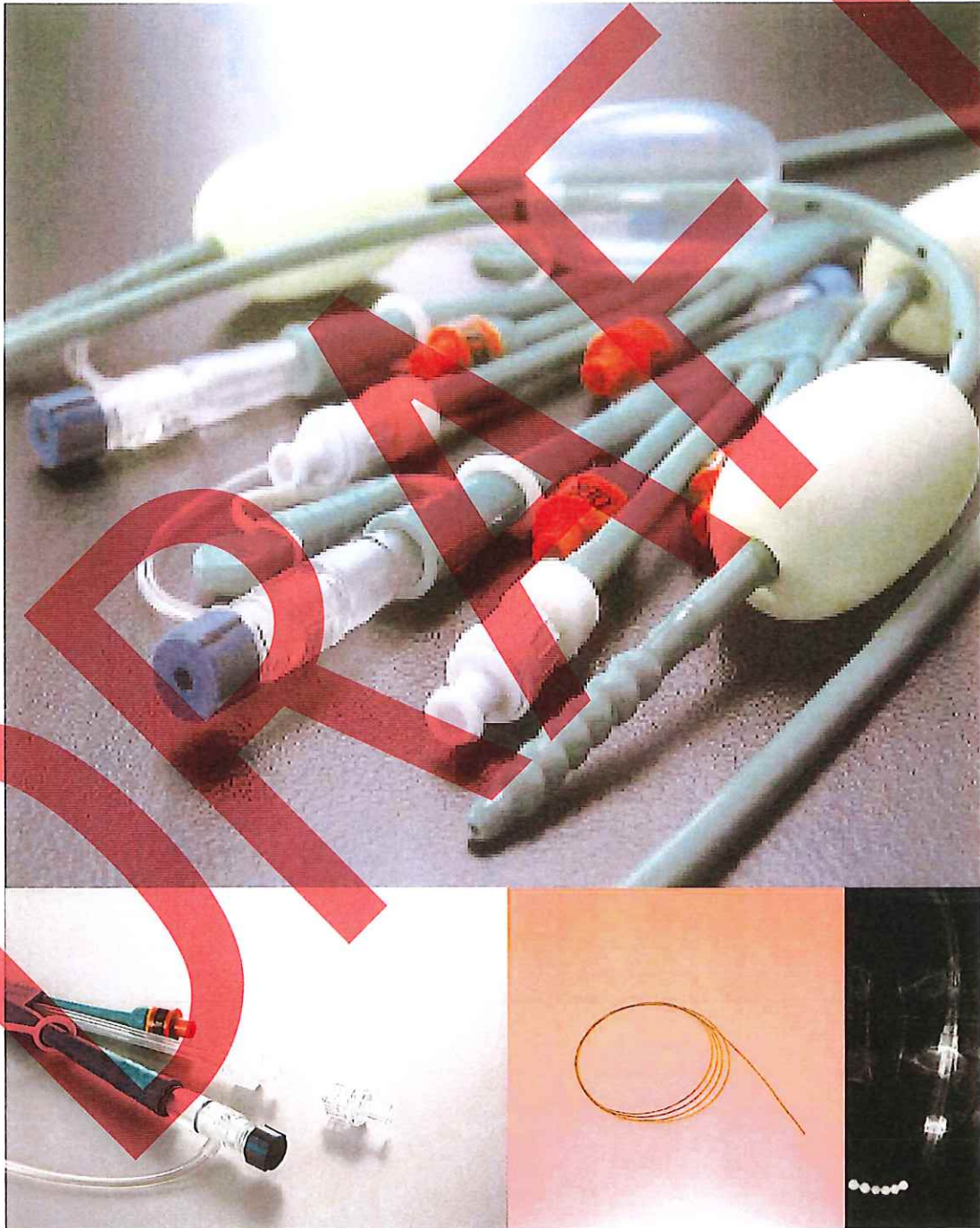


All Silicone Ileus Tube GW Set



CLINY ILEUS TUBE MADE EARLY DIAGNOSIS AND TREATMENT FEASIBLE

In general various merits are known in employment of the long tube method as the first treatment for adhesive intestinal obstructions as stated below.

Firstly in case of the distal obstruction, it enables to release ileus with its effect of decompression higher than the short tube method noninvasively, by which edema on the intestinal wall can be improved to have the better hemodynamics. Further, by releasing meteorism, the state of respiration can be improved.

to be of the most of occlusive ileus, a high conservative releasing effect can be obtained by the decompression therapy using the long tube.

The long tubes made of new materials as polyvinyl chloride or else have been developed recently taking place of the former Miller Abbott double lumen tube, but there remains some matters at issue, i.e., it requires much time for intubation to have the tip of tube passed through the pyloric canal, how to determine the limit of conservative therapy,

On the other hand when the conservative therapy is changed to surgical treatment, as it is feasible to know the running state of intestines and area of the obstruction correctly with this tube, it enables resect the area obstructed without injuring other parts.

Besides, as the postoperative decompression is performed sufficiently, it is useful for preventing failure of suture. Further, using it as a postoperative splint, it is feasible to avoid recurrence of ileus.

Most of complex obstructive ileus require surgical release of strangulation, while application of the conservative therapy, centering on the decompression therapy to the occlusive ileus, has been employed recently. Specially in case of postoperative adhesive intestinal obstructions, said

and so on. Therefore, it was not acknowledged as one of the surest methods for therapeutical purposes.

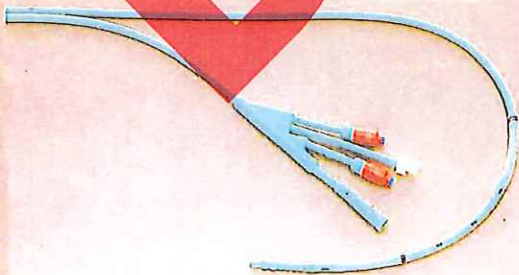
Create Medic Co., Ltd. studied on these problems together with clinical doctors taking a priority in the medical industry, and firstly in the world developed and sold the ileus tube with the guide at the tip of tube ion 1982.

Since than, time needed to pass through the pyloric canal was amazingly shortened by this tube, thus this method is now familiar to numerous doctors presently as the Cliny Method. Further, by start of selling the double balloon ileus tube in 1987, the limit of conservative therapy was successfully determined. Cliny Ileus Tube with both functions of diagnosis and treatment, is highly appreciated by many doctors as an ideal image of the long tube method for ileus.

DOUBLE BALLOON TYPE ILEUS TUBE

The double balloon type ileus with its posterior balloon for contrast radiography, fixes its tube during radiography and prevents back flow of the contrast medium to the oral side, which enables to have the selective radiography of small intes-

tine series with the smaller amount of contrast medium. By performing the selective contrast radiography, it is useful for correct diagnosis of the obstruction and its development mechanism, and to determine indication of surgical operation.



Complete obstruction
(↑: Area occluded)



Incomplete obstruction
(↑: Area constricted)

PLENTIFUL TYPES AND SIZES

Referring to diameters those from 12Fr for children to 20Fr for high flow, and as to length those from 2,400mm for easy flow for 3,000mm used for selective contrast radiography of small intestine series as well as those used as splint, and multipurpose types with double balloons in a dual system, together with that with the open-tip type, are available.

GUIDE WIRE WITH HIGH OPERATION CHARACTERISTICS AND TUBE WITH HIGH LUMENAL LUBRICITY

Upon improvement of the ordinary ones by coating the tube with a lubricant and the guide wire with Teflon, operation characteristics of the guide wire in the lumen is favorable.

MADE OF SILICONE

As it is made of highly water repellent silicone, gastric contents hardly stick on the wall, thus nearly no blocking of the tube is expected.

Further, this medical grade silicone is highly biocompatible and rich in flexibility during the prolonged retention, which limits the burden on patients to the minimum.

HIGH FLOW

Being of the high flow type having the wider lumen than that of the ordinary ones, a high suction volume can be obtained.

SUCTION HOLES LOCATED ON ONE SIDE

It makes feasible to intubate promptly preventing deviation of the guide wire while the tube is forwarded from the pylorus to duodenum.

EXCELLENT CONTRAST RADIOGRAPHIC PERFORMANCE

The state of intubation and its retention can be confirmed by fluoroscopy.

It is easily feasible to confirm location of the balloon with the confirmation mark.

SPECIFIC FLEXIBILITY

The tube has nearly same degrees of curve in all directions with specific flexibility from the guide to the body of tube, which displays a wonderful effect when it passes through the pylorus.

AIR VENT TO IMPROVE SUCTION EFFICIENCY

With the air vent it made the low-pressure continuous suction feasible using a pump, instead of conventional siphon drainage, which further improves the suction effect.



MULTIPLE STRUCTURE OF THE TUBE USABLE IN MANY PURPOSES

It is able not only to radiograph the small intestine selectively using the suction lumen, but also to infuse or flush drug fluid with its air vent lumen.

BALLOON WELL SUITABLE TO THE TUBE

The balloon has nearly the same width as the tube. It easily passes through pharynx, pylorus, and Treitz's fossa. Further, the balloon is as soft as inflatable to a required size in the intestines without difficulty.

OPEN-TIP TYPE

There are some open-tip types available for cases with difficulty in intubation.

GUIDE LEADING THE TUBE INTO INTESTINES IN SEVERAL MINUTES

The guide has a shape to be easily induced into the intestines. It not only plays role of a weight but also brings the tube along the intestinal wall, delicately turning whenever it is in touch with the wall. Generally it passes through the pylorus in several minutes.



SPECIFICATIONS

[1] All Silicone Ileus Tube (Open Tip, Single Balloon Type)

Product No.	Size	Length	Balloon Capacity	Applicable guide wire
02-45216	16Fr	2,400mm	30 mL	GMW.052"3000T or GMW.52"4500T
02-45218	18Fr	2,400mm	30 mL	GMW.052"3000T or GMW.52"4500T

Package: 1 piece per box. Sterilized with EtO Gas

[2] All Silicone Ileus Tube (Closed Tip, Single Balloon Type)

Product No.	Size	Length	Balloon Capacity	Applicable guide wire
02-35112	12Fr	1,800mm	15 mL	GMW.043"2300T
02-35214	14Fr	2,400mm	30 mL	GMW.043"3000T
02-35216	16Fr	2,400mm	30 mL	GMW.052"3000T
02-3516	16Fr	3,000mm	30 mL	GMW.052"3500T
02-3518	18Fr	2,400mm	30 mL	GMW.052"3000T
02-35220	20Fr	2,400mm	30 mL	GMW.052"3000T

Package: 1 piece per box. Sterilized with EtO Gas

[3] All Silicone Ileus Tube (Open Tip, Double Balloon Type)

Product No.	Size	Length	Balloon Capacity	Applicable guide wire
02-46316	16Fr	3,000mm	60 mL	GMW.052"3500T or GMW.052"4500T
02-46318	18Fr	3,000mm	60 mL	GMW.052"3500T or GMW.052"4500T

Package: 1 piece per box. Sterilized with EtO Gas

[4] All Silicone Ileus Tube (Closed Tip, Double Balloon Type)

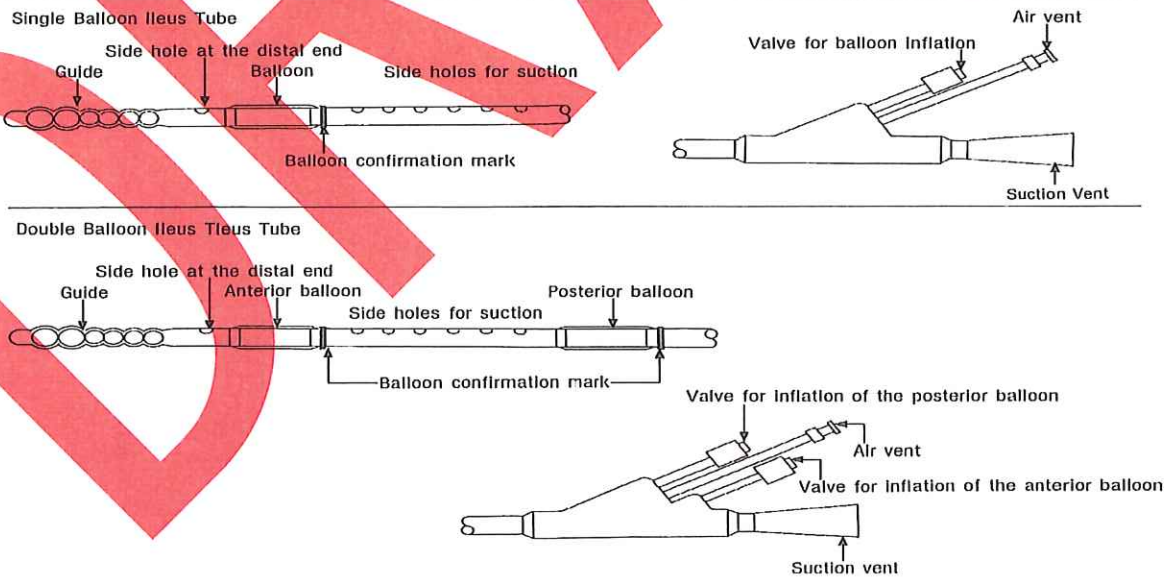
Product No.	Size	Length	Balloon Capacity	Applicable guide wire
02-36316	16Fr	3,000mm	60 mL	GMW.052"3500T
02-36318	18Fr	3,000mm	60 mL	GMW.052"3500T

Package: 1 piece per box. Sterilized with EtO Gas

*Bamboo shoot connector, Connector with a port, Stopper, Strap, Guide wire fixing device, Guide wire may not be included.

SPECIFICATIONS ON APPLICABLE GUIDE WIRES

Product No.	Guide wire name	External Diameter	Length	Specification
FS-10T .043-2300	GMW.043"2300T	1.09mm (0.043")	2,300mm	Fixed straight (Softened tip type) Teflon-coated
FS-10T .043-3000	GMW.043"3000T		3,000mm	
FS-10T .052-3000	GMW.052"3000T	1.32mm (0.052")	3,000mm	
FS-10T .052-3500	GMW.052"3500T		3,500mm	
FS-10T .052-4500	GMW.052"4500T		4,500mm	



Please note that a partial amendment in specifications is made occasionally, as studies and developments have been performed continuously.



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