



Locate. Ligate. Lift.
All with no cables.

The new wireless way to treat haemorrhoids.

The third generation of HAL-RAR equipment combines all the advantages of these procedures with the world's first wireless technology for Doppler-guided treatment of haemorrhoids.

TRILOGY

Locate. Ligate. Lift.



Why TRILOGY?

Comfort and convenience for the surgeon.

First came HAL, then there was RAR. Now there is **TRILOGY**.

The new generation of HAL-RAR equipment incorporates state-of-the-art technology in a small, easy-to-handle device to give you the highest level of operating comfort. Trilogy offers the ultimate in flexibility: the Bluetooth® connection allows you to rotate and manoeuvre the unit into whatever position you require before suturing through the ligation window, all with the convenience of no bothersome cables. In addition, you can choose between two different probes depending on your own individual preference.



Just two AA-batteries are required to power the small, handy Trilogy Unit. After surgery, the batteries are removed before the unit is steam-autoclaved ready for the next use.



The probe fits onto the unit and is secured with the fixation nut before being covered by the accompanying sleeve.



The unit is Bluetooth® paired with the speaker for transmittal of the acoustic Doppler signals. Once paired, the devices only need to be switched on and will subsequently connect automatically.

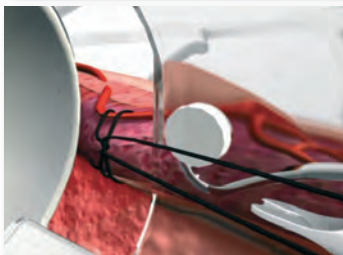
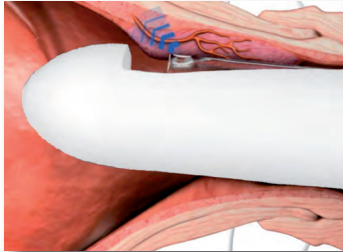


During surgery, high-performance LEDs provide optimal illumination and a clear view of the site.



HAL-RAR with TRILOGY

One device. All grades of haemorrhoids.



HAL (Haemorrhoidal Artery Ligation)

The HAL method is suitable for treating low to medium grade haemorrhoids, and is extremely effective in addressing the symptoms of haemorrhoidal disease. The ligations serve to reduce the arterial blood supply, causing the haemorrhoidal cushions to shrink back to normal size. This method can be carried out with ease using the Trilogy Probe.

1. Attached to the Trilogy Unit, the probe is introduced into the rectum and the unit with attached probe then rotated slowly to search for arteries. The loudest Doppler signal indicates the centre of the artery.
2. Once the first artery has been found, it is ligated using an A.M.I. Suture with 5/8 needle.
3. The unit is then turned again to locate further arteries. Once found, each artery is ligated as described in step 2.

As a rule, between five and eight arteries will be found during the procedure. However this number can vary from patient to patient, and will also depend on the severity of the haemorrhoids in each case.

TRILOGY

One device. All kinds of advantages.

- New Bluetooth® technology
- Improved light sources for better visibility
- Clearer Doppler signal for easier artery detection
- Greater working space



RAR (Recto Anal Repair)

The RAR method is used to treat the prolapsing haemorrhoids that occur during more advanced stages of the disease. RAR involves one or more mucopexies of prolapsing mucosa, carried out after the haemorrhoidal arteries have been ligated.

1. The Trilogy Unit with attached probe is placed in the starting position as for ligation. The ligation window points towards the prolapse position requiring treatment.
2. First, an initial stitch is made as far proximal as possible. The unit and probe are then turned slightly to reveal more mucosa distally.
3. Now a running suture is started, and then continued with gradual turning of the unit, leaving 7 to 10 mm between each stitch. After the last stitch, which ends proximal of the Linea Dentata, the needle is cut off and the suture material knotted up near the initial stitch. This causes the prolapsing tissue to be pulled up towards the initial stitch, where it is then secured in place with a sliding knot.



Why HAL-RAR?

Comfort and convenience for the patient.

Since the introduction of these minimally-invasive methods, over 100,000 patients have been treated with them worldwide. The operation can be tailored to suit each individual patient and achieves excellent results in terms of effectiveness, patient-friendliness and safety, which are reflected in the consistently high rates of patient satisfaction shown in the literature.

Considering the large number of procedures, the safety record to date is quite remarkable with not one major complication reported as having been caused by HAL-RAR.

Effective

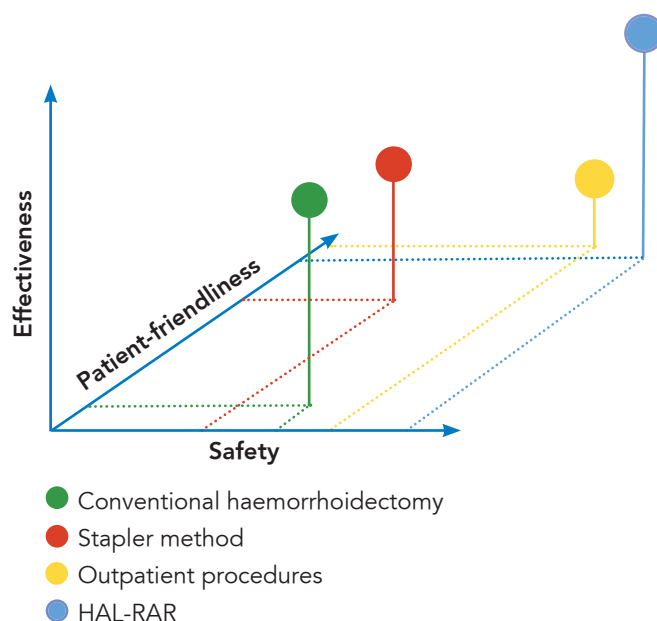
- Treatment with HAL of the three main symptoms - bleeding, itching and pain
- Treatment of the prolapse with RAR

Patient-friendly

- Minimal pain
- No cutting and no open wounds
- Quick recovery and return to work
- Local anaesthesia sufficient in many cases

Safe

- Fewer intra-operative complications
- Fewer post-operative complications



This diagram represents an assessment made by A.M.I. based partly on published data and partly on evaluations by surgeons who have experience with the HAL and RAR methods.

Forrest et al.

"Modern surgical treatment of haemorrhoids should be guided by patient symptoms. It should treat these symptoms to the patient's satisfaction with low impact on the individual.

DGHAL-RAR is safe, effective and well-tolerated. It reduces the need for potentially dangerous excisional procedures. Overall patient satisfaction following DGHAL-RAR was high..."

Int J Colorectal Dis DOI 10.1007/s00384-010-0951-4

Scheyer et al.

"91.25% of patients would again ask for HAL treatment if necessary and 93.75% of patients would recommend HAL to a friend.

The HAL procedure is synonymous with a high level of patient comfort...."

Am J Surg 191 (2006) 89-93

