

# **Argon Beam Coagulation** in Gynecologic Oncology

High-risk gynecologic cancer patients demonstrate the continued need for more minimally invasive treatments with higher success rates. That's why surgeons choose the high precision of Argon Beam Coagulation (ABC®) for ablation, cytoreduction, and general hemostasis. ABC® creates a more homogenous eschar<sup>1,2</sup> by delivering a low depth of coagulation and decreases thermal damage to tissue<sup>1,2,5</sup> that can reduce risk of tumor recurrence.<sup>2-4\*</sup>

## Advancing cancer treatment, ABC® has been shown to:

- Be associated with a significantly higher rate of complete cytoreduction in various tissues<sup>3,4</sup>
- Achieve complete cytoreduction 45.6% more often than conventional electrosurgery, p<0.004<sup>4</sup>
- Achieve optimal disease status 93.6% of the time, p<0.023<sup>4</sup>
- Result in advanced ovarian carcinoma patients being more likely to have no gross residual disease<sup>3‡</sup>
- Rapidly destroy extensive peritoneal implants of ovarian cancer<sup>2</sup>

## Improving Patient Outcomes, ABC® has been shown to:

- Reduce average length of postop stay<sup>2-4\*</sup>
- Reduce procedure time by up to 30%1\*
- Reduce intraoperative blood loss<sup>1\*</sup>

## Benefiting Surgical Technique, ABC® has been shown to:

- Coagulate blood vessels ≤3mm in diameter without ligature<sup>1</sup>
- Minimize surgical smoke production<sup>1\*</sup>
- Clear fluid, blood, debris, and smoke out of the way<sup>1,3</sup>
- Keep tissue temperatures below 125°C, limiting unintended injury<sup>3†</sup>



## Integrating ABC® Technology into Your Practice

Conditions Targeted for ABC® Treatment	Surgical Approach	Recommended ABC® Handpiece	Recommended ABC® Mode
<ul> <li>Ovarian carcinoma</li> <li>Endometrial carcinoma</li> <li>Intra-abdominal lesions</li> <li>Pseudomyxoma peritoneii</li> <li>Vaginal Intraepithelial Neoplasia</li> </ul>	Open	6" Bend-A-Beam®	ABC® Open
	Laparoscopic	36cm Lap ABC® Probe	ABC® Lap
	Hysteroscopic	ABCFlex™ Probe	ABCFlex™



This is all made possible by the HelixAR™ ABC® System, the latest advanced energy generator for CONMED's proprietary energy algorithm: ABC® Technology.

## READY TO TRANSFORM YOUR PRACTICE AND THE LIVES OF YOUR PATIENTS?

Contact your local CONMED rep to schedule a trial of the HelixAR™ ABC® System.



### **ORDERING & PRODUCT INFORMATION**

DESCRIPTION	CATALOG NUMBER
Helix AR™ ABC® System	
Helix AR™ System, ABC® Generator and Cart	60-8800-SET
Helix AR™ System, ABC® Generator and Cart, with Monopolar and Bipolar Footswitch	60-8800-SYS
Open ABC® Handpieces	
3" (7.6cm) Bend-A-Beam® Handpiece with 10' (3.05m) Cord. Single Use, Sterile 10/case	134003
6" (15.2cm) Bend-A-Beam® Handpiece with 10' (3.05m) Cord. Single Use, Sterile 10/case	134006
9" (22.8cm) Bend-A-Beam® Handpiece with 10' (3.05m) Cord. Single Use, Sterile 10/case	134009
Triple Option ABC® Handpiece with 10' (3.05m) Cord. Single Use, Sterile 10/case	130321
Single Function ABC® Handpiece with 10' (3.05m) Cord. Single Use, Sterile 10/case.	130344
45° Angled Foot Control Handpiece with 10′ (3.05m) Cord. Single Use, Sterile 10/case	130345
Laparoscopic ABC® Probes	
28cm x 5mm Hand Control ABC® Probe with 10' (3.05m) Cord Single Use, Sterile 10/case	160656
36cm x 5mm Hand Control ABC® Probe with 10' (3.05m) Cord. Single Use, Sterile 10/case	160636
44cm x 5mm Hand Control ABC® Probe with 10' (3.05m) Cord. Single Use, Sterile 10/case	160644
28cm x 5mm Foot Control ABC® Probe with 10' (3.05m) Cord Single Use, Sterile 10/case	130342
28cm x 10mm Foot Control ABC® Probe with 10' (3.05m) Cord Single Use, Sterile 10/case	160655
Endoscopic ABCFlex™ Probes	
2.3mm (7Fr) x 220cm Foot Control Probe with 10' (3.05m) Cord Single Use, Sterile 10/case	133023
2.3mm (7Fr) x 270cm Foot Control Probe with 10' (3.05m) Cord. Single Use, Sterile 10/case	133270
***************************************	

<sup>\*</sup>When compared to conventional techniques. †This is compared to conventional electrosurgery's potential to heat tissue up to 270°C. ‡57% of patients in the Brand (1990) study left with no residual disease compared to 25% baseline survival rate at 5 years.

#### **REFERENCES**

- 1. Galen, D. I., Jacobson, A., & Weckstein, L. N. (1994). Argon beam coagulation rescue to correct bleeding during pelviscopy. The Journal of the American Association of Gynecologic Laparoscopists, 1(2), 146–149.
- 2. Huff, T., & Brand, E. (1992). Pseudomyxoma peritoneii: treatment with the argon beam coagulator. Obstetrics and gynecology, 80(3 Pt 2), 569-571.
- 3. Brand, E., & Pearlman, N. (1990). Electrosurgical debulking of ovarian cancer: a new technique using the argon beam coagulator. Gynecologic oncology, 39(2), 115–118.
- 4. Bristow, R. E., & Montz, F. J. (2001). Complete surgical cytoreduction of advanced ovarian carcinoma using the argon beam coagulator. Gynecologic oncology, 83(1), 39–48.
- 5. Based on CONMED internal ex-vivo protocol: "ABC vs Spray Coag Thermal and Tissue Effect Comparison Engineering Memo #801-21958."

CONMED Corporation 11311 Concept Blvd. Largo, FL 337733 Toll Free: 1-866-4CONMED International: 727-219-3310 www.CONMED.com

customerexperience@conmed.com internationalcustomerexperience@conmed.com