Clinical Summary

EndoRotor®

# Powered Endoscopic Debridement (PED)
for Necrosectomy

## Challenges Associated with Treatment of Walled-Off Necrosis

- Lack of proper tools for debridement[1]
- Treatment duration (avg. of 4 debridement sessions per patient)[2]
- High morbidity, mortality, and healthcare utilization[3]

NecroMax 6.0

## Risks Associated with Treatment

- Stent dislodgement due to constant removal of debris into stomach
- Serious adverse events (SAEs) such as major bleeding and perforation[4]
- Major vessel involvement (i.e. superior mesenteric artery within cavity)[5]

EndoRotor 3.2 PED

| Table 1: Conventional Tools[2] | |
|---|---|
| Number of patients | 233 |
| Collection size (cm) | 10.5-15.2 |
| Mean interventions | 4.09 |
| Patients requiring surgery | 13% |
| Complication rate | 21.3% |
| Mean stay: DEN to discharge (days) | 33 |
| Mean % of debris reduction per DEN | Not reported* |

*Mean % of debris reduction per DEN not reported

| Table 2: EndoRotor | 3.2 PED[8] | NecroMax 6.0[9] |
|---|---|---|
| Number of patients | 30 | 41 |
| Collection size (cm) | 6-22 | Not reported** |
| Mean interventions | 2.1 | 1.6 |
| Patients requiring surgery | 0 | 0 |
| Device-related adverse events | 0% | 7% |
| Mean stay: DEN to discharge (days) | 18 | Not reported*** |
| Mean % of debris reduction per DEN | 66% | 85% |

**Collection size is not reported
***Patient length of stay is not reported


1. Jagielski M, et al. Various Endoscopic Techniques for Treatment of Consequences of Acute Necrotizing Pancreatitis: Practical Updates for the Endoscopist. Journal of Clinical Medicine. 2020; 9(1):117.
2. Puli S, et al. A Meta-analysis and Systematic Review of Endoscopic Transmural Necrosectomy (ETN) for Walled-Off Pancreatic Necrosis: 2010 Presidential Poster. American Journal of Gastroenterology, 105. doi:10.14309/00000434-201010001-00142.
3. Baroud S, et al. A Protocolized Management of Walled-Off Necrosis (WON) Reduces Time to WON Resolution and Improves Outcomes. Clinical Gastroenterology and Hepatology, 2023;21:2543–2550, doi: 10.1016/j.cgh.2023.04.029.
4. Baron T, et al. American Gastroenterological Association Clinical Practice Update: Management of Pancreatic Necrosis. Gastroenterology, 158(1). doi: 10.1053/j.gastro.2019.07.064.
5. Rizzatti G, et al. Endorotor-Based Endoscopic Necrosectomy Avoiding the Superior Mesenteric Artery. Endoscopy, vol. 52, no. 11, 2020, doi:10.1055/a-1151-4694.
6. Shhyu J, et al. Necrotizing Pancreatitis: Diagnosis, Imaging, and Intervention. RadioGraphics, vol. 34, no. 5, 2014, pp. 1218–1239., doi:10.1148/rg.345130012.
7. Machado N, et al. Disconnected Duct Syndrome: A Bridge to Nowhere. Pancreatic Disorders & Therapy, vol. 05, no. 02, 2015, doi:10.4172/2165-7092.1000153.
8.Stassen P, et al. 961 Prospective Trial Evaluating the Safety And Effectiveness Of The Interscope Endorotor® Resection System For Direct Endoscopic Necrosectomy of Walled-Of Pancreatic Necrosis (Endorotor Den Trial). Gastrointestinal Endoscopy, vol. 91, no. 6, 2020, doi: 10.1016/j.gie.2020.03.622.
9. Shinn B, et al. Safety, Efficacy and Clinical Utility of the 5.1mm EndoRotor Powered Debridement Catheter for Treatment of Walled-Off Pancreatic Necrosis. Gastrointest Endosc. Published online February 29, 2024. doi:10.1016/j.gie.2024.02.016.


Powering Endoscopy Interscope™

**Visit www.interscopemed.com or contact Customer Service:**


**USA**
Tel: 800-461-4289 (toll-free in U.S.)
Email: info@interscopemed.com

Interscope, Inc.
200 Commerce Drive
Northbridge, MA 01534
USA
TEL: +1-800-461-4289
0031 (0) 73-3032541
www.interscopemed.com

EC REP
Emergo Europe
Westervoortsedijk 60,
6827 AT Aarnhem
The Netherlands


CE 2797