References

5. ASGE Standards of Practice Committee et al. 2015; GastrointEndosc. 81(3):502.e1-502.e16
7. Singh et al. 2013; Dig Endosc. 25 Suppl 2:16-20
8. Kaltenbach et al. 2014; Gut 64(10):1569-77
11. Holme et al. 2011; GastrointEndosc. 73(6):1215-22
17. https://www.nice.org.uk/guidance/dg28/

Abbreviations

1. ADR: Adenoma detection rate
2. NBI: Narrow Band Imaging
3. DISCARD: Detect Inspect Characterise Resect and Discard
4. ESGE: European Society of Gastrointestinal Endoscopy
5. ASGE: American Society for Gastrointestinal Endoscopy
6. NICE: NBI International Colorectal Endoscopic (classification)
7. NICE: National Institute for Health and Care Excellence

https://www.olympus.co.uk/proven

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

- Up to **14%** higher ADR with NBI (1)
- Up to **29%** more colorectal polyps found with NBI (2)
- Easier monitoring of ADR with NBI optical diagnosis
- **34%** more neoplasia found in Barrett’s Esophagus with NBI (3)

- Optical diagnosis and DISCARD in the colon with NBI, endorsed by ESGE, ASGE, and NICE (4,5,17)
- Targeted biopsy in Barrett’s Esophagus surveillance with NBI, endorsed by ASGE (6)
- Up to **86%** fewer biopsies in Barrett’s surveillance with NBI and Dual Focus (7)
- Up to **12%** higher diagnostic confidence with Dual Focus (8)

- Easier insertion and operation for doctors and nurses (9)
- **4%** higher cecal intubation rates (10)
- Easier and more successful intubation for trainees (11)
- **18%** less sedation (12)

- Less pain during colonoscopy (13)
- **78%** of patients experiencing no pain at all (13)
- High patient comfort and satisfaction

- **20%** shorter time to cecum (14)
- Less sedation (12) = lower spending on for sedative drugs
- Less sedation (12) = quicker patient recovery and less blockage of recovery room
- Lower spending on for histopathology (if DISCARD and targeted biopsies are applied) (14,15)

VALUE OF EVIS LUCERA ELITE FOR HEALTH CARE AND PROCUREMENT

<table>
<thead>
<tr>
<th>Clinical Outcomes and Secondary Benefits</th>
<th>Clinical Quality</th>
<th>Cost-Effectiveness</th>
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</thead>
<tbody>
<tr>
<td>NBI</td>
<td></td>
<td></td>
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<tr>
<td>Improves detection (1,2)</td>
<td>✓</td>
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<tr>
<td>Allows optical diagnosis in the colon (DISCARD) (4,5,17)</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Allows targeted biopsy in Barrett’s Esophagus (3)</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Allows easy monitoring of ADR</td>
<td>✓</td>
<td></td>
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<tr>
<td>Lower spending on histopathology (if DISCARD and targeted biopsies are applied) (14,15)</td>
<td>✓</td>
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<tr>
<td>Dual Focus</td>
<td></td>
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<tr>
<td>Increases confidence of optical diagnosis (8)</td>
<td>✓</td>
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<tr>
<td>Less spending on for histopathology (if DISCARD and targeted biopsies are applied) (14,15)</td>
<td>✓</td>
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<tr>
<td>RIT</td>
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<tr>
<td>Easier insertion in colonoscopy (9)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>High cecal intubation rate with variable stiffness (16)</td>
<td>✓</td>
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</tr>
<tr>
<td>Shorter time to cecum (16)</td>
<td>✓</td>
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<tr>
<td>Less sedation → quicker patient recovery (17)</td>
<td>✓</td>
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<tr>
<td>Less patient pain (18)</td>
<td>✓</td>
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<tr>
<td>ScopeGuide</td>
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<tr>
<td>Shorter time to cecum (18)</td>
<td>✓</td>
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</tbody>
</table>

Explore the evidence at: www.olympus.co.uk/proven

“NBI is the only virtual chroendoendoscopy that uses an internationally validated and acknowledged classification system – the NICE classification – and is ready to be used in daily clinical practice.”

Prof. Thierry Ponchon
Edouard Herriot Hospital
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Dept. of Digestive Diseases
Lyon, France