



Radio Frequency Surgical System

Precise Cut

Easy Hemostasis

No Carbonized Coagulation

SENS-AK B Series



APRO KOREA Inc,

CE 0120



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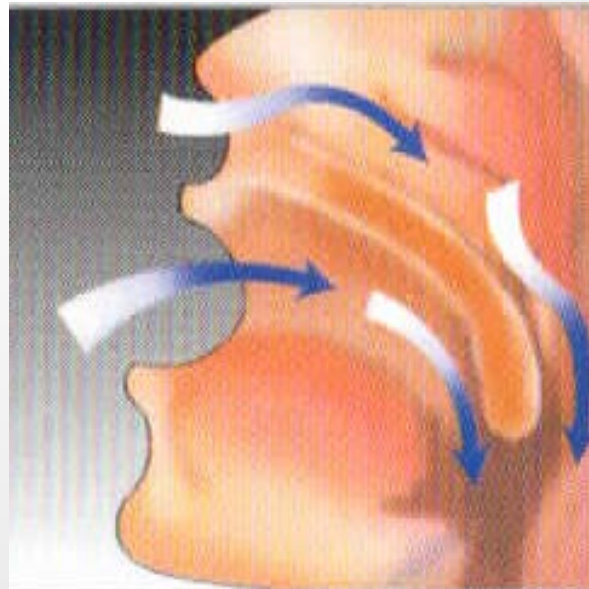
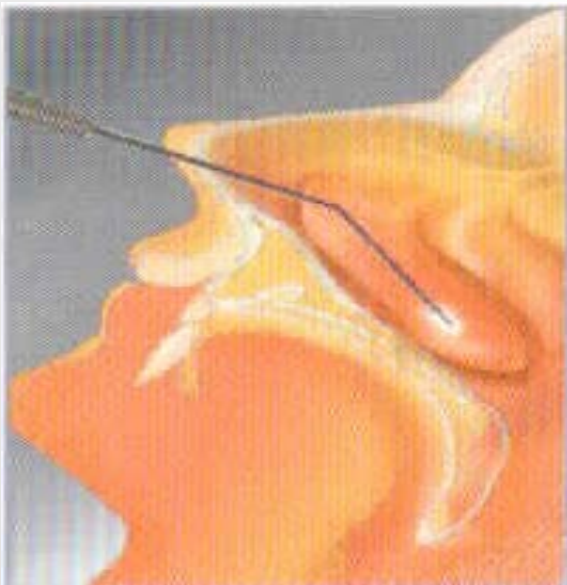


Function		AK-B250 Max.power	AK-B300 Max.power	AK-B400 Max.power
Cut	Cut(Pure)	250W	300W	400W
	Blend 1	150W	230W	230W
	Blend 2	120W	180W	180W
Coagulation	Contact	100W	120W	120W
	Spray	80W	100W	100W
Bi-polar	Imp. On(optional)	80W	100W	100W
	Imp. Off	80W	100W	100W
ENT Bipolar surgery(optional)		30W~50W	-	-

R.F.T.R(Radio Frequency Turbinate Reduction)

– A minimally invasive surgical option that can reduce tissue volume in a precise, targeted manner. This technique uses radiofrequency to create lesions within the submucosal tissue of the turbinate, reducing tissue volume with minimal impact on surrounding tissues.

Radiofrequency turbinate reduction differs fundamentally from traditional method using low-power radiofrequency energy to provide a relatively quick and painless procedure for tissue coagulation.





Indication

- Nasal congestion and rhinorrhea associated with inferior turbinate mucosal hypertrophy
- Nasal congestion with inferior turbinate mucosal hypertrophy with a mildly deviated septum
- Sleep apnea with increased nasal resistance and difficulty wearing a nasal CPAP mask
- Inferior turbinate mucosal hypertrophy undergoing septoplasty, rhinoplasty, or endoscopic sinus surgery
- Rhinitis medicamentosa requiring adjunctive treatment



Positioning

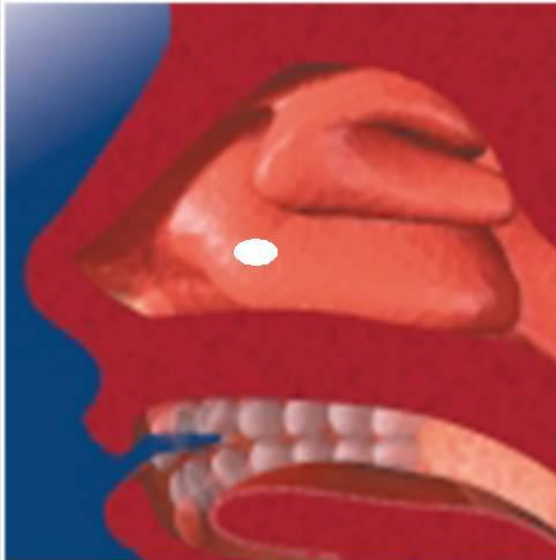
- For the stand-alone procedure, seat the patient comfortably in an examination chair with dispersive electrode placed over a well-vascularized muscular site (eg, lower back or lateral scapula) with full contact to the skin.
- When performed in the setting of another nasal surgery, no special positioning is required.

Technique



- Insert the handheld needle electrode into the anterior portion of the inferior turbinate, as shown.
- Insert the needle electrode into the middle portion of the inferior turbinate from an inferomedial approach to deliver 350–500 joules, 2–10 watts, and 70–80 volts, with a target temperature of 80°C per lesion. The activated system usually takes 2 minutes per lesion.
- The depth of insertion should be 5 mm to reduce the risk of damage to the mucosa, causing ulcerations or sloughing.
- Several options are available to create lesions within the inferior turbinate in order to achieve technique options

Technique



Single anterior lesion

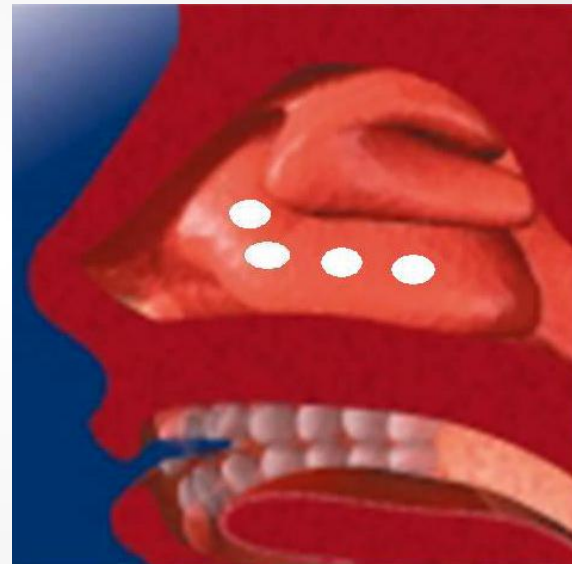


Anterior and mid lesions

Technique

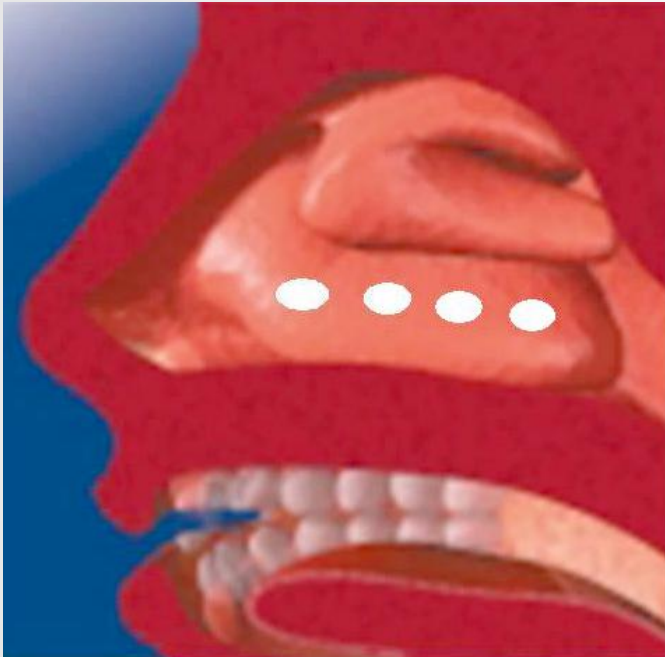


Stacked anterior lesions



Stacked anterior lesions, mid lesion, and posterior lesion

Technique



Anterior, mid, and posterior lesions (4-lesion procedure)



Complication

- Patients may experience mild to moderate pain during treatment of the posterior inferior turbinate. This can be controlled with additional local anesthetic injection.
- Mild-to-moderate edema with subsequent nasal obstruction and thick mucus formation can be expected for the first week after the procedure.
- If mucosal erosion is present, the risk of postoperative bleeding and adherent crust formation increases.
- If performed along with a septoplasty, scar tissue may form between the turbinate and the septum.

The End~
Thanks for your attention.

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