

The Thermablate®EAS system is a software-controlled thermal ablation device designed to ablate the endometrial lining of the uterus in women suffering from AUB, and in whom child bearing is complete.



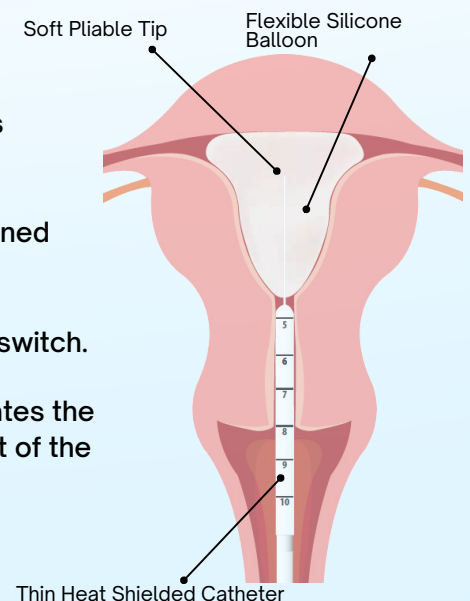
The system is comprised of a 1kg treatment control unit and a disposable balloon catheter cartridge.

Thermablate is indicated for women with sounding lengths between 8cm-12cm, inclusive.

## How Does Thermablate Work?\*

- 1 The user slowly inserts catheter until balloon tip touches the fundus of the uterine cavity.
- 2 Depth markings on catheter must match previously obtained sounding measurements.
- 3 Treatment cycle is activated with a simple finger trigger switch.
- 4 The Thermablate system automatically inflates and deflates the balloon to ensure a uniform remodelling throughout most of the uterine lining.
- 5 Total treatment time: 2 minutes, 6 seconds

\*Complete operating instructions and treatment protocol can be found in the Thermablate IFU LS2607.



## Benefits of a Thermablate Ablation

AT  
2 YEARS

**98%**

of patients reported a return to normal menstrual bleeding, hypomenorrhea or amenorrhea<sup>1</sup>

**82%**

of patients were satisfied with their treatment<sup>2</sup>

**92%**

of patients avoided hysterectomy<sup>7</sup>

**75.6%**

of patients experienced a reduction in bleeding and required no additional therapy; 8% underwent hysterectomy. (Median of 19 months ranging from 6 to 60 months)<sup>7</sup>

## Lower Subsequent Hysterectomy Rate vs. RF

A retrospective review comparing outcomes of patients treated with Thermablate (N=168) and Novasure (N=123) over 5 years showed, "More women opted for hysterectomy in the Novasure group (20.3%) as compared to 8.3% in the Thermablate EA." See Fig 1.

Fig. 1<sup>7</sup>

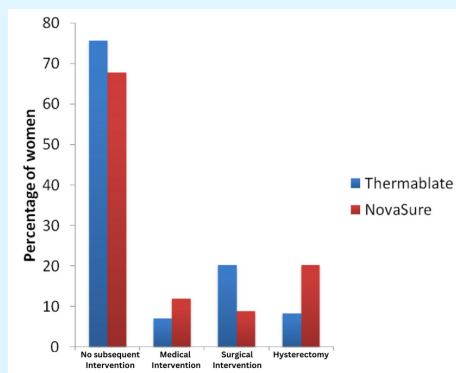
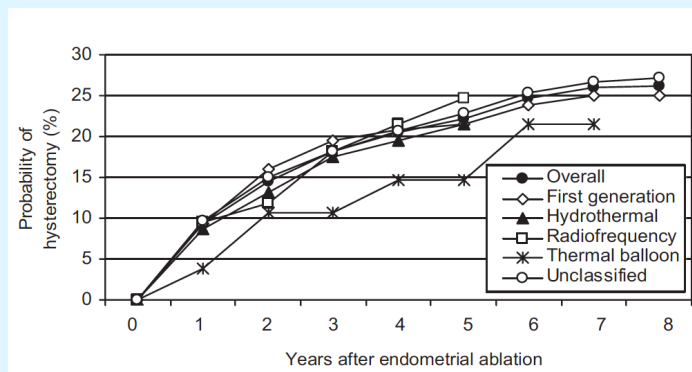


Fig. 2<sup>8</sup>



### Testimonial from Dr. Martin Powell, UK on Thermablate EAS:

*"With hypomenorrhea judged as a satisfactory end point, our follow up showed high levels of patient satisfaction. These rates are equal to other ablation devices. The hysterectomy rate was significantly reduced and lower than with other ablation techniques. Because of the balloon technology employed by Thermablate, the cavities of most patients remain open, ie. any post menopausal bleeding will be revealed, not concealed."*

## Thermablate Under Local Anaesthesia

**100%**

of patients return to normal activity within 2 days<sup>6</sup>

**93%**

of patients would have the procedure again<sup>5,6</sup>

**88%**

of patients would recommend the procedure to a friend<sup>6</sup>

**30mins**

the length of time the majority of patients spent in hospital post-ablation, until discharged<sup>3</sup>

*"Global ablation technologies evaluated, including Thermablate, are equally efficacious, safe and well tolerated in an office setting under local anaesthesia."*<sup>4</sup>

### References

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3. Kaiser A, Chen BF, Powell MC. A Long Term Follow Up of Results of Women Undergoing an Office Based Thermablate Endometrial Ablation for the Treatment of Menorrhagia. Obstet Gynecol Int J 2016; 4(5):00127.
4. Leyland N. Office Based Global Endometrial Ablation: Feasibility and Outcome for 3 Modalities. Journal of Obstet and Gynecol Canada, 2004; 26:S22.
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