

NON-VASCULAR NITHINOL STENTS

GASTROINTESTINAL ENDOSCOPY AND BRONCHOLOGY

European Distributor

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Non-vascular Ni-Ti Alloy Self-expanding Stent System for the GI tract and for the Airways

Changzhou Health Microport Medical Device Co., LTD. was established in 2008.

With 12,000 square meters of building area, the company has more than 800 square meters of ISO-Class 8 certified manufacturing are.

The company has set up the complete quality system and has obtained ISO 13485, ISO 9001, and CE certificates. The stents are not only sold locally in China but also exported to Europe, as well as almost all over the world.

The products have excellent references from several European customers. All products are CE certified according to the European requirements.

Stents for Gastrointestinal endoscopy:

OESOPHAGEAL STENTS

- Fully covered and partially covered standard oesophageal stents
- Fully covered “proximal release” oesophageal stents
- Fully covered Cardia Umbrella stents
- Fully covered oesophageal stents with “anti-reflux valve” inside
- Fully covered “Leakage” stents for oesophageal fistulas

BILIARY STENTS

- Uncovered TTS biliary stents
- Partially covered TTS biliary stents
- Fully covered TTS biliary stents

INTESTINAL STENTS

- Uncovered and partially covered TTS pylorus stents
- Uncovered and partially covered TTS duodenal / colon stents
- Uncovered and partially covered TTS colon stents
- Uncovered and partially covered OTW colon / rectum stents
- Fully covered TTS stents for Pseudo-Cyst drainage

AIRWAY STENTS

- Uncovered and fully covered trachea / bronchus stents

OESOPHAGEAL STENTS

Application:

Used to dilate and ensure passage in oesophageal strictures as well as cardia, anastomotic stenosis and to cover oesophageal fistulas.

Characteristics:

The stent applies continuous gentle radial force on the inner wall of the oesophagus in order to expand the stenosis gradually and maintain the unobstructed passage of the oesophagus. The cover of the stent can effectively prevent the tumorous tissue ingrowth into the mesh of the stent, this way reduces the possibility of a future stenosis.

Lasso can be found on both ends of the stent which helps the mobilization of migrated stent or removal of the entire stent completely from the lumen.

Stent introducer system

OTW application - 8 mm (24 Fr.) / 700 mm - Guidewire compatibility: 0.035"

X-ray position markers on introducer

STANDARD OESOPHAGEAL STENTS

Partially covered – diameter 26/20/26 mm – X-ray position markers on both ends of the stent

Reference	Length (mm)
102-20-060	60
102-20-080	80
102-20-100	100
102-20-120	120
102-20-140	140
102-20-160	160

Fully covered - diameter 26/20/26mm - distal release

Reference	Length (mm)
103-20-060	60
103-20-080	80
103-20-100	100
102-20-120	120
102-20-140	140
102-20-160	160

Fully covered – diameter 26/20/26 mm – proximal release

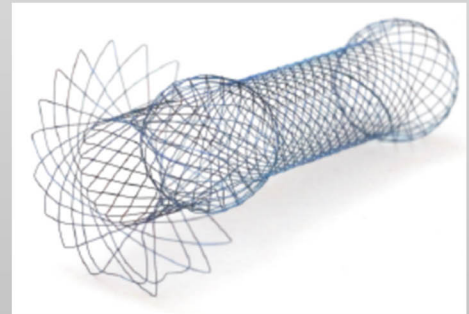
Reference	Diameter (mm)	Length (mm)
104-20-060	26/20/26	60
104-20-080	26/20/26	80
104-20-100	26/20/26	100
104-20-120	26/20/26	120
104-20-140	26/20/26	140
104-20-160	26/20/26	160



SPECIAL OESOPHAGEAL STENTS

Fully covered Cardia Umbrella stent

Reference	Diameter (mm)	Length (mm)
BKUGFS-02080	30/45	80
BKUGFS-02100	30/45	100
BKUGFS-02120	30/45	120
BKUGFS-02140	30/45	140



Fully covered Leakage / Fistula stent

Reference	Diameter (mm)	Length (mm)	Release
103-28-080	34/28/34	80	Distal
103-28-100	34/28/34	100	Distal
103-28-120	34/28/34	120	Distal
103-28-140	34/28/34	140	Distal
104-28-080	34/28/34	80	Proximal
104-28-100	34/28/34	100	Proximal
104-28-120	34/28/34	120	Proximal
104-28-140	34/28/34	140	Proximal



Fully covered oesophageal stents with Anti-reflux valve

Reference	Diameter (mm)	Length (mm)
BKARST-0320-060	26/20/26	60
BKARST-0320-080	26/20/26	80
BKARST-0320-100	26/20/26	100
BKARST-0320-120	26/20/26	120
BKARST-0320-140	26/20/26	140
BKARST-0320-160	26/20/26	160



BILIARY STENTS

Application:

Used to dilate and ensure passage in biliary or papillary strictures and stenosis caused by malignant or benign lesions as well as ensuring the continuous passage of biliary fluid through any obstructions caused by biliary stones or other biliary pathologies.

Characteristics:

The stent applies continuous gentle radial force on the inner wall of the bile duct in order to expand the stenosis gradually and maintain the unobstructed passage of the fluids. X-ray markers are placed on the stent for clear visibility and accurate positioning under fluoroscopy control.

Introducer:

TTS introducer with 0.035" guidewire compatibility – 8 Fr. / 1850 mm Highest quality introducer system – the stent re-position is possible even if the two-third of the stent's length is released. In case of re-positioning of the stent is required the introducer can close (pull back) the stent under the catheters and after re-positioning the stent can be opened again. X-ray marker rings are placed on the introducer for accurate positioning.

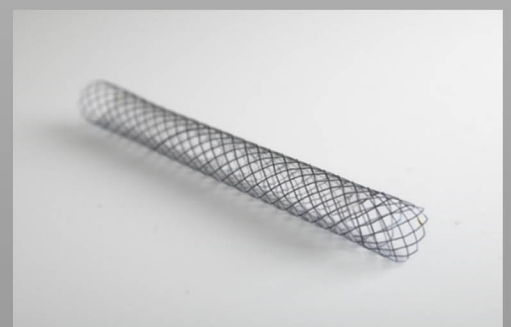
Uncovered biliary stents

Reference	Diameter (mm)	Length (mm)
303-8-040	8	40
303-8-060	8	60
303-8-080	8	80
303-8-100	8	100
303-10-040	10	40
303-10-060	10	60
303-10-080	10	80
303-10-100	10	100



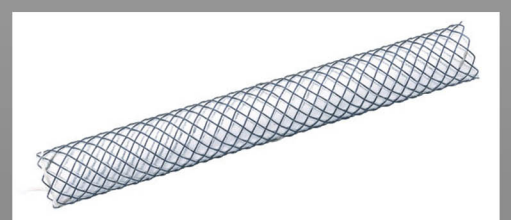
Partially covered biliary stents

Reference	Diameter (mm)	Length (mm)
304-8-040PC	8	40 (30)
304-8-060PC	8	60 (40)
304-8-080PC	8	80 (60)
304-8-100PC	8	100 (80)
304-10-040PC	10	40 (30)
304-10-060PC	10	60 (40)
304-10-080PC	10	80 (60)
304-10-100PC	10	100 (80)



Fully covered biliary stents

Reference	Diameter (mm)	Length (mm)
304-8-040	8	40
304-8-060	8	60
304-8-080	8	80
304-8-100	8	100
304-10-040	10	40
304-10-060	10	60
304-10-080	10	80
304-10-100	10	100



INTESTINAL STENTS (Duodenal, pyloric, colon, colon-rectum)

PYLORUS STENTS

Used to dilate of the stenosis of pylorus and to maintain the continuous passage of the sphincter.

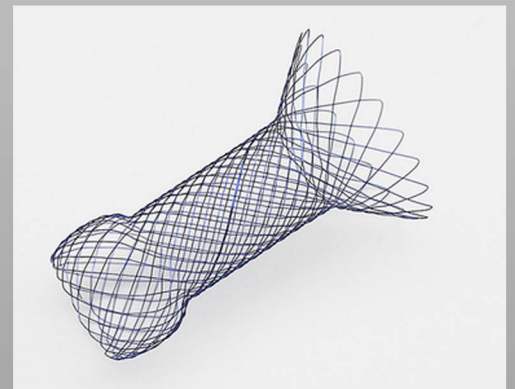
The stent itself applies a gentle continuous tensile force which effectively expands the stenosis thus reducing the patient’s discomfort. X-ray markers are available on the stent for accurate positioning under fluoroscopy Physiological anatomy port design – uncovered and partially covered versions are available to avoid the covering of Vater papilla

Introducer

10 Fr. / 2300 mm – TTS introduction – positioning rings are placed on introducer for excellent visibility during placement under fluoroscopy control – 0.035” guidewire compatible.

Uncovered pylorus stents

Reference	Diameter (mm)	Length (mm)
407-20-060	25/20/25	60
407-20-080	25/20/25	80
407-20-100	25/20/25	100
407-20-120	25/20/25	120



Partially covered pylorus stents

Reference	Diameter (mm)	Length (mm)
408-20-060	25/20/25	60 (30)
408-20-080	25/20/25	80 (50)
408-20-100	25/20/25	100 (70)
408-20-120	25/20/25	120 (90)



DUODENAL STENTS

Used to dilate duodenal stenosis and strictures maintaining the continuous passage of the duodenal lumen. As introducer is TTS and long enough to introduce through the colonoscope working channel this type of stents can be used to dilate colon strictures as well.

Characteristics:

The stent applies continuous gentle radial force on the inner wall of the duodenum in order to expand the stenosis gradually and maintain the unobstructed passage of the lumen. Lasso is served on both ends of the stent which helps the mobilization of migrated stent or the removal of the stent completely from the lumen. X-ray markers are available on the stents for accurate positioning and for excellent visibility under fluoroscopy. Stent with excellent flexibility conforming to the physiology of the duodenum and colon. TTS introducer 10 Fr. (3.3 mm) / 2300 mm – positioning rings for excellent visibility and accurate placement under fluoroscopy – 0.035" guidewire compatible

Uncovered Duodenal / Colon TTS stents

Reference	Diameter (mm)	Length (mm)
407-20-060	25/20/25	60
407-20-080	25/20/25	80
407-20-100	25/20/25	100
407-20-120	25/20/25	120

Partially covered Duodenal / Colon TTS stents

Reference	Diameter (mm)	Length (mm)
PDC2306	25/20/25	60
PDC2308	25/20/25	80
PDC2310	25/20/25	100
PDC2312	25/20/25	120

COLON / RECTUM OTW STENTS

OTW introducer – 0.035" guidewire compatible – 8 mm (24 Fr.) / 700 mm

Uncovered Colon / Rectum OTW stents

Reference	Diameter (mm)	Length (mm)
401-28-060	36/28/36	60
401-28-080	36/28/36	80
401-28-100	36/28/36	100
401-30-060	36/30/36	60
401-30-080	36/30/36	80
401-30-100	36/30/36	100

Uncovered Colon / Rectum OTW stents

Reference	Diameter (mm)	Length (mm)
402-28-060	36/28/36	60
402-28-080	36/28/36	80
402-28-100	36/28/36	100
402-30-060	36/30/36	60
402-30-080	36/30/36	80
402-30-100	36/30/36	100

PSEUDO-CYST STENTS

The Pancreas pseudocyst stent is used for reliable drainage of endoscopic removal of concrement. The stent is made of Nitinol wire. It is a flexible, fine mesh prosthesis which has radiopaque markers on each end and at the center. The Pancreatic pseudocyst stent is made of a Nitinol wire woven into a tubular mesh. The shape design makes the stent more flexible, adaptable and self-expandable. The outer tube of the delivery system serves to restrict the stent from retracting during deployment. It contains radiopaque bands located on the delivery system tubes and on the stent that aid in imaging during deployment. The inner tube contains a central lumen that houses a 0.035in./0.89mm guide wire.

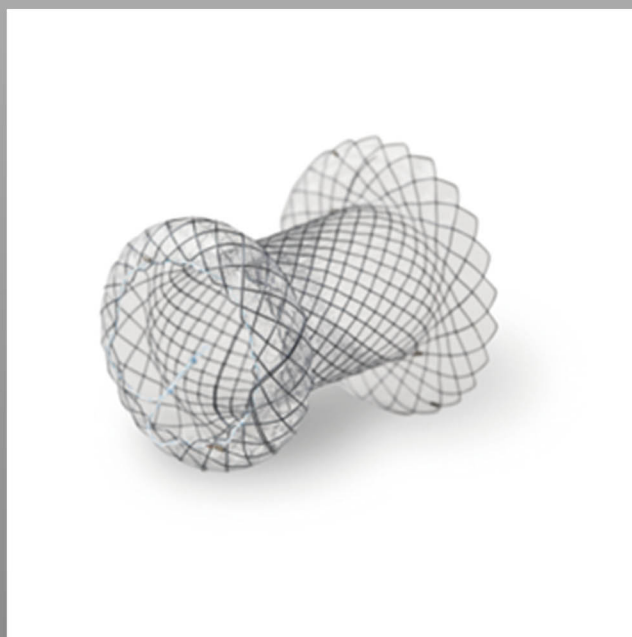
All Pseudo-Cyst nithinol stents are fully covered (end-to-end covered)

Introducer

10,5 Fr. / 2300 mm with X-ray marker rings for accurate positioning under fluoroscopy control – 0.035" guidewire compatible

Fully covered Pseudo-Cyst stents

Reference	Diameter (mm)	Length (mm)
333-14-030	24/14/24	30
333-16-020	24/16/24	20
333-16-025	24/16/24	25



AIRWAY STENTS

TRACHEA / BRONCHUS STENTS

Application:

Trachea / Bronchus stents are used to dilate malignant or benign lesions caused by primary tracheal and bronchial stenosis.

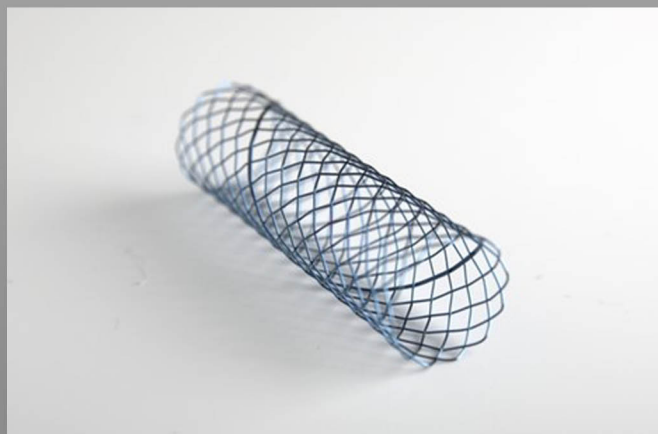
Characteristics:

The stent applies continuous gentle radial force which can effectively expand the stenosis thus reducing the patient's discomfort.

Imaging markers are placed on the stent for the clear visibility and accurate placement under fluoroscopy control.

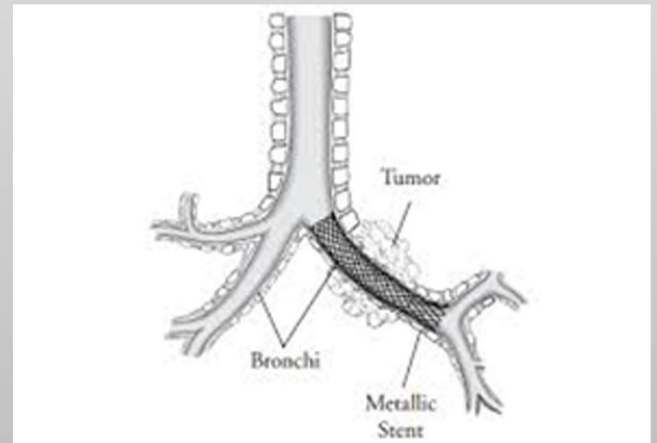
Introducer:

6 mm (18 Fr.) / 700 mm – OTW placement – 0.035" guidewire compatible – X-ray positioning rings on the catheter for accurate placement



Trachea / Bronchus OTW uncovered stents

Reference	Diameter (mm)	Length (mm)
501-10-030	12/10/12	30
501-12-020	14/12/14	20
501-12-040	14/12/14	40
501-14-020	16/14/16	20
501-14-030	16/14/16	30
501-14-040	16/14/16	40
501-16-030	18/16/18	30
501-16-040	18/16/18	40
501-16-050	18/16/18	50
501-16-060	18/16/18	60
501-16-080	18/16/18	80
501-18-030	20/18/20	30
501-18-040	20/18/20	40
501-18-050	20/18/20	50
501-18-060	20/18/20	60
501-18-080	20/18/20	80
501-20-040	22/20/22	40
501-20-060	22/20/22	60
501-20-080	22/20/22	80



Trachea / Bronchus OTW fully covered stents

Reference	Diameter (mm)	Length (mm)
502-10-030	12/10/12	30
502-12-020	14/12/14	20
502-12-040	14/12/14	40
502-14-020	16/14/16	20
502-14-030	16/14/16	30
502-14-040	16/14/16	40
502-16-030	18/16/18	30
502-16-040	18/16/18	40
502-16-050	18/16/18	50
502-16-060	18/16/18	60
502-16-080	18/16/18	80
502-18-030	20/18/20	30
502-18-040	20/18/20	40
502-18-050	20/18/20	50
502-18-060	20/18/20	60
502-18-080	20/18/20	80
502-20-040	22/20/22	40
502-20-060	22/20/22	60
502-20-080	22/20/22	80





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