REACH FOR THE FAR CORNERS OF THE UTERUS

Approach challenging resections with confidence

The MyoSure REACH device: the solution you have been looking for to resect hard-to-reach pathology.

MyoSure.com/REACH

Designed to maximize access for removal of fibroids up to 3 cm

Evolution of the trusted MyoSure® device design

Designed to access hard-to-reach areas, including the upper third of the uterine cavity
The challenge of hard-to-reach intrauterine pathology

When planning to resect a pathology in a hard-to-reach area, including the upper third of the uterine cavity, do you:

**ANTICIPATE PROCEDURAL DIFFICULTY?**

**EXPECT A LONGER-THAN-AVERAGE PROCEDURE?**

**ANATOMICALLY CHALLENGING PATHOLOGY**

**POTENTIAL CASE STUDY**
Abnormal uterine bleeding in a 45-year-old woman

- **Chief complaint:** heavy menstrual bleeding x 6 months
- **Nulliparity, hypertension, obesity**
- **Saline-infused sonohysterography:** polypoid lesion identified, originating from the fundus, measuring 1.5 cm in diameter

**Approaches to resecting hard-to-reach pathology**

<table>
<thead>
<tr>
<th>APPROACH</th>
<th>RATIONALE</th>
<th>LIMITATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grasping forceps</td>
<td>• Inexpensive</td>
<td>• Requires manual evacuation of remaining tissue pathology</td>
</tr>
<tr>
<td></td>
<td>• Easy to use</td>
<td>• Nonvisualized insertion of instrument</td>
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<tr>
<td></td>
<td>• Reprocessable</td>
<td>• Struggle to completely remove pathology¹</td>
</tr>
<tr>
<td>Resection with electrical energy (eg, bipolar loop resection)</td>
<td>• Done under direct visualization</td>
<td>• Risk of thermal injury to adjacent, healthy uterine tissue²</td>
</tr>
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<td>Switching instrumentation for resection during procedure when necessary</td>
<td>• Adapting the procedure to the challenges that arise</td>
<td>• Time-consuming</td>
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| REACH for the far corners of the uterus       |                                                |                                                          |

**APPREHENSION CHALLENGING RESECTIONS WITH CONFIDENCE**

- **Designed to maximize access for removal of fibroids up to 3 cm**
- **Evolution of the trusted MyoSure device design with all of the capabilities of the original**
- **Designed to access hard-to-reach areas, including the upper third of the uterine cavity**

Introducing the MyoSure® REACH device

- Cutting window is less than 1 mm from the distal tip

<1 mm
What effect could the utility of the MyoSure REACH device have on your patients?

- **Complete resection of benign lesions may decrease likelihood of symptom recurrence**
- **Up to 12.9% of polyps may be malignant**
- **Improved access to hard-to-reach pathology helps to improve operative efficiency**

Contact a sales representative or visit MyoSure.com/REACH to learn more.

### ORDERING INFORMATION

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>ORDER NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>MyoSure REACH device — 3 devices per box</td>
<td>10-403FC</td>
</tr>
<tr>
<td>MyoSure LITE device — 3 devices per box</td>
<td>30-403LITE</td>
</tr>
<tr>
<td>MyoSure device — 3 devices per box</td>
<td>10-403</td>
</tr>
<tr>
<td>MyoSure XL device — 3 devices per box</td>
<td>50-503XL</td>
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<tr>
<td>MyoSure control unit with foot pedal</td>
<td>10-550</td>
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</table>

### IMPORTANT SAFETY INFORMATION

The MyoSure® tissue removal system is intended for hysteroscopic intrauterine procedures by trained gynecologists to resect and remove tissue including submucous myomas, endometrial polyps, and retained products of conception. It is not appropriate for patients who are or may be pregnant, or are exhibiting pelvic infection, cervical malignancies, or previously diagnosed endometrial cancer.

### REFERENCES