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VIDEO: Dr. Douglas Rex, ASGE short

Video Title

ASGE Tech Talk: Dr. Douglas Rex on Eleview® Administration

Dr. Rex: This is Doug Rex.

Submucosal injection is really a fundamental part of endoscopic mucosal resection.

And, up until now, we really had to use homemade solutions, oftentimes saline or hopefully something that works better, in that it makes a better, more concentrated submucosal cushion, that really lifts the lesion better, stays in place longer, tends to not diffuse out.

We've also had to add a contrast agent.

Now, with Eleview®, we've got the first commercially available product that does these things for us.

First of all, it's viscous enough, sort of stays together, better enough, that you get this nice, submucosal mound that tends to not diffuse out.

And then also, we've got a contrast agent—methylene blue—already in the solution, ready-made. Doesn't have to be added to it.

And, this is critical, this contrast agent for keeping the edges very well delineated so that we can identify them as the resection proceeds.

And also, we want that submucosa to be stained blue. This helps us to make sure that we're staining the right plane; helps us to identify muscle injury if it does occur.

This is Eleview®.

It comes in a package that has 5 ampoules, each with 10 mLs.

Each ampoule has both the submucosal injection fluid that basically accounts for the good EMR properties, creates the good mound. And methylene blue as the contrast agent.

The nurse can draw this up in standard fashion.

We found that you can inject this through either a 25- or a 23-gauge injection catheter.

It's easier to inject it with a 23-gauge.

If you need more than 10 mLs, then of course you would just draw up the solution from a second one of these, ready-to-use.

Please see Eleview® instructions for Use for complete Important Safety Information at eleviewUS.com.

