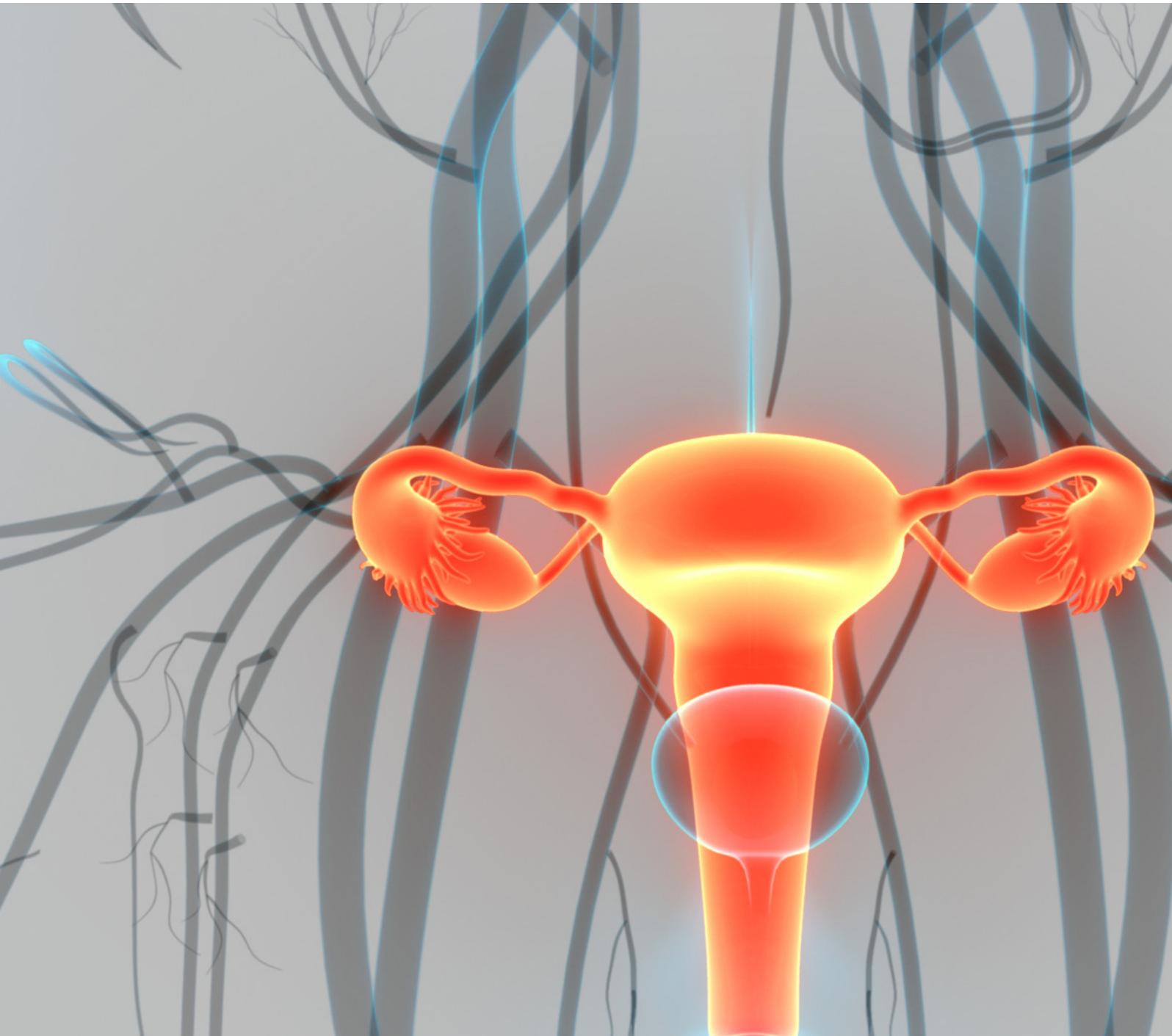


Transvaginal Radiofrequency Ablation

Minimally Invasive Solution Enhancing Women's Quality of Life





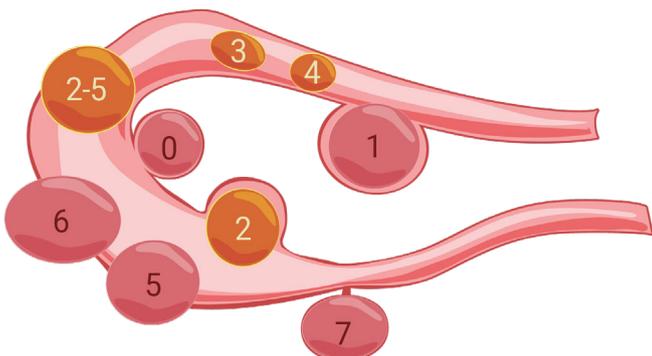
What is Transvaginal RFA?

Transvaginal radiofrequency ablation (RFA) is the latest uterine-conserving procedure to treat uterine fibroids.

RFA generates thermal effect inside a fibroid resulting in three distinct therapeutic histological changes:

- 1 The death of tissue cells from coagulation
- 2 Formation of vascular thrombosis in the blood vessels that supply the fibroid
- 3 Inactivation of hormonal receptors within the fibroid that prevents tumor tissue from growing

Which FIGO Type Myoma Can Be Treated with STARMED?



Clinical Benefits of Transvaginal RFA

1. Minimally Invasive Procedure

"Uterine Myoma Position-based Radiofrequency Ablation is a safe, effective, and minimally invasive solution for the treatment of symptomatic fibroids."¹

2. Shorter recovery time with QOL improvement

"RFA is an available minimally invasive option for treatment of leiomyomas. This procedure is well-tolerated, allowing for same-day discharge rapid recovery and appear to be a safe approach for women who want to preserve their reproductive potential."²

3. Safe and Effective Treatment

"Transvaginal radiofrequency ablation was an effective and safe technique for the treatment of myomas. The patient's age and initial size of the myoma influenced the outcome of treatment."³

"TRFAM is an effective and safe technique in selected patients for the treatment of metrorrhagia secondary to myomas."⁴

4. Supporting Normal Pregnancy

"A statistically significant reduction in symptoms related to the fibroids after the ablation was demonstrated through the implementation of the Symptom Severity Scale. Among those patients who attempted pregnancy during the 24-month follow-up period, 73.68% achieved motherhood. There were no cases of uterine rupture, premature birth, or intrauterine fetal death."⁵

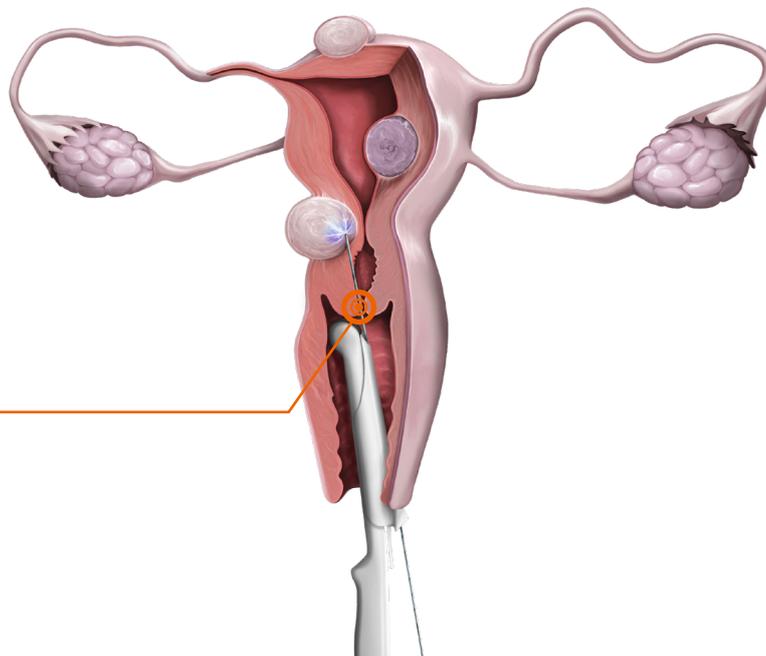


How to Approach?

Laparoscopic Approach

Hysteroscopic Approach

Transvaginal Approach



Follow up

Initial Ultrasound



37×32×35 mm (21.54 cm³)
8 days total bleeding, 6 HMB

1 Month



26X28X22 mm (8.32 cm³) ↓ 62%
6 HMB, 4 HMB (33%)

6 Months



18×20×19 mm (3.83 cm³) ↓ 83%
4 TB, 4 HMB (25%)

Why **STARMED** for Transvaginal RFA?

- Complete range of electrode types & specifications
- Clear visualization of electrode tip on ultrasound
- Easy & smooth electrode control for moving shot technique

star
RF Electrode_Fixed



star
RF Electrode_Bipolar



VIVA II
RF Electrode



VIVA
RF Generator

- Dedicated mode for Transvaginal RFA
- Advanced ablation system with impedance control
- Integrated calibration check for patient safety

Product Specification

Model name Specification	star RF Electrode_Fixed	star RF Electrode_Bipolar	VIVA RF Electrode_V2 type
Gauge	16G, 17G	17G	16G, 17G
Length	250 mm, 300mm, 350 mm	250 mm, 350mm	250 mm, 350mm
Active Tip	10 - 40 mm	16 mm, 20 mm	5 - 30 mm, 15 - 40 mm

[References]

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- [2024] Outcomes of transvaginal radiofrequency ablation for symptomatic leiomyomas. (Daniela Escalante Ariza, MD, Isabel Rodríguez García, MD, José Alejandro Ávila Cabreja, MD, Esther Hidalgo Carmona, MD)
- [2022] Efficacy, Complications, and Factors Predictive of Response to Treatment with Transvaginal Radiofrequency Ablation for Symptomatic Uterine Myomas. (Ángel Santalla-Hernández, MD, Mariña Naveiro-Fuentes, MD, Rebeca Benito-Villena, MD, María Setefilla López-Criado, MD, Aida González-Paredes, MD, Jorge Fernández-Parra, MD)
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- [2024] Transvaginal radiofrequency ablation: a therapeutic option for managing symptomatic uterine fibroids in women with reproductive desires. (Eugenia Marín Martínez, MD, Sara Cruz-Melguizo, MD, Gema Vaquero Argüello, MD, Virginia Engels Calvo, MD, Ma Luisa De la Cruz Conty, MD, Tirso Pérez Medina, MD)

* All clinical data presented are conducted with the STARMED products.

STARMED

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