

GASTRIC DISEASE



1 million
new cases of gastric
cancer diagnosed in 2018...¹



...with a
5-year
survival rate
of **31%**²



3rd most
common cause
of cancer-related
death¹



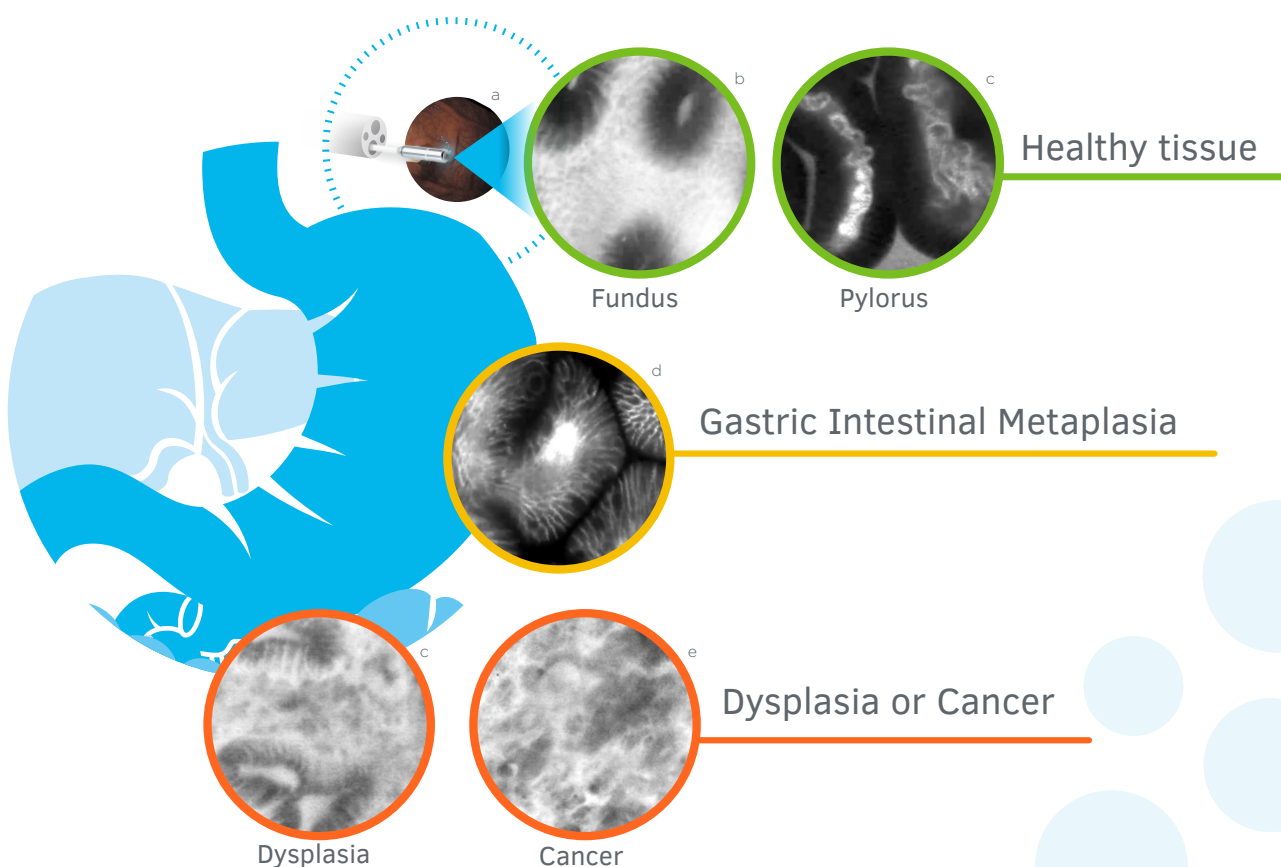
CELLVIZIO® CLINICAL VALUE

Reliably enable
the diagnosis of Gastric Intestinal
Metaplasia (GIM)³

Detection
of Gastric Cancer
with an accuracy of **98%**⁴
(pCLE combined with conventional endoscopic biopsies)

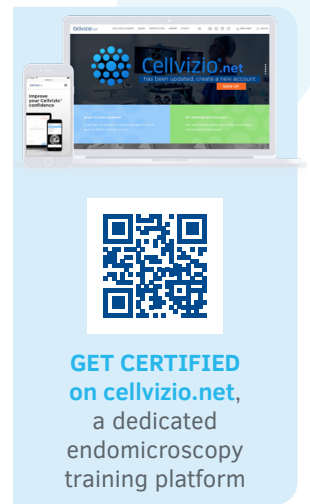
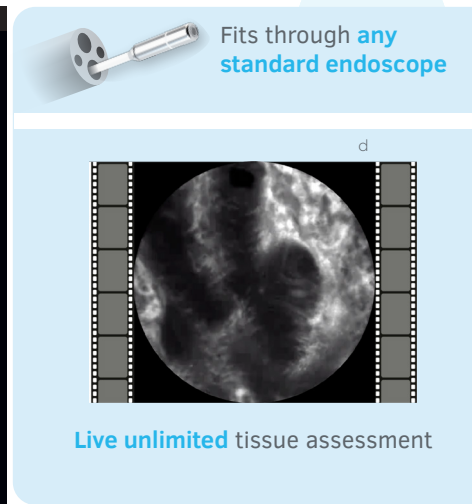
Targeted biopsies
to decrease randomized biopsies by
68%^{3,4}

REAL-TIME IN VIVO CELLULAR IMAGING IMAGE PATTERN RECOGNITION



Cellvizio®
SEE CELLS. CHANGE LIVES.

CELLVIZIO® SOLUTION



INTEGRATE CELLVIZIO® INTO YOUR PRACTICE

"CLE provides in-vivo real-time virtual histopathological images without any biopsies, and it is trustworthy for the endoscopists to make on-the-spot decisions on the diagnosis of early gastric cancer/precancerous lesions and the strategy of endoscopic treatment and follow-up."

Prof. Yan Qing Li,
Qilu Hospital Shandong University

A high accuracy with pCLE was demonstrated for predicting atrophic gastritis, intestinal metaplasia, and gastric neoplasia (low and high grade intraepithelial neoplasia, and adenocarcinoma).⁵

"Cellvizio® has become a seamless, effective part of my practice. It's an additional level of expertise I am pleased to offer to my patients."

Dr. J. Samarasekera,
UCI Medical Center

IMPROVE PATIENT MANAGEMENT

SCREENING

Localize lesions and target biopsies⁴

TREATMENT

Evaluate margins before, during, and after endoscopic resection^{7,8}



SURVEILLANCE OF GIM

Nearly double the diagnostic yield of GIM (49.25%) compared to WLE (26.56%) by targeting biopsies on a per-macroscopic lesion analysis³

DYSPLASIA

High diagnostic accuracy of gastric cancer (91.7%)⁴
High sensitivity and specificity values when differentiating high-grade from low-grade intraepithelial neoplasia⁶



GastroFlex™ UHD Miniprobe

Compatible operating channel
≥ 2.8 mm

Length
3 m

Number of uses per probe
20

Field of view
Ø240 µm

Resolution
1 µm

Confocal depth
55 to 65 µm

a. Courtesy of Dr. Louie. b. Courtesy of Dr. Pleskow. c. Courtesy of Pr. Rösch. d. Courtesy of Dr. Zhen Li. e. Courtesy of Dr. Wu. f. Courtesy of Dr. Tomizawa.

1. World Health Organization: International Agency for Research on cancer, 2018, http://gco.iarc.fr/today/online-analysis-table?v=2018&mode=cancer&mode_population=continents&population=900&populations=900&key=asr&sex=0&cancer=39&type=1&statistic=5&prevalence=0&population_group=0&ages_group=5&5D=0&ages_group=5&5D=17&nb_items=5&group_cancer=1&include_nmssc=1&include_nmssc_other=1. 2. Harada et al. Recent trend in gastric cancer treatment in the USA, Journal of Cancer Metastasis and Treatment, 2018. 3. Li Zhen et al. Confocal laser endomicroscopy for in vivo detection of gastric intestinal metaplasia: a randomized controlled trial, Endoscopy, 2013. 4. Bok G.H. et al. The Accuracy of probe-based Confocal Endomicroscopy versus Conventional Endoscopic Biopsies for the Diagnosis of Superficial Neoplasia (with videos), Gastro-Intestinal Endoscopy, 2013. 5. Li Z. et al. New Classification of Gastric Pit Patterns and Vessel Architecture Using Probe-based Confocal Laser Endomicroscopy. J Clin Gastroenterol, 2015. 6. Qian et al. Meta-analysis of confocal laser endomicroscopy for the diagnosis of gastric neoplasia and adenocarcinoma, Journal of Digestive Diseases, 2016. 7. Ji R. et al. Confocal endomicroscopy for in vivo prediction of completeness after endoscopic mucosal resection, Surg Endosc, 2011. 8. Jeon S.R. et al. Optical biopsies by confocal endomicroscopy prevent additive endoscopic biopsies before endoscopic submucosal dissection in gastric epithelial neoplasias: a prospective, comparative study, Gastrointest Endosc, 2011.

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