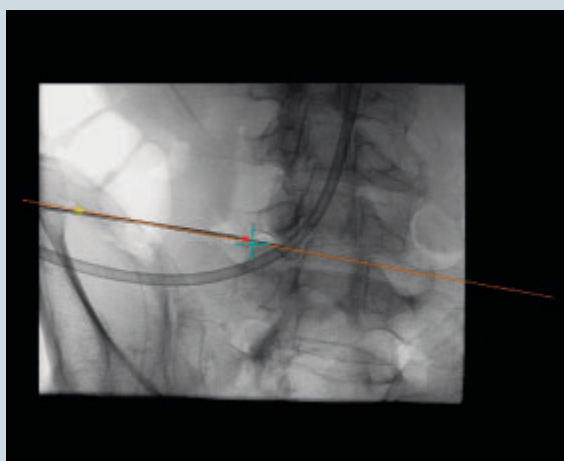
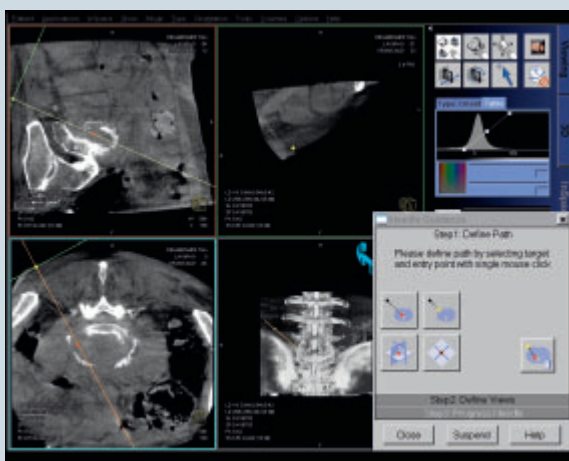


Live and Integrated Needle Guidance with *syngo* iGuide

With *syngo* iGuide, Siemens Healthcare is launching a new application in interventional radiology for the new Artis *zee* family introduced at the RSNA 2007. It enables live and integrated needle guidance with an angiographic C-arm system. These kinds of procedures are usually performed in a CT scanner, now they can be done directly in the interventional suite with greater access to the patient. This is

especially helpful in cases of obese patients and when performing steep angulations. *syngo* iGuide is a useful tool to plan and perform needle procedures such as biopsies, radiofrequency ablations or vertebroplasties. The application provides three easy steps to consistent needle planning and positioning. By taking the user through its intuitive workflow, *syngo* iGuide allows the user to plan the needle

path, define the skin entry point and control the needle progression in one fluid workflow. Aside from enhanced workflow and planning confidence of needle procedures, *syngo* iGuide also brings financial benefits. As needle procedures can now be moved from the CT scanner directly into the interventional suite, the CT is freed up for more diagnostic cases and resources are allocated in a better way.



70-year-old male for biopsy of lumbar disc L4/L5 – Courtesy of Dr. Wallace, MD Anderson, Houston, TX, USA

Mobile Cath Lab on Tour

In May 2007 the first-of-its-kind mobile magnetic cardiac catheterization lab hit the road. On its trip through the United States it stopped in various states like Oregon, California, Arizona, Pennsylvania, North Carolina, Columbia, New York, Florida and many more. One of the many stops was the TCT Congress (Transcatheter Cardiovascular Therapeutics) in Washington, DC. The 74-foot (22.5 m) truck is equipped with a Siemens flat detector imaging system and NIOBE magnets from Stereotaxis Inc. A CARTO RMT™ workstation and the new Odyssey™ network solution from Stereotaxis are also available. Thanks to this mobile marketing idea, customers from all over the US and even Canada were able



to experience working on Siemens C-arm system with Magnetic Navigation. The lab that can also be used with X-ray is part of a demonstration and education display for Siemens Healthcare and Stereotaxis, Inc.



Stopover of the Magnetic Navigation Truck at the TCT Congress in Washington, DC.

Learn from the Experts

Medical University Vienna offers training for magnetic navigation in interventional cardiology



Prof. Glogar in the control room of his magnetic navigations system.

Magnetic navigation technology is not as widely used in interventional cardiology as in electrophysiology. But the experts believe this technology points the way to the future and holds great promise in selected cases. Magnetic navigation makes probing complex vascular structures easier for the cardiologist and enables treatment of chronic total occlusions (CTO). The interventions are shorter, pose fewer risks and can be performed using less contrast agent. Overall, it is the patient who benefits.

Currently there are 72 Stereotaxis magnetic navigation installations worldwide, 80% of them paired with the digital FD angiography system from Siemens. In 2006, a system with magnetic navigation was installed in cardiology at the

Allgemeines Krankenhaus (AKH), Vienna, Austria. On November 21 and 22, 2007, the department, with the support of Siemens AG and Stereotaxis, delivered the first course to cardiologists working in the field of invasive intervention as well as those interested in new technologies. The presentation started off with firsthand technical and clinical reports from internationally recognized expert Marc Patterson, MD of the OLVG in Amsterdam. On the second day of the program, the cardiology team from Vienna demonstrated numerous clinical cases, discussed them with course participants via live satellite transmission. During the intervention, participants could communicate with the examiner and course leader Univ. Prof. Dr. Dietmar Glogar in

the cath lab and gain direct practical knowledge.

The success of the first course encouraged the presenters to schedule another course in English for the first quarter of 2008. Registration will be handled by Siemens AG Austria.

We gratefully acknowledge the cardiology team at the Vienna Medical University for contributing valuable knowledge to their colleagues as well as for spreading the word on the practical application of these new examination methods. We wish them continued great success in future courses.

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