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innovation in scope

Empower your scope

AWC® – Additional Working Channel



EMR+ shifts the cut-off
for en-bloc resection
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RESECT+
AWC®

EMR+ shifts the cut-off for en-bloc resection

The AWC® (Additional Working Channel) provides a second channel for your standard gastroscope or colonoscope.

Through bimanual working with triangulation, an efficient resection can be performed by making use of traction and countertraction.¹ A large distance between the endoscope channel and the additional working channel increases the working space for the instruments.

A comparative trial showed that EMR+ is superior to conventional EMR for lesions > 2 cm.²

By using a snare and a grasping instrument simultaneously EMR+ facilitates en-bloc resection of larger lesions compared to conventional EMR.

For 3 cm lesions, EMR+ reaches its best discriminatory power against the standard procedure concerning en-bloc resection (86.36 % vs. 18.18 %). EMR+ could help to close a therapeutic gap with manageable complexity, time and costs.

1 Walter B, Schmidbauer S, Krieger Y, Meining A (2019) Improved endoscopic resection of large flat lesions and early cancers using an external additional working channel (AWC): a case series.

Endoscopy International Open; 7(2): E298-E301

2 Knoop RF, Wedi E, Petzold G, Bremer SCB, Amanzada A, Ellenrieder V, Neesse A, Kunsch S (2020) Endoscopic mucosal resection with an additional working channel (EMR+) in a porcine ex vivo model: a novel technique to improve en-bloc resection rate of snare polypectomy.

Endoscopy International Open; 8(2): E99-E104



For further information
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