

# EchoLaser®

## SYSTEM COMPONENTS

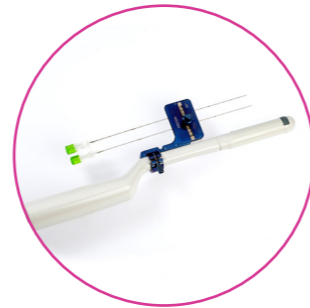
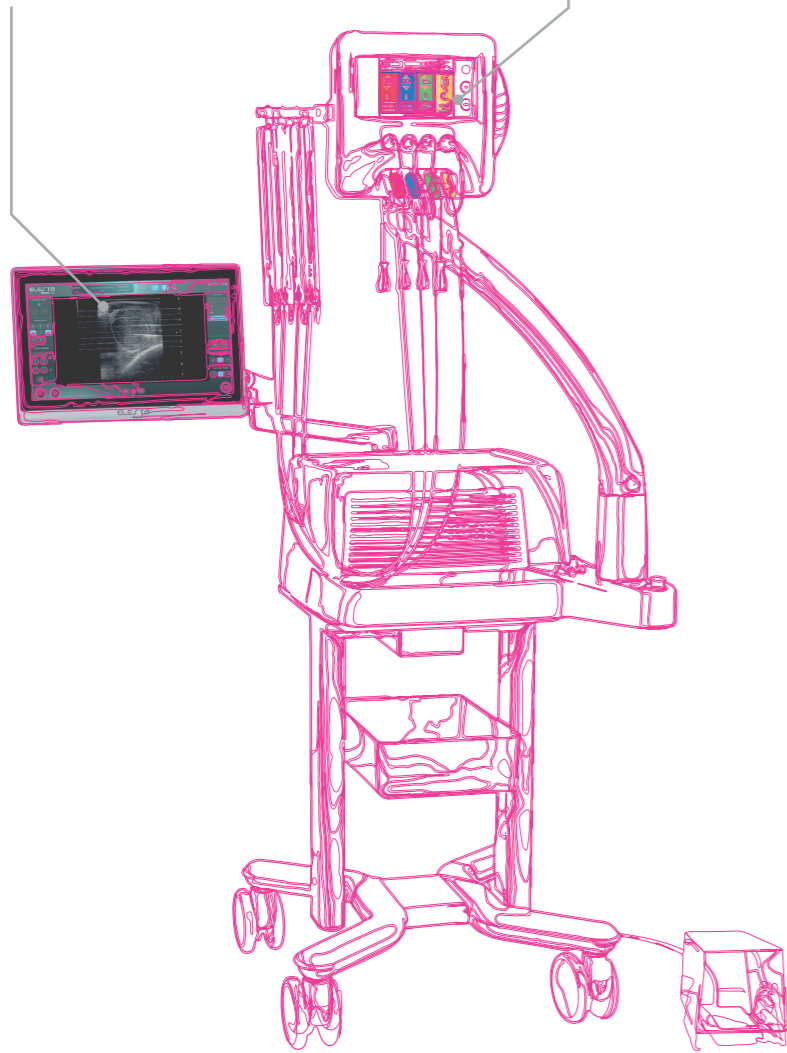
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### Integrated Echolaser Smart Interface (ESI)

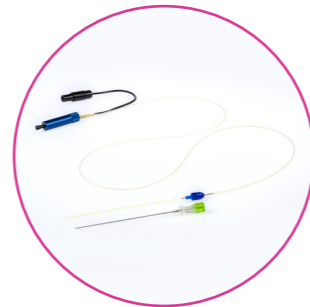
- Dedicated software for urology treatments.
- For real-time user assistance in performing the procedure.
- Can be paired with most of Ultrasound systems.

### EchoLaser X4

- 4 channels laser module for the delivery of laser radiation



Multi-needle guiding systems



Disposable fiber optics kit  
• Fiber Optic  
• Chiba Introducer needle (21G)

Reference	EchoLaser® system	Quantity / box
MEL01	EchoLaser®	1
Reference	EchoLaser® Fiber Kits	Quantity / box
ROEL_KITX20	Laser Thermal Therapy Kit LE	20

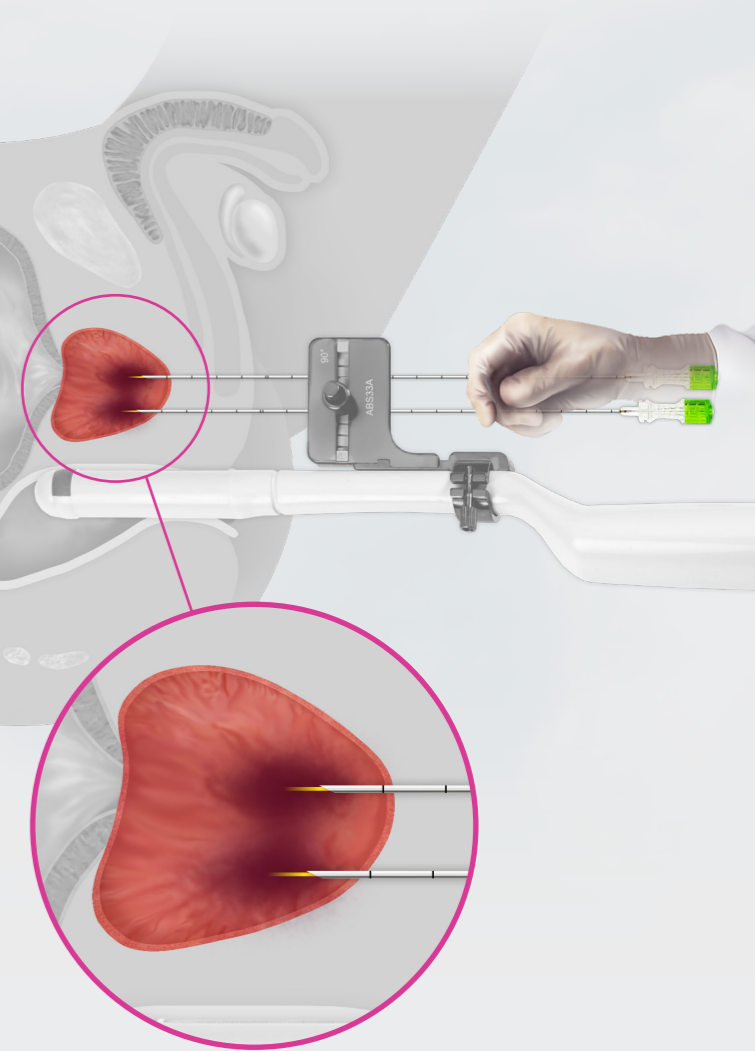
  
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# EchoLaser®

## TPLA™

Ultrasound Guided  
TransPerineal Laser Ablation



A unique Micro-Invasive Ultrasound guided **BPH Solution**

For more information, visit [www.rocamed.com](http://www.rocamed.com)

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BPH SOLUTION

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## APPLICATION

### WHAT IS ECHOLASER?

#### Micro-Invasive technique with fine needles:

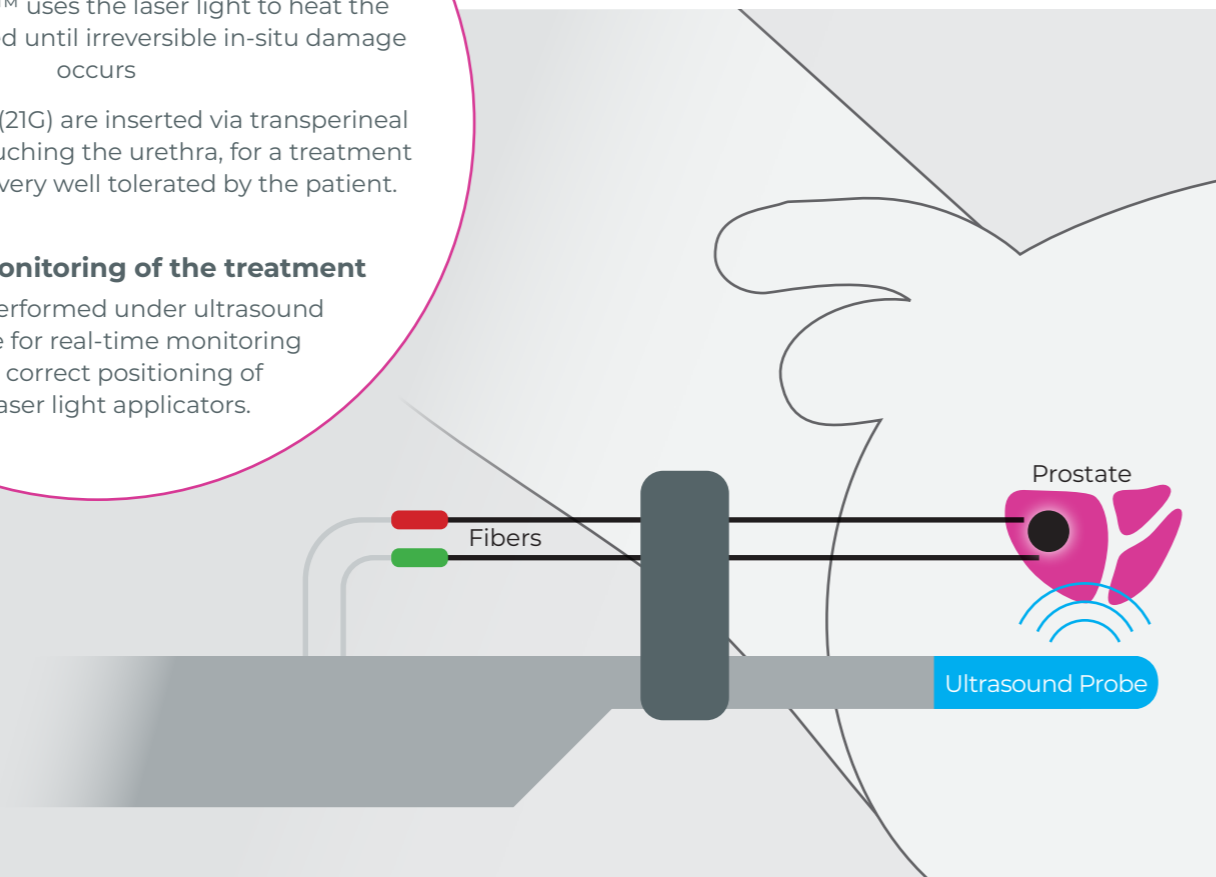
EchoLaser TPLA™ uses the laser light to heat the tissue to be treated until irreversible in-situ damage occurs

Very fine needles (21G) are inserted via transperineal access without touching the urethra, for a treatment a-traumatic and very well tolerated by the patient.

#### Real-time monitoring of the treatment

It can be performed under ultrasound guidance for real-time monitoring of the correct positioning of the laser light applicators.

EchoLaser is indicated in the case of patients suffering from **Benign Prostatic Hyperplasia (BPH), with lower urinary tract symptoms.**



## BENEFITS

### EchoLaser® TPLA™

- Ejaculation preservation (96%)
- Erectile function preservation
- Continence preservation
- Micro-invasive approach (thanks to the extremely fine needles)
- No need for a general anaesthesia
- Also suitable for high-risk patients
- Short duration of treatment (few minutes)
- No risk of urethral strictures/stenosis
- No or reduced post-op pain
- No or reduced hospitalisation
- Fast recovery times

## MAIN BIBLIOGRAPHY

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- Ejaculatory Function following Transperineal Laser Ablation versus TURP for Benign Prostatic Obstruction: A Randomized Trial. *Bertolo R, Iacovelli V, Cipriani C, Carilli M, Vittori M, Antonucci M, Maiorino F, Signoretti M, Petta F, Travaglia S, Panei M, Bove P.* BJU Int. 2023 Mar 14. doi: 10.1111/bju.16008. PMID: 36917033.
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- Office-Based Transperineal Laser Ablation for Benign Prostatic Hyperplasia Under Local Anesthesia: 2-Year Results from a Dose Range Confirmatory Trial. *Bianco FJ, Luna E, Lopez-Prieto A, González P, Gheiler EL, Kaufman AM, Avila L, Maiolino G.* JU Open Plus 2(2):e00007, February 2024. | DOI: 10.1097/JU9.000000000000105.

## ECHOLASER TPLA™ PROCEDURE

### STEP 1

#### BEFORE THE PROCEDURE

- Position the patient in **gynecological position**
- Insert a bladder catheter to visualize the urethra
- **Measurement of the prostate volume**
- Transperineal **local anesthesia** (skin + periprostatic block)

### STEP 2

#### NEEDLE INSERTION WITH TRANSPERINEAL APPROACH

- Definition of the positioning strategy for needles and fibers with **ESI (EchoLaser Smart Interface)** based on the morphology of the prostate
- **Insertion of the needles:** one or two 21G introducer needles for each lobe, according to the prostate dimensions and shape
- Removal of the inner part of the needle to allow the fiber insertion

### STEP 3

#### FIBER INSERTION

- Insert the 300-µm optical laser fiber into each needle
- Check safety distance of the fibers from the surrounding anatomical structures and verify it with ESI
- Energy supply (5-10 min)
- Pull-back: if necessary based on the volume of the adenoma (5-10 min)
- Removal the needles + fibres

### STEP 4

#### PATIENT DISCHARGED

Usually the same day of the procedure.