
K. Krüger, D. Brück, W. Wilke, C. Hohendorf, M. B. Schlegel, R. Felix
RöFo – Fortschritte auf dem Gebiet der Röntgenstrahlen und der bildgebenden Verfahren 2006; 178: 1250–1254

CT-marker system

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CT marker system
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