



Proven
performance

Visibly
different

Uterine Fibroid Embolisation Using Bead Block™

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Patient History

- 39-year-old woman with menorrhagia and pelvic pressure related to multiple uterine fibroids
- Hormonal treatment was not effective and the patient was treated with uterine artery embolisation as an alternative to hysterectomy

Procedure

- Bilateral uterine artery embolisation was performed with 12ml of Bead Block™ 700-900µm via a 2.7Fr Progreat™ microcatheter
- Angiographic end-point was near-stasis in the uterine artery with sluggish antegrade flow

Outcome

- Early post-embolisation procedure demonstrated complete fibroid devascularisation
- Three months after bilateral uterine artery embolisation, complete resolution of symptoms was observed
- Post-embolisation MRI confirmed marked uterine volume reduction and devascularisation of all the fibroids



Pre-embolisation MRI (sagittal T2-weighted image) shows multiple uterine fibroids

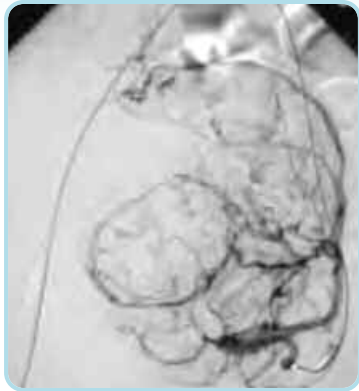
Clinical Comment

“Large 700-900µm Bead Block™ can be easily injected through large lumen microcatheters. Targeted embolisation can be achieved.”

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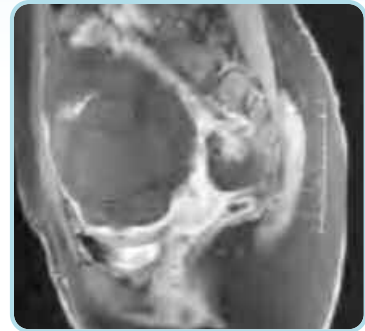
Visibly different



Pre-embolisation injection into the left uterine artery demonstrates diffuse uterine hypervascularisation



Post-embolisation injection into the left uterine artery demonstrates satisfactory arterial occlusion



Post-embolisation MRI (dynamic contrast-enhanced sagittal image) performed 24 hours after embolisation shows complete devascularisation of all the fibroids

Ordering Information

2ml Bead Block is suspended in 5ml physiological buffered saline in 20ml syringe and is packed singly.

Size Range μm	Colour Code	2ml Product Code
100 – 300	Yellow	EB2S103
300 – 500	Blue	EB2S305
500 – 700	Red	EB2S507
700 – 900	Green	EB2S709
900 – 1200	Purple	EB2S912

For more information, please contact:

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Important Information

Indications:

Bead Block™ is intended to be used for the embolisation of hypervascular tumours, including uterine fibroids and arteriovenous malformations (AVMs).

Potential Complications:

- Undesirable reflux or passage of Bead Block into normal arteries adjacent to the targeted lesion or through the lesion into other arteries or arterial beds
- Non-target embolisation
- Pulmonary embolisation
- Ischaemia at an undesirable location
- Capillary bed saturation and tissue damage
- Ischaemic stroke or ischaemic infarction
- Vessel or lesion rupture and haemorrhage
- Neurological deficits including cranial nerve palsies
- Vasospasm
- Death
- Recanalisation
- Foreign body reactions necessitating medical intervention
- Infection necessitating medical intervention
- Clot formation at the tip of the catheter and subsequent dislodgement

UFE-Specific Potential Complications:

Potential post-procedure complications include:

- Abdominal pain
- Discomfort
- Fever
- Nausea
- Constipation
- Premature ovarian failure (ie menopause)
- Amenorrhoea
- Infection of the pelvic region
- Uterine/ovarian necrosis
- Phlebitis
- Deep vein thrombosis with or without pulmonary embolism
- Vaginal discharge
- Tissue passage, fibroid sloughing, or fibroid expulsion post UFE
- Post-UFE intervention to remove necrotic fibroid tissue
- Vagal reaction
- Transient hypertensive episode
- Hysterectomy