

OLYMPUS[®]

Your Vision, Our Future

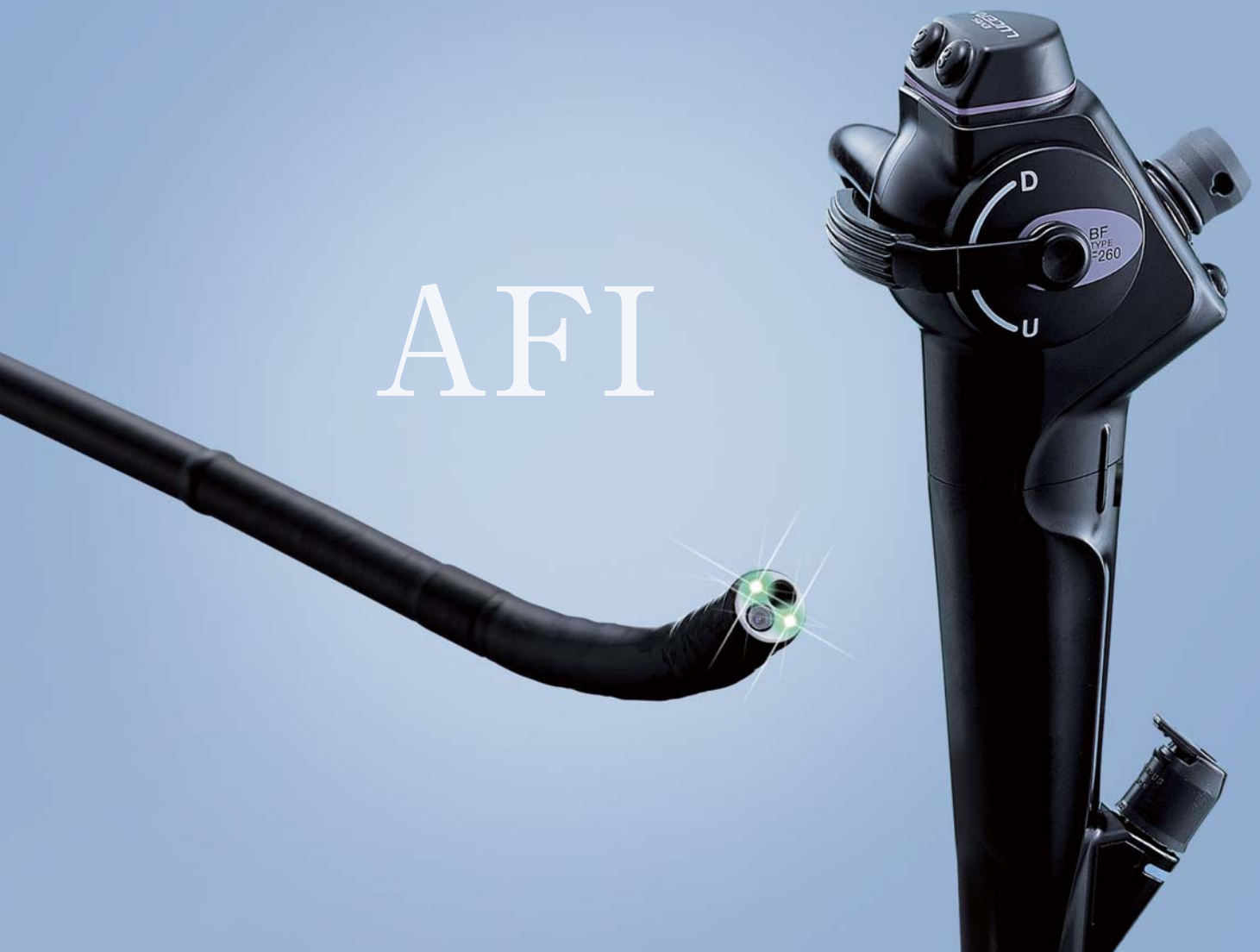
**EVIS LUCERA
SPECTRUM**

EVIS LUCERA BRONCHOVIDEOSCOPE

BF-F260

Advanced Auto Fluorescence Imaging Capability
Makes it Easier to Distinguish Between Inflammation and Malignant Lesions

AFI



Slim, next-generation bronchoscope features advanced AFI observation and high-resolution routine imaging, making it easier to detect malignant and premalignant lesions

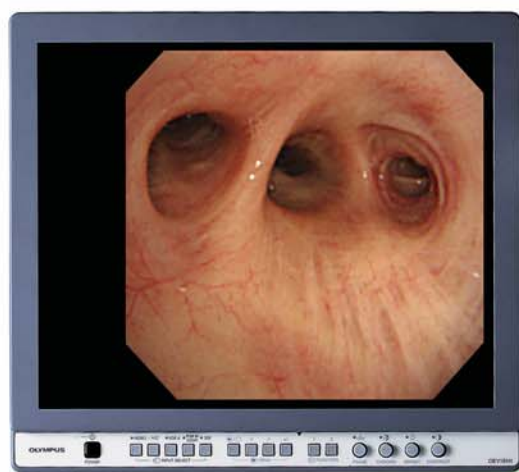
Regarded as a potentially effective technique for the detection of central lung cancer and premalignant lesions, fluorescence imaging is now available with a standard videoscope. Thanks to a newly developed high-sensitivity CCD, the EVIS LUCERA BF-F260 is able to provide bright, clear fluorescence images when used with the EVIS LUCERA SPECTRUM system.

The new Auto Fluorescence Imaging capability is expected to simplify differentiation of inflammation from malignant lesions.

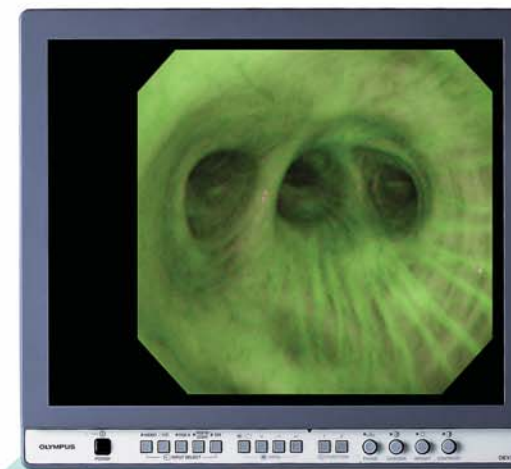
With its advanced Auto Fluorescence Imaging capability and high routine image quality, the next-generation EVIS LUCERA BF-F260 is paving the way for a new era in bronchoscopy.

AFI

AFI=Auto Fluorescence Imaging



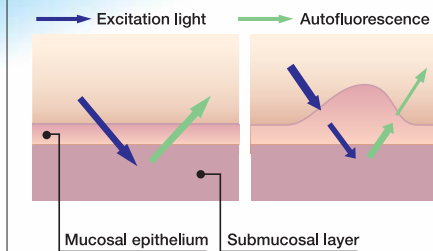
Normal image



AFI image

What is AFI?

Auto Fluorescence Imaging (AFI), utilizes the inherent properties of short wavelength blue light to assess mucosal tissue. When the blue excitation light reaches the subepithelial layer, healthy tissue will fluoresce green.



However, if there are any subtle mucosal changes present in the surface layer, consistent with early malignant change, such as increased vasculature or thickening of the mucosa, tissue fluorescence will decrease. Therefore, by enabling changes in fluorescence to be observed, AFI may assist the early detection of suspicious lesions, displaying normal tissue in green, and abnormal tissue in magenta.

Auto Fluorescence Imaging

Visualizing subtle differences in mucosal structures with state-of-the-art CCD technology

Although it has been known for some time that fluorescence occurs when blue light is irradiated on the mucosa, it has been difficult to exploit this fact because the fluorescence generated is so weak that conventional CCDs can barely detect it. With the BF-F260, on the other hand, a newly developed high-sensitivity CCD is able to accurately detect that fluorescence. As a result, subtle differences in mucosal structures that would be difficult to discern under normal observation can now be visualized.

Improved Versatility

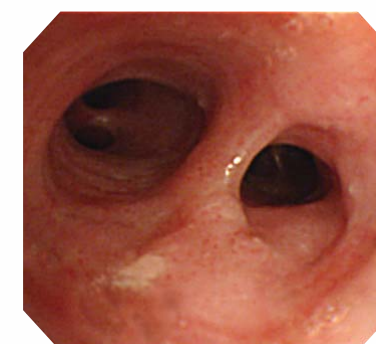
A single system provides both normal observation and fluorescence observation

You can easily switch back and fourth between normal images and fluorescence images with just one touch of a button on the BF-F260's control section or on the light source's front panel. Now you can observe clear images in either mode at any time without interrupting the procedure.

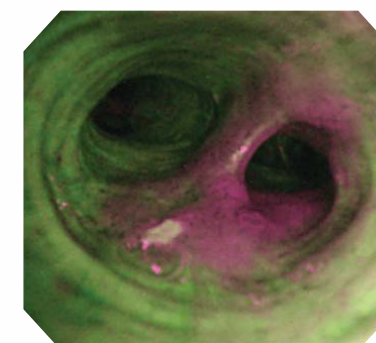
High Image Quality

New CCD for high image quality in both normal and fluorescence observations

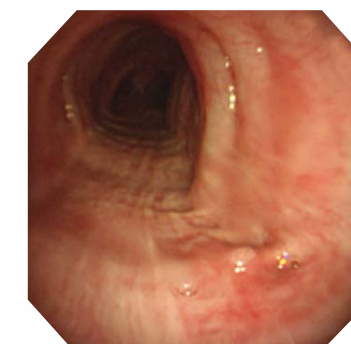
The CCD built into the BF-F260's slim 5.5 mm diameter tip effectively captures low-level autofluorescence and delivers bright, sharp high-quality autofluorescence images. This powerful CCD is equally effective under normal observation, providing superb, high-resolution images.



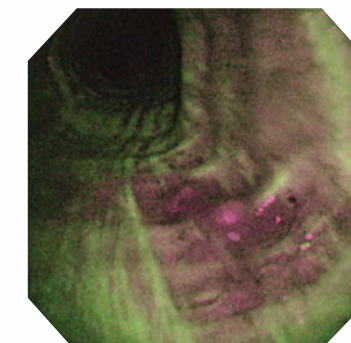
Normal image



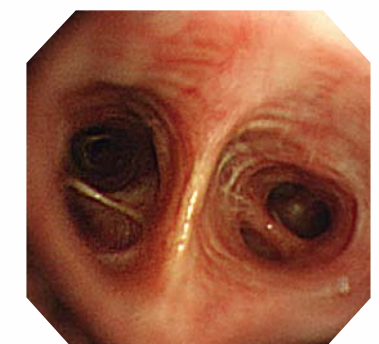
AFI image



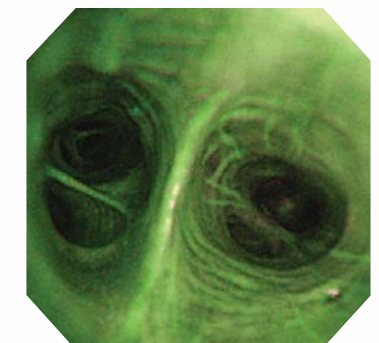
Normal image



AFI image



Normal image



AFI image

■ Ancillary Equipment

OEV191/OEV191H High Definition Monitor

The OEV191 is a standard TV monitor while the OEV191H is compatible with HDTV signals.

CV-260SL EVIS LUCERA Video System Center

Multifunction processor provides versatile, accurate support for endoscopy.

CLV-260SL EVIS LUCERA Xenon Light Source

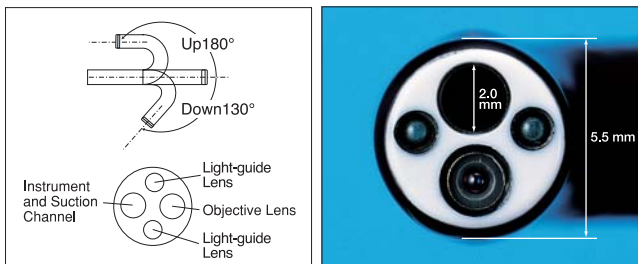
Powerful, compact, reliable light source designed exclusively for use with the CV-260SL.



■ Specifications

Optical System	Field of view	120°
	Direction of view	Forward viewing
	Depth of field	3 to 100 mm
Insertion Tube	Distal end outer diameter	5.5 mm
	Insertion tube outer diameter	5.4 mm
	Working length	600 mm
Instrument Channel	Channel inner diameter	2.0 mm
	Minimum visible distance	3 mm from distal end
Bending Section	Angulation range	Up 180°, Down 130°
High Frequency Compatibility		YES (Compatible with OLYMPUS devices)
Laser Compatibility		Nd:Yag, 810 nm diode
Total Length		870 mm

EVIS LUCERA BRONCHOVIDEOSCOPE
OLYMPUS BF TYPE F260



Specifications, design and accessories are subject to change without any notice or obligation on the part of the manufacturer.

OLYMPUS[®]

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For a complete listing of sales and distribution locations visit:
www.olympus.com