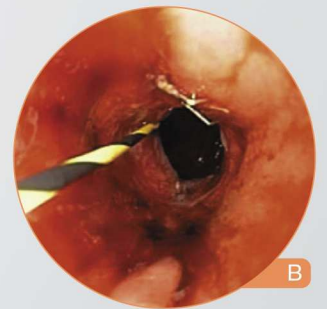
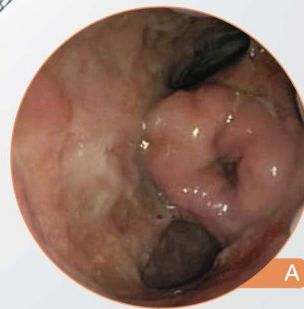
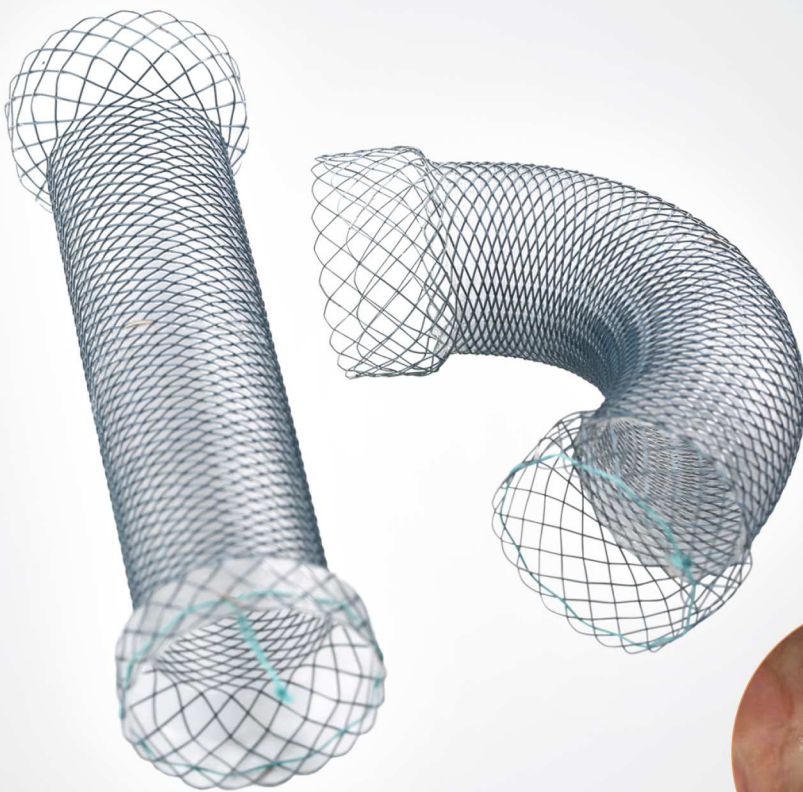


Enteral Colonic Stent



A. Complete disunion of the ileoanal anastomosis
B. The 5-week endoscopic control showing complete repair of the anastomotic disunion

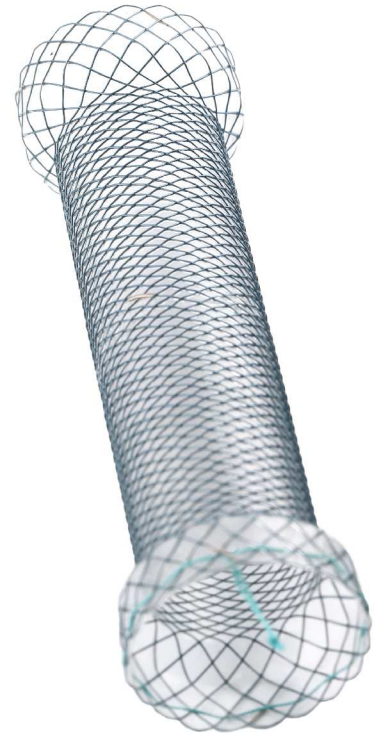
by Laila Amrani, MD et al [Gastrointest Endosc. 2009 Jun;69(7):1282-7]

Niti-S™ Enteral Colonic Stent

for benign and malignant colorectal obstruction

Features

- Fixed cell with braided construction
 - High flexibility and optimal radial force
- Silicone covering and soft round ends
 - Reduce tissue ingrowth and hyperplasia reaction
- Visible green suture for easy removal
- Radiopaque marker: 4 (four) at both ends & 2 (two) in the middle



Ordering Information

OTW (Over The Wire)					
Product	Code	Stent		Delivery	
		Diameter (mm)	Length (cm)	Profile (Fr)	Usable length (cm)
Fully covered	CS**_F	18	6, 8, 10, 12, 14, 15	16	70
		20, 22		20	
		24, 26, 28		22	
Both ends bare	CS**_B	18	6, 8, 10, 12, 14, 15	16	
		20, 22		20	
		24, 26, 28		22	
Distal end bare	CS**_H	18	6, 8, 10, 12, 14, 15	16	
		20, 22		20	
		24, 26, 28		22	

TTS (Through The Scope)					
Product	Code	Stent		Delivery	
		Diameter (mm)	Length (cm)	Profile (Fr)	Usable length (cm)
Fully covered	CST**_F	18, 20	6, 8, 10, 12, 14, 15	10.5	220
Both ends bare	CST**_B				
Distal end bare	CST**_H				

Released Article

* From iatrogenic digestive perforation to complete anastomotic disunion: endoscopic stenting as a new concept of stent-guided regeneration and re-epithelialization by Laila Amrani, MD et al [Gastrointest Endosc. 2009 Jun;69(7):1282-7]