



TRANSNASAL NEUROENDOSCOPY

TRansnasal ENDoscopic System





"When looking at recent publications on trans- for rhinoseptal submucosal dissection providing a reluctant to use it: One is often cautious about airflow and a shorter hospital stay. an endoscopic endonasal dissection because the permanent contamination of the endoscope with Pre-conditions of transsphenoidal endoscopy acceptably steep learning curve.

clearly visible structures: Without using a nasal a navigation system or a holding device." speculum, surgical manipulation is not impeded and the instruments are freely mobile. In addition, a pure endoscopic technique avoids the need

sphenoidal surgery, it will be clear that TRans- direct and quicker approach to the sphenoid sphenoidal ENDoscopy is TREND-setting! How- sinus. This method avoids the need for postopever, this endoscopic technique is not in routine erative nasal packing, thus causing less pain and use everywhere and neurosurgeons are often discomfort after surgery, providing better nasal

blood and nasal secretions hinders orientation. are the basic endoscopic experience and ana-In addition, the para-endoscopic and biportal tomical studies in the laboratory; however, it is dissection is very unfamiliar requiring an un- indispensable to use a dedicated endoscopic system to further shorten the learning phase. The endoscope for transsphenoidal skull base surgery Nevertheless, endoscopic visualization and must provide a brilliant image quality with true para-endoscopic dissection without using the colors, high contrast and highly realistic imsurgical microscope offers several undisputable ages. This simplifies the differentiation between advantages. Advantages in visualization increases healthy or pathological structures. It is essential light intensity in the deep-seated surgical field to have an effective cleaning function in order to and clearly displays patho-anatomical details. In free the endoscope lens from fog, blood or muaddition, the extended viewing angle of endo- cosal secretions. The endoscope must offer a highscopes enables surgeons to observe hidden parts by ergonomic design and sufficient working length of the surgical field. The major benefit in surgical for extended approaches. For selected cases, it dissection is the unhindered approach to these is also necessary to connect the endoscope to

André Grotenhuis





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Nijmegen, Netherlands

TRansnasal ENDoscopic System - Trocars, Handle and Accessories

- Suction, cleaning and irrigation function controlled via handle
- Handle rotatable around the endoscope shaft for improved flexibility in positioning the endoscope
- No irrigation pump needed



#### FH610R

## MINOP® TREND suction and irrigation trocar

for 0° endoscope PE487A Diam.: 4.5 / 6 mm

#### FH611R

MINOP® TREND suction and irrigation trocar for 30° endoscope PE507A

Diam.: 4.5 / 6 mm



Handle with irrigation button for MINOP® TREND trocars FH610R and FH611R



Adapter for fixation of MINOP® TREND handle FH615 to AESCULAP® holding arm



## FH605SU

Single-use suction and irrigation tube, sterile packed, Length 4.5 m, 2 puncture needles, for MINOP TREND handle FH615, Sales unit: PAK = Package of 10 tubes



"No other system that I have used combines as many helpful features in a single, instrument'. The lens cleaning is rapid and conveniently controlled with a button, instead of a pedal. The suction is effective. The ability to rotate the scope easily and quickly within the handle improves angled viewing. Overall, these features make the MINOP TREND an asset for endonasal surgery."

Jeremy Greenlee, Iowa City, USA

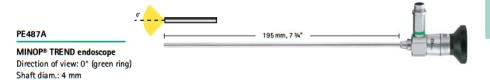
## MINOP® TREND

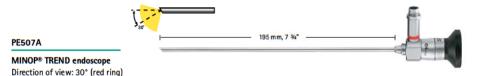
TRansnasal ENDoscopic System – Endoscopes

- Full HD compatible
- Optimized optical components leading to an enlarged image area, higher image quality, brightness and contrast
- Autoclavable / Sterrad®

Shaft diam .: 4 mm







"The view through the operating microscope allows a purely coaxial visualisation in transsphenoidal surgery: laterally located structures are concealed behind the nasal speculum. Blind tumor removal involves a higher risk of latrogenic damage to neurovascular structures and a possible increase in tumor remnants. With the use of the MINOP TREND endoscope for transnasal procedures, these laterally located parts of the field are directly visible and therefore surgically better approachable. In the past several years of endoscopic transnasal surgery,

transnasal surgery in de sellar and parasellar region."

the use of endoscopes has proven to be not only indispensable but rather mandatory for a safe and effective

André Grotenhuis, Nijmegen, Netherlands



TRansnasal ENDoscopic System - Sterilization and Storage

■ Basket for MINOP® TREND trocar, endoscopes, handle and adapter



FF357R Dimensions (L/W/H) 406 x 253 x 56 mm

Basket with silicone mat, instrument racks with silicone and lid (instruments not included)

 3/4 Sterile container (basic version) for basket FF357R



consisting of:

## JK740

Bottom 3/4 without base perforation Outside/Inside dimensions with inner lid: L/W/H 470 x 285 x 108 mm L/W/H 421 x 258 x 75 mm

### JK786

Inner lid 3/4 blue

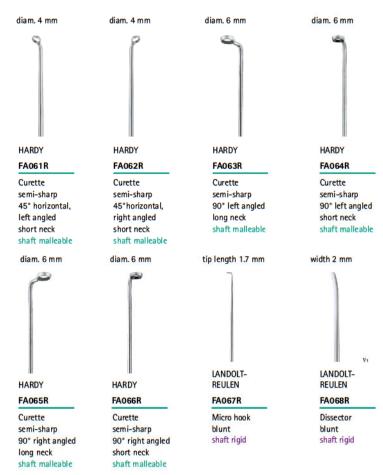


 For further details about the AESCULAP® Sterile Container System see brochure no. C40402.

TRansnasal ENDoscopic System - TREND Instruments









TRansnasal ENDoscopic System - TREND Instruments

#### Straight shape with golf ball handle design diam. 6.5 mm diam. 6.5 mm diam, 4 mm NICOLA NICOLA HARDY HARDY HARDY HARDY FA030R FA031R FA032R FA033R FA034R FA035R Curette Curette Enucleator Enucleator Curette Curette semi-sharp semi-sharp blunt semi-sharp semi-sharp 45° vertical angled 45° horizontal up cvd. up cvd. 90° angled 90° angled long neck angled left cutting right cutting long neck short neck shaft malleable short neck shaft malleable shaft malleable shaft malleable shaft malleable shaft malleable FA030R-FA040R diam, 4 mm diam, 6 mm diam, 6 mm diam. 1.7 mm diam. 2 mm Working length: 140 mm, 5 1/2" Total length: 265 mm, 10 1/2" LANDOLT-LANDOLT-HARDY HARDY HARDY REULEN REULEN FA036R FA037R FA038R FA039R FA040R Curette Curette Curette Micro hook Dissector semi-sharp semi-sharp semi-sharp blunt blunt 45° angled 90° angled 90° angled shaft rigid shaft rigid short neck long neck short neck shaft malleable shaft malleable shaft malleable

# MINOP® TREND

FF591R 100 x 15 mm

transsphenoidal surgery

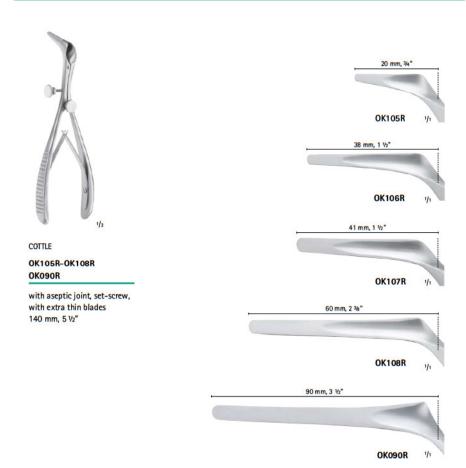
incl. key TE749R

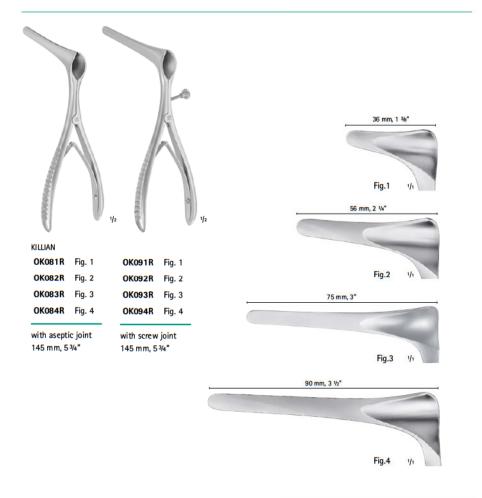
Slim profile and lightweighted specula for

TRansnasal ENDoscopic System - Transsphenoidal Specula



TRansnasal ENDoscopic System - Nasal Specula

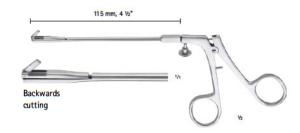




TRansnasal ENDoscopic System - Antrum and Sinus Punches

#### FA076R

Antrum punch for removal of posterior nasal septum Rotating sheath 360°

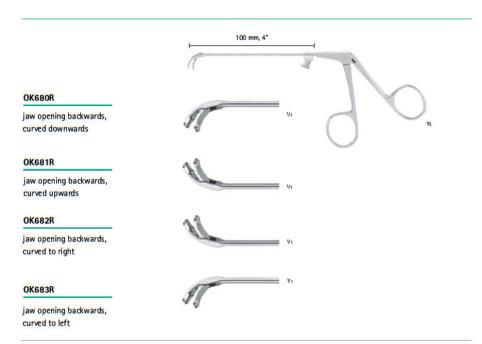


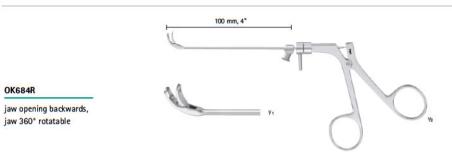
# OK602R-OK609R Sinus punches

		12	
	6 x 1.5 mm	8 x 3 mm <sup>2</sup> / <sub>1</sub>	11.5 x 3.5 mm
straight	OK608R forward through cutting	MACKAY-GRUNEWALD  OK602R  forward through cutting	MACKAY-GRUNEWALD  OK603R  forward through cutting
45° upwards angled	OK609R forward through cutting	MACKAY-GRUNEWALD  OK606R  forward through cutting	MACKAY-GRUNEWALD  OK607R  forward through cutting

# MINOP® TREND

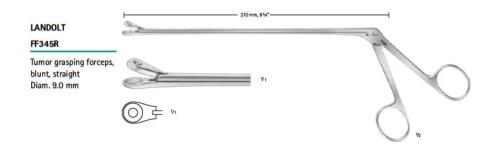
TRansnasal ENDoscopic System - Antrum Grasping Forceps

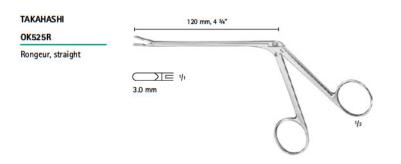


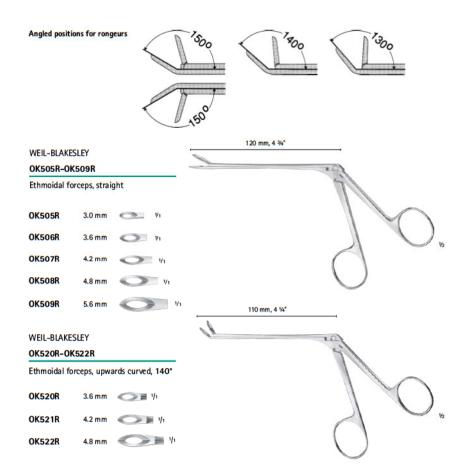




TRansnasal ENDoscopic System - Nasal Forceps



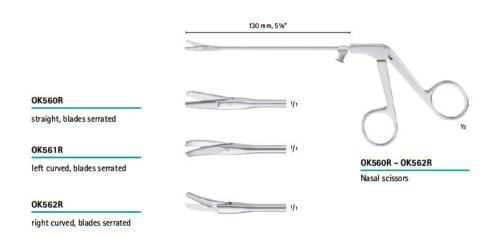






 For more information on AESCULAP® Functional Endoscopic Sinus Surgery instruments see brochure no. C87511.

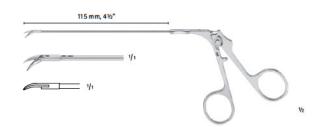
TRansnasal ENDoscopic System - Nasal Scissors



## CASPAR

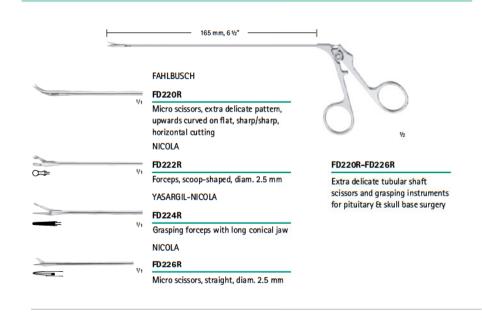
#### FD228R

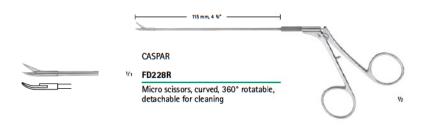
Micro scissors, curved rotatable 360°, detachable for cleaning



## MINOP® TREND

TRansnasal ENDoscopic System - Pituitary Scissors and Forceps



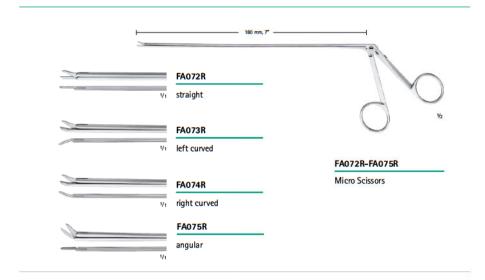


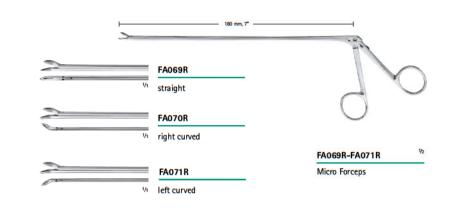


"Essential part of the endoscopic transnasal surgery is the nasal dissection, using special pituitary instruments. Goal is the maximum exploration of the target area, but also minimally invasive nasal traumatisation, thus avoiding mucosal lacerations and unnecessary bony fractures. This influences patients postoperative quality of life enormously."

André Grotenhuis, Nijmegen, Netherlands

TRansnasal ENDoscopic System - Pituitary Scissors and Forceps



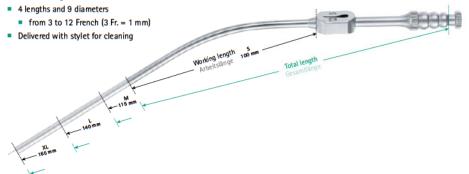


# MINOP® TREND

TRansnasal ENDoscopic System - FUKUSHIMA Suction Instruments

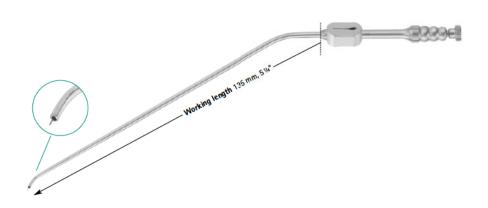
## Fukushima Design

- Teardrop shaped thumb control for suction regulation
- Malleable material for individual forming of the suction hose
- Conical design of suction cannulas



ΦS	∞ M	cco L	oooo XL
100 mm, 4"	115 mm, 4 ½"	140 mm, 5 1/2"	165 mm, 6 ½"
165 mm, 6 ½"	180 mm, 7"	205 mm, 8"	230 mm, 9"
GF401R	GF391R	GF411R	GF421R
GF402R	GF392R	GF412R	GF422R
GF403R	GF393R	GF413R	GF423R GF424R
GF404R	GF394R	GF414R	
GF405R	GF395R	GF415R	GF425R
GF406R	GF396R	GF416R	GF426R
GF407R	GF397R	GF417R	GF427R GF428R
GF408R	GF398R	GF418R	
GF409R	GF399R	GF419R	GF429R
	100 mm, 4"  165 mm, 6 ½"  GF401R  GF402R  GF403R  GF404R  GF405R  GF406R  GF407R  GF408R	100 mm, 4" 115 mm, 4 ½"  165 mm, 6 ½" 180 mm, 7"  GF401R GF391R  GF402R GF392R  GF403R GF393R  GF404R GF394R  GF405R GF395R  GF406R GF396R  GF407R GF397R  GF408R GF398R	100 mm, 4" 115 mm, 4 ½" 140 mm, 5 ½"  165 mm, 6 ½" 180 mm, 7" 205 mm, 8"  GF401R GF391R GF411R  GF402R GF392R GF412R  GF403R GF393R GF413R  GF404R GF394R GF414R  GF405R GF395R GF415R  GF406R GF396R GF416R  GF407R GF397R GF417R  GF408R GF398R GF418R

TRansnasal ENDoscopic System - Curved FUKUSHIMA Suction Instruments



	Outer diameter	Inner diameter	Angled tip	Working length
GF431R	2.7 mm	2.0 mm	Right angled tip	135 mm, 5 1/4"
GF432R	2.7 mm	2.0 mm	Left angled tip	135 mm, 5 ¼"

# MINOP® TREND

TRansnasal ENDoscopic System - Bipolar Forceps

#### **GK826R**

**Bipolar coagulation forceps** with slender jaws

Total length 255 mm, 10"

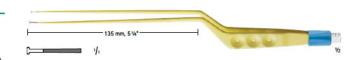
Aesculap tab connector — ①



#### **GK800R**

T-coagulation forceps with blunt, t-shaped tips Total length 255 mm, 10"

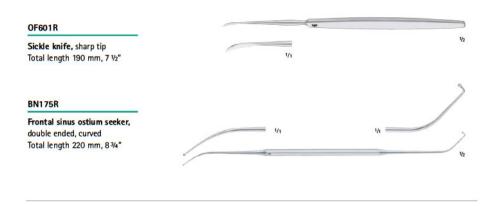
Total length 255 mm, 10"
Aesculap tab connector — ①







TRansnasal ENDoscopic System - Further Instruments



#### FM158R

SENSATION Micro tissue grasping forceps, bayonet-shaped, straight tip Total length 245 mm, 9 5%"



FM156R — Tip 0.5 mm		
FM157R - Tip 0.9 mm		
SENSATION Micro Tissue grasping forceps, angled	120mm, 4-24°	
bayonet-shaped, straight tip		-
Total length 240 mm, 91/2"		

# MINOP® TREND

TRansnasal ENDoscopic System - KERRISON Detachable Bone Punches

Jaw position 130°, upbiting



Shaft length	Width	Footplate	Ejector	Jaw opening	Detachable	Noir*, detachable
180 mm, 7"	1.0 mm	thin	-	8 mm	FK906R	FK906B
	1.5 mm	thin	-	9 mm	FK923R	FK923B
	2.0 mm	thin	~	9 mm	FK907R	FK907B
	2.5 mm	thin	~	10 mm	FK924R	FK924B
_	3.0 mm	thin	~	10 mm	FK908R	FK908B
_	4.0 mm	thin	~	12 mm	FK909R	FK909B

Jaw position 130°, downbiting



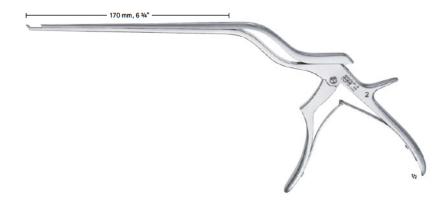
					,
Shaft length	Width	Footplate	Ejector	Jaw opening	Detachable
180 mm, 7"	1.0 mm	thin	-	8 mm	FK936R
	2.0 mm	thin	~	9 mm	FK937R
-	3.0 mm	thin	~	10 mm	FK938R



TRansnasal ENDoscopic System - KERRISON Bayonet Bone Punches

## Jaw position 130°, upbiting

Shaft length	Width	Working length	Jaw opening	Art. No.
240 mm, 91/2"	2.0 mm	170 mm, 6 3/4"	10 mm	FF496R
_	3.0 mm	170 mm, 6 ¾"	10 mm	FF497R
-	4.0 mm	170 mm, 6 3/4"	10 mm	FF498R
	5.0 mm	170 mm, 6 ¾"	10 mm	FF499R





 For more information on transnasal neuroendoscopy see our Practical Atlas no. C26402.



For more information on AESCULAP® bone punches see brochure no. C84802.