## MANOMETRY WITH GREATER CLARITY





ManoScan<sup>™</sup> Esophageal Manometry System High resolution and 3D esophageal manometry



#### **Full Featured Workstation**

Pressure and impedance data are downloaded to the workstation for review and diagnosis. The fullfeatured ManoScan™ ESO workstation includes:

- Portable cart system
- LCD flat panel touchscreen with articulating arm
- Modular data acquisition controller
- Windows<sup>™\*</sup>-based operating system
- LAN connection and WiFi-enabled
- Integrated catheter auto-calibration system
- Large lockable wheels
- Patient isolation transformer
- High-speed quality printer

#### ManoView<sup>™</sup> Software

ManoView<sup>™</sup> software provides an intuitive suite of manometry study tools, enabling physicians to effectively identify motility disorders

- Procedural tools yield precise measurement and detailed data analysis
- Anatomical profile display includes graphical pointers to identify landmarks, including LES, UES, and PIP
- eSleeve function instantly measures and ensures that sphincter barrier pressures are correctly recorded, despite movement of the LES/EGJ during swallowing
- High-resolution and conventional displays provide versatile and complete motility visualization
- ManoView<sup>™</sup> software can be installed on any Windows<sup>™</sup>-based computer, enabling clinicians to review studies remotely



# ADVANCED DISEASE DETECTION IN THE UPPER GI TRACT

The ManoScan<sup>™</sup> esophageal manometry system allows you to better map, display, and evaluate esophageal motor function. This easy-to-perform procedure precisely quantifies the contractions of the esophagus and its sphincters,¹ providing the clinician with reliable and consistent data for the accurate assessment of GI diseases.

Included with this advanced system are Chicago Classification algorithms and automatic findings as well as HIS/HL7 compatibility to support the "meaningful use" requirement.

#### Advantages over conventional manometry

- Can be performed in 10 minutes or less and with minimal specialized training<sup>2</sup>
- Data are depicted in spatiotemporal contour plots, making study interpretation easier
- Enhanced sensitivity provides useful information to aid in the diagnosis
  of conditions such as dysphasia, achalasia, and hiatal hernia<sup>3</sup>
- Provides additional motor correlates for esophageal hypermotility and GERD<sup>4</sup>



## MULTIPLE SOLUTIONS IN A SINGLE PLATFORM

#### ManoScan™ ESO Z Module

ManoScan™ ESO Z module and catheter provide circumferential assessment of bolus movement as well as physiological mapping of esophageal motor function

- Maps from the pharynx to the stomach,
   with a single placement of the catheter
- Incorporates impedance measurements to improve the ability to predict the success or failure of bolus movements through the esophagus

#### ManoScan™ ESO 3D Module

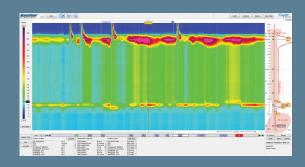
ManoScan™ ESO 3D module and catheter allow for 3D visualization of the esophagogastric junction (EGJ)⁵

- Includes radial EGJ pressures, length measurement, and symmetry
- Provides information useful for the assessment of EGJ physiology

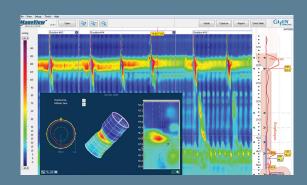
#### ManoScan<sup>™</sup> V

The ManoScan<sup>™</sup> video module works in conjunction with high-resolution manometry to allow for synchronized, simultaneous video and pressure collection, providing a previously unseen diagnostic picture

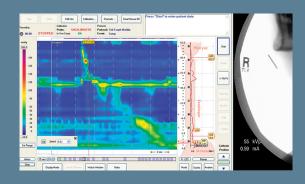
- When used with the ManoScan™ ESO manometry system, this module pairs pressure mapping with real-time video visualization of swallow coordination
- Fluoroscopic studies can provide complementary information to HRM in order to confirm diagnosis and treatment



ManoScan<sup>™</sup> ESO Z Module



ManoScan™ ESO 3D Module



ManoScan<sup>™</sup> V

#### ManoScan™ ESO Catheters

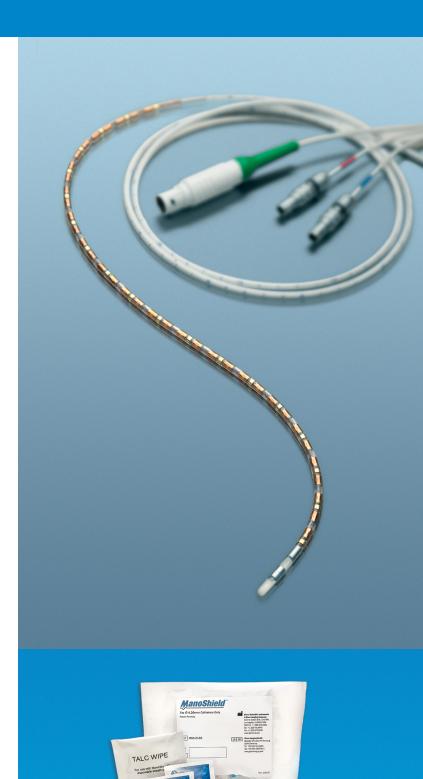
These advanced catheters incorporate proprietary circumferential capacitive pressure sensing technology

- 36 channels provide 432 points of measurement to create a pressure image from pharynx to stomach
- All sensors are true circumferential
- 18 impedance channels in ManoScan<sup>™</sup> ESO Z catheters **display bolus transition from pharynx to stomach**
- **96** 3D channels in ManoScan<sup>™</sup> ESO 3D catheters provide 3-dimensional EGJ visualization
- Small diameter (2.7 mm) catheters available
- Obtain a complete physiological map from the pharynx to the stomach, with a single positioning of the ManoScan™ ESO catheter

#### ManoShield™ Disposable Catheter Sheath

This single-use, hygienic, catheter protective cover is intended to prevent gross contamination of the catheter and reduce cleaning and disinfection efforts

- Serves as a disposable protective outer cover that is removed and discarded immediately after the procedure
- Reduces contamination exposure of staff and equipment post-procedure
- Creates more efficient workflow and minimizes catheter deterioration by reduction of manual cleaning and disinfection effort



# MEANINGFUL INNOVATIONS



"The associated benefits of the ManoScan™ ESO manometry system is that you get a more complete picture of esophageal pressure events. You have more data points, you have a bigger data set and acquisition, as well as displays are computerized, so you can use software tools to interrogate different parts of the esophageal pressure profile."

Dr. Gyawali, Professor of Medicine Washington University School of Medicine

## Further, Together

Medtronic is proud to partner with physicians, hospitals and institutions in the GI community who share our focus on advancing GI care and improving patients' lives. Together, we can work toward early detection and treatment of chronic GI diseases.

For more information, please contact your medtronic.com/gi

Caution: Federal law restricts this device to sale by or on the order of a licensed healthcare practitioner. Rx only.

**Risk Information:** The risks of catheter insertion into the nasal passage associated with the ManoScan™ ESO high resolution manometry system include: discomfort, nasal pain, minor bleeding, runny nose, throat discomfort, irregular heartbeat with dizziness, and perforation. In rare instances, the catheter may be misdirected into the trachea causing coughing or choking, or the catheter may shift up or down causing false results. Medical, endoscopic, or surgical intervention may be necessary to address any of these complications, should they occur. These systems are not compatible for use in an MRI magnetic field. Please refer to the product user manual or medtronic.com/qi for detailed information.

References: 1. Pandolfino JE, Fox MR, Bredenoord AJ, Kahrilas PJ. High-resolution manometry in clinical practice: utilizing pressure topography to classify oesophageal motility abnormalities. Neurogastroenterol Motil. 2009;21(8):796-806. 2. Bansal A, Kahrilas PJ. Has high resolution manometry changed the approach to esophageal motility disorders? Curr Opin Gastroenterol. 2010;26:344-351. Page 345, Col1 and Page 350, Col 2. 3. Kahrilas PJ. Esophageal motor disorders in terms of high-resolution esophageal pressure topography: what has changed? Am J Gastroenterol. 2010;105:981-987. Page 986, Col 2. 4. Mello M, Gyawali CP. Esophageal reflux disease. Gastroenterology Clinics of North America. Volume 43, Issue 1, Page 83.5. Kwistek MA, Pandolfino JE, Kahrilas PJ. 3D-high resolution manometry of the esophagogastric junction. Neurogastro Motil. 2011; 23(11):e461-469.

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