



Herniatome® • Motion & Mobility Restored

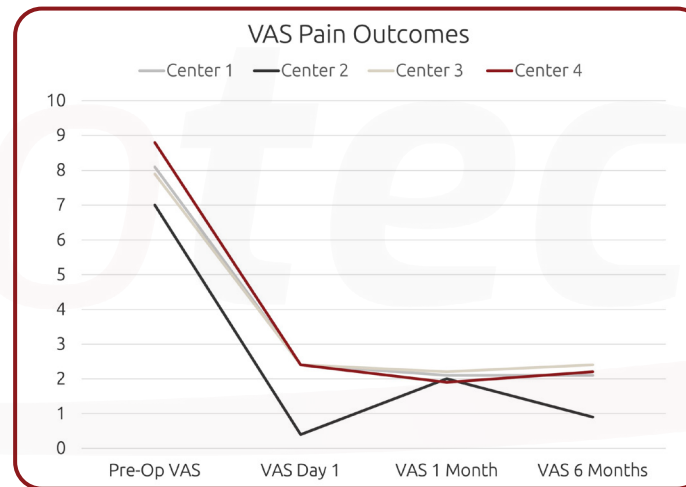
Safely, effectively and rapidly perform automated discectomies for contained herniations.

Concurrent percutaneous systems on market fail to provide a thorough disc decompression, offering little benefit due to design flaws. The Herniatome® system was designed with these flaws in mind to equip physicians with a wider extraction range of the bulging nucleus and to maximize reduction of the intradiscal pressure on the nerve root and the pain receptors in the annulus and peridiscal area; ultimately producing consistent, clear-cut aspiration of the contained herniation and decompression of the disc with minimal effort.

Less pain, less recovery time, and less cost to your patients.



- Automated excision of herniated nucleus
- Less invasive incision compared to traditional discectomy procedures
- Evaluate decompression in real-time
- Wide extraction range with minimal movement/manipulation
- Let the device do the work



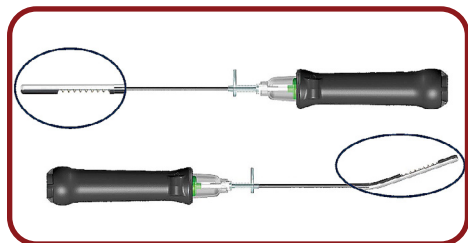
The outcomes for 77 patients in a multicentric study performed in four centers across three countries. This study was designed to evaluate the technical efficacy, safety, and reproducibility of automated percutaneous lumbar discectomy with Herniatome®. The results demonstrate a 100% technical success rate, mean procedure time (from patient installation to patient discharge) 30 min., and significant reduction in pain caused by disc herniation.

Amoretti, Nicolas, et al. "Percutaneous Discectomy under CT and FLUOROSCOPY Guidance: An International Multicentric Study." *Neuroradiology*, vol. 63, no. 7, 2021, pp. 1135–1143., doi:10.1007/s00234-021-02633-x.



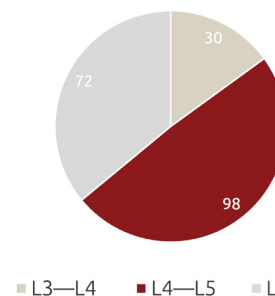


Herniatome® • Small Access. Big Results.

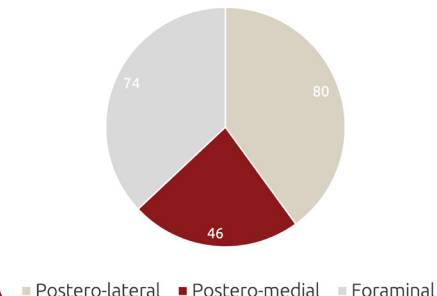


Herniatome's curved nature targets the herniated disc with the goal of creating space—an "olive shape" around the probe—to decrease the pressure inside the hernia and to decompress the disc. This design impacts a wider range of the bulge, aspirating more disc material compared to other percutaneous systems. The lateral window of the needle facilitates extraction of material through the distal tip and side with minimal movement.

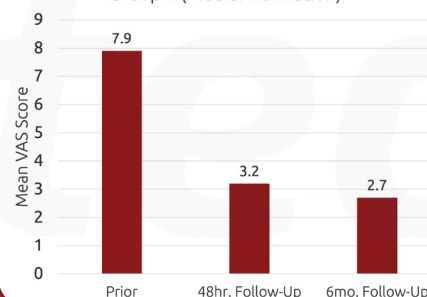
Level of Herniated Discs (# of cases)



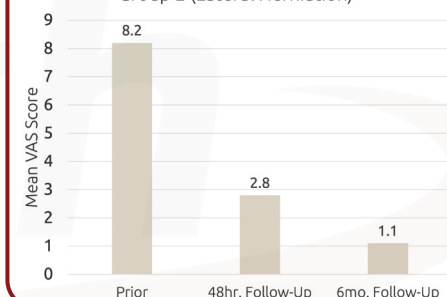
Location of Herniations (# of cases)



Group 1 (Medial Herniation)

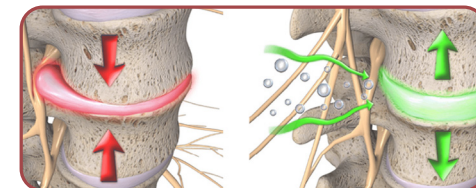
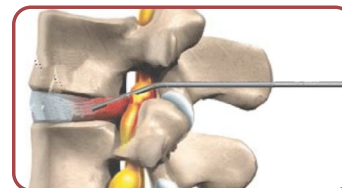


Group 2 (Lateral Herniation)



This study evaluates treatment with Herniatome® for two groups of patients with sciatica due to intervertebral disc herniation — one consisting of patients with disc herniation in a medial location and the other at a lateral location. 200 patients were included in this study and results demonstrated a mean pain reduction of 81% and the advantages of this procedure as an alternative to surgery.

Amoretti, Nicolas, et al. "CT- and Fluoroscopy-Guided Percutaneous Discectomy for LUMBAR Radiculopathy Related to DISC Herniation: A Comparative Prospective Study Comparing Lateral to MEDIAL Herniated Discs." *Skeletal Radiology*, vol. 42, no. 1, 2012, pp. 49–53., doi:10.1007/s00256-012-1422-5.



Herniatome® has emerged in the intermediate space between conservative care and major surgical intervention. With over 30 years of commitment to the perpetual development and innovation of medical solutions, Dumotech continues to accelerate the recovery to daily life for patients through procedure efficiency and efficacy—providing successful patient outcomes by reducing surgery time, tissue damage, recovery time, stress and pain.