

OTSC® neo System saving lives

The innovative clip system for flexible endoscopy

- Total performance evolution of a proven system
- Dynamic compression and continuous adaption to tissue thickness
- Large-volume capture of tissue
- High compression force at the lesion site
- Minimal strain on surrounding tissue



OTSC®neo System

The OTSC®neo System stands for superior clinical efficacy¹⁻⁷, easy and quick application⁶ and cost effectiveness^{3,8}.

The OTSC®neo System is used in flexible endoscopy for

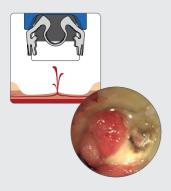
- acute bleeding
- perforations
- closure of chronic lesions
- tissue gathering



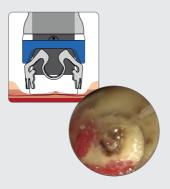
The use of the OTSC®neo System is easy: The application cap with pre-mounted clip is attached to the tip of the endoscope and connected to the hand wheel through a thread in the working channel. By turning the hand wheel, the thread is tightened and the clip applied. The system is compatible with conventional endoscopes and available in different sizes and combinations.

Application

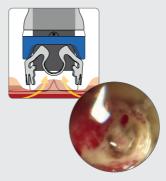
Hemostasis



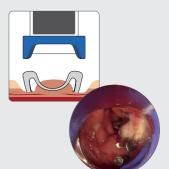
Targeting of the lesion (with or without OTSC® application aid).



Placement of the OTSC®neo cap on the tissue.



Suction of the target tissue into the OTSC®neo cap.



Application and placement of the OTSC®neo Clip by turning the hand wheel.

Hemostasis of a duodenal ulcer bleeding, source: Prof. J. Lau, Prince of Wales Hospital, Hong Kong SAR, China

¹ Jensen DM, Kovacs T, Ghassemi KA, Kaneshiro M, Gornbein J. Randomized Controlled Trial of Over-the-Scope Clip as Initial Treatment of Severe Nonvariceal Upper Gastrointestinal Bleeding. Clin Gastroenterol Hepatol. 2021 Nov;19(11):2315-2323.e2

² Meier B, Wannhoff A, Denzer U, Stathopoulos P, Schumacher B, Albers D, Hoffmeister A, Feisthammel J, Walter B, Meining A, Wedi E, Zachäus M, Pickartz T, Küllmer A, Schmidt A, Caca K. Over-the-sco-pe-clips versus standard treatment in high-risk patients with acute non-variceal upper gastrointestinal bleeding: a randomised controlled trial (STING-2). Gut. 2022 Jul;71(7):1251-1258.

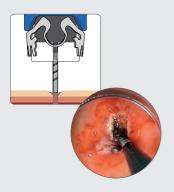
³ Lau JYW, Li R, Tan CH, Sun XJ, Song HJ, Li L, Ji F, Wang BJ, Shi DT, Leung WK, Hartley I, Moss A, Yu KYY, Suen BY, Li P, Chan FKL. Comparison of Over-the-Scope Clips to Standard Endoscopic Treatment as the Initial Treatment in Patients With Bleeding From a Nonvariceal Upper Gastrointestinal Cause: A Randomized Controlled Trial. Ann Intern Med. 2023 Apr;176(4):455-462.



The features and therapeutic functions are based on its unique material and design: the superelastic Nitinol® used for the clip is biocompatible and MRI conditional, and even suited to be applied as a long-term implant. The OTSC®neo Clip provides dynamic closure that permanently adapts to the tissue thickness and exerts a uniform compression force.

Fistula closure

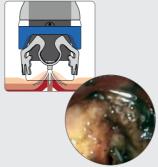




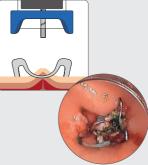
Targeting of the fistula opening and application of the OTSC® Anchor in fistula opening.



Positioning of the cap and light pulling of the tissue.



Mobilization of the tip of the OTSC® Anchor shaft into the cap; anchor spikes may remain external.



Clip application and release of the OTSC® Anchor from the tissue.

Closure of a PEG fistula, source: Dr. Thomas Kratt, Universitätsklinikum Tübingen, Germany

 $^{4\,} Wedi\, E, Fischer\, A, Hochberger\, J, Jung\, C, Orkut\, S, Richter-Schrag\, HJ.\, \textbf{Multicenter evaluation of first-line endoscopic treatment with the OTSC in acute non-variceal upper gastrointestinal and the other properties of the other properti$ $bleeding\ and\ comparison\ with\ the\ Rock\ all\ cohort:\ the\ FLETRock\ study.\ Surg\ Endosc.\ 2018\ Jan; 32(1):307-314.$

⁵ Schmidt A, Gölder S, Goetz M, Meining A, Lau J, von Delius S, Escher M, Hoffmann A, Wiest R, Messmann H, Kratt T, Walter B, Bettinger D, Caca K. Over the Scope Clips Are More Effective Than Standard Endoscopic Therapy for Patients With Recurrent Bleeding of Peptic Ulcers. Gastroenterology. 2018 Sep;155(3): 674-686.e6.
6 Bapaye J, Chandan S, Le Naing Y, Shehadah A, Deliwala S, Bhalla V, Chathuranga D, Okolo PI 3rd. Safety and efficacy of over-the-scope clips versus standard therapy for high-risk nonvariceal

upper GI bleeding: systematic review and meta-analysis. Gastrointest Endosc. 2022 Nov; 96(5):712-720.e7.



OTSC® Anchor

The OTSC® Anchor supports easier approximation of tissue, even for indurated tissue, like fistulas and chronic ulcers. The application aid also enables the precise alignment of tissue and cap, thereby facilitating the treatment of bleeding, for example. The OTSC® Anchor is available in two versions with different stitch depths for thicker and thinner tissue.

The optimized fistula closure is a technique for the more effective treatment of otherwise refractory fistulas. This involves a primary superficial incision of the mucosa at the fistula opening using the AqaNife®, followed by clip application. This procedure can lead to reduced tension and more effective tissue compression and increase the likelihood of healing.

OTSC® Twin Grasper®

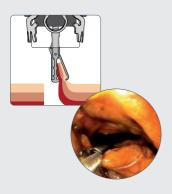
The OTSC® Twin Grasper® facilitates the approximation of lesion edges. It is available in 2 shaft lengths and is used particularly for perforation closure. Its two independent jaws make it easier to grasp opposite lesion edges and pull them into the cap.

OTSC® Anchor und OTSC® Twin Grasper®

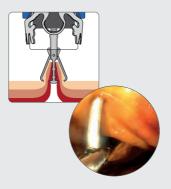
The application aids facilitate the precise mobilization of the tissue into the cap, making the treatment of lesions even easier.



Perforation closure



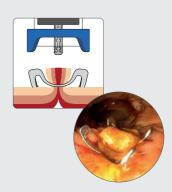
Grasping of the first perforation edge with one of the OTSC® Twin Grasper® jaw parts.



Grasping of the opposite perforation edge with second jaw part.



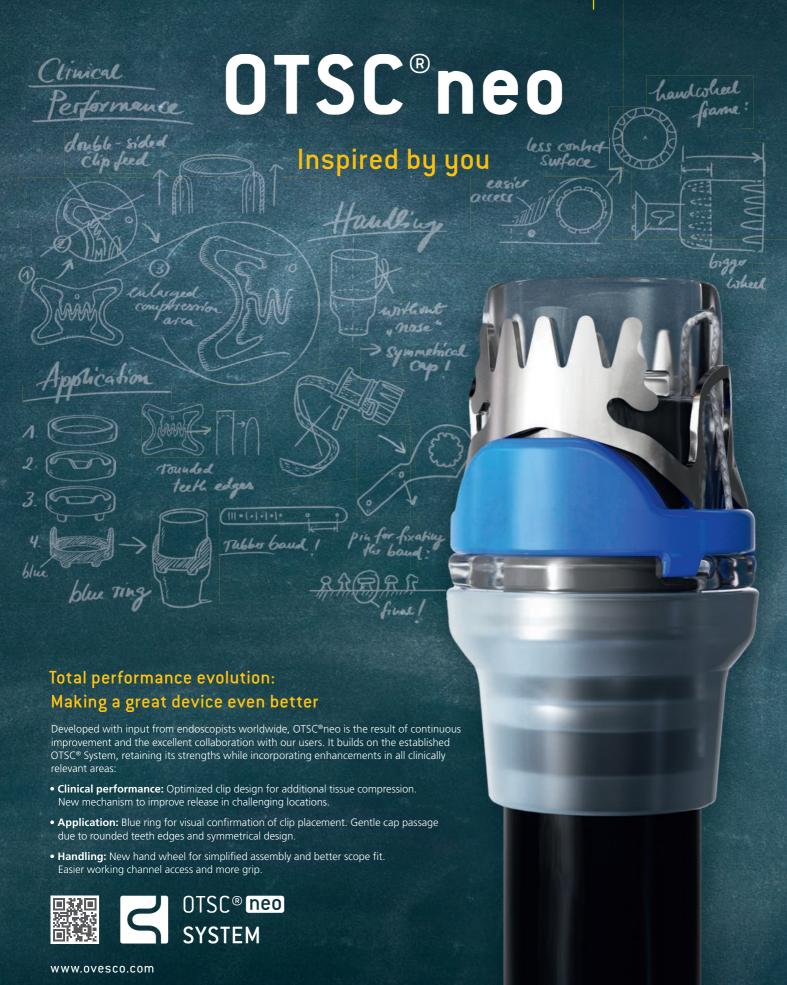
Retraction of perforation into cap (OTSC® Twin Grasper® must be fully inside cap).



Clip application and release of the OTSC® Twin Grasper® from the

Closure of a perforation in the rectum, source: Dr. Mauro Manno & Dr. Paola Soriani, UOSD Endoscopia Digestiva Area Nord, Azienda USC di Modena, Ospedale di Carpi e Mirandola, Italy

⁸ Küllmer A, Behn J, Glaser N, Thimme R, Caca K, Schmidt A. Over-the-scope clips (OTSC) are cost-effective in recurrent peptic ulcer bleeding. United European Gastroenterol J. 2019 Nov; 7(9): 1226-1233.



OTS C® neo System

Details and components

OTSC®neo is available in 2 different cap depths for capturing smaller or larger quantities of tissue, 3 different cap sizes and 3 different teeth shapes (a, t and gc) for different areas of application.





Type aBlunt teeth, primarily compression effect



Type t
Teeth with small spikes, compression and anchoring effect



Type gc Elongated teeth with spikes, application for gastric wall closure

OTSC® neo	Endoscope insertion part diameter Ø [mm]	Max. outer diameter Ø [mm]	Depth of cap	Clip type	Thread length	Variant	Ref.No.
			[mm]		[cm]		
11	8.5-11	16	3	а	165	11/3 a	100.03n
				t	165	11/3 t	100.04n
			6	a	165	11/6 a	100.09n
				t	165	11/6 t	100.10n
12	10.5–12	17.4	3	a	165	12/3 a	100.05n
					220	12/3 a	100.28n
				t	165	12/3 t	100.06n
					220	12/3 t	100.29n
			6	а	165	12/6 a	100.11n
					220	12/6 a	100.30n
				t	165	12/6 t	100.12n
					220	12/6 t	100.31n
				gc	165	12/6 gc	100.27n
14	11.5–14	20.1	3	a	220	14/3 a	100.07n
				t	220	14/3 t	100.08n
			6	а	220	14/6 a	100.13n
				t	220	14/6 t	100.14n

There are two instruments available to enable a more effective application, which can be inserted into the working channel next to the thread.

OTSC® ANCHOR	Working length [cm]	Max. diameter Ø [mm]	Needle width [mm]	Stitch depth [mm]	Ref.No.
OTSC® Anchor	165	2.4	12	4	200.10
OTSC® Anchor 220tt	220	2.4	9	2 – 2.5	200.11

OTSC® TWIN GRASPER®	Working length [cm]	Max. diameter Ø [mm]	Max. opening angle	Ref.No.
OTSC® Twin Grasper®	165	2.6	90°	200.44
OTSC® Twin Grasper®	220	2.6	90°	200.45



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