

CLINY

All Silicone Sengstaken Blakemore Tubes Type 42, 52, 53



CREATE MEDIC CO.,LTD.

All Silicone Sengstaken Blakemore Tube TYPE 42

■ TYPE 42

FEATURES AND ADVANTAGES

All Silicone made

The tube is extremely flexible, and can be inserted or removed without injuring the esophageal mucosa.

There is little danger of choking, because blood and other liquids hardly adhere to the wall.

4 Lumens

Having moderate elasticity, the tube is not only easy to insert, but also able to suck and remove efficiently the contents of the stomach, the blood shed from the upper esophagus and saliva, because it has large gastric and esophageal suction lumens.

Fitted with a stylet

It is essential to maintain systemic circulation kinetics and hepatic blood flow when sudden bleeding occurs.

Particularly, if it is not possible to find out the site of bleeding, it must be stopped immediately with an S-B Tube.

Cliny S-B Tubes are fitted with a stylet, enabling their insertion more rapidly compared with the traditional tubes.

The esophageal balloon, the homostatic effect of which is safe and excellent

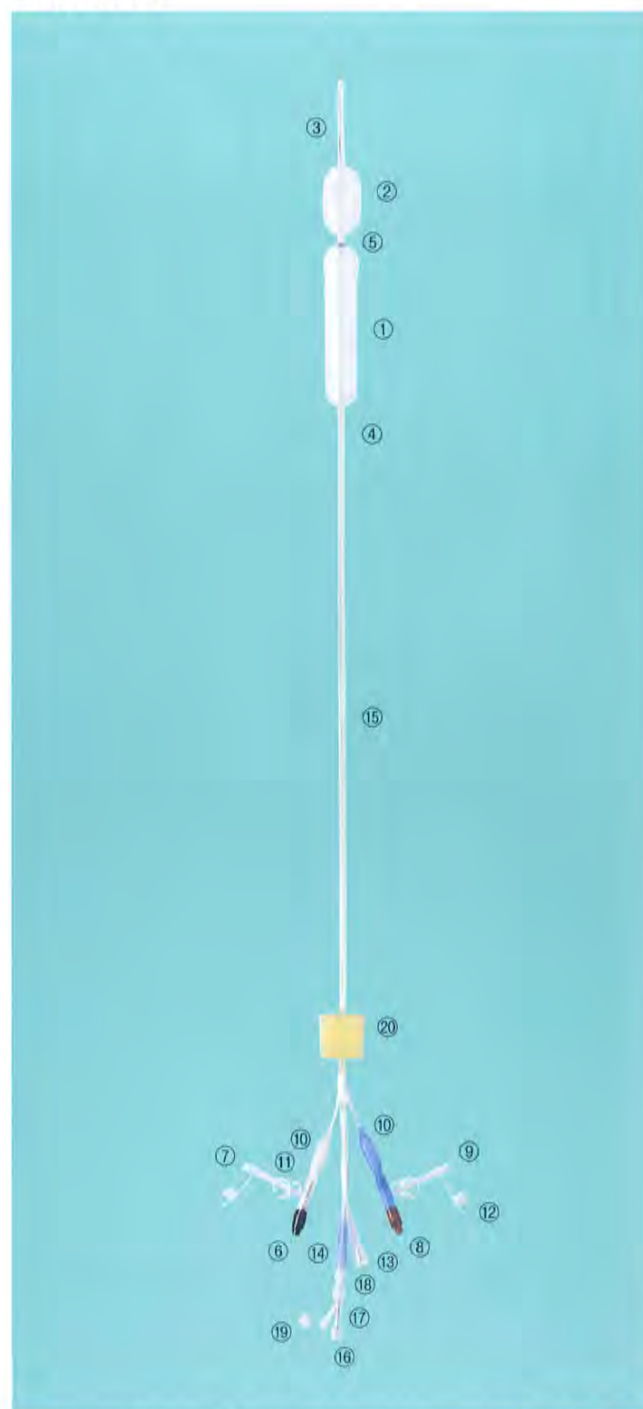
A low-pressure Cuff balloon with an internal pressure is not exceeding 40mm Hg at the external diameter of 32mm. As the total length is as short as 140mm, and since the end in the vicinity of the stomach balloons more than the other end, there is little danger of suffocation, and hemostasis can be achieved with an extremely high degree of certainty.

Equipped with a spongy pad

S-B Tubes are also equipped with a spongy pad to be fixed on the naris of the patient, and a clamp which makes it easy to open and close the manometer line.

Easy to use manometer lines

As the manometer lines are branches of the balloon lumen, injections can be made when the internal pressure is confirmed. The gastric and esophageal manometer lines are distinguishable by color, namely blue and transparent respectively, thus increasing the safety of operation.



- ① Esophageal balloon
- ② Gastric balloon
- ③ Gastric suction opening
- ④ Esophageal suction opening
- ⑤ Balloon confirmation mark
- ⑥ Valve for esophageal balloon
- ⑦ Esophageal manometer line

- ⑧ Valve for gastric balloon
- ⑨ Gastric manometer line
- ⑩ Pilot balloon
- ⑪ Clamp
- ⑫ Cap
- ⑬ Funnel for esophageal suction
- ⑭ Funnel for gastric suction

- ⑮ Graduation mark
- ⑯ Stylet
- ⑰ Port for lubrication
- ⑱ Connector
- ⑲ Inlet for lubricant
- ⑳ Spongy pad

■ Specifications

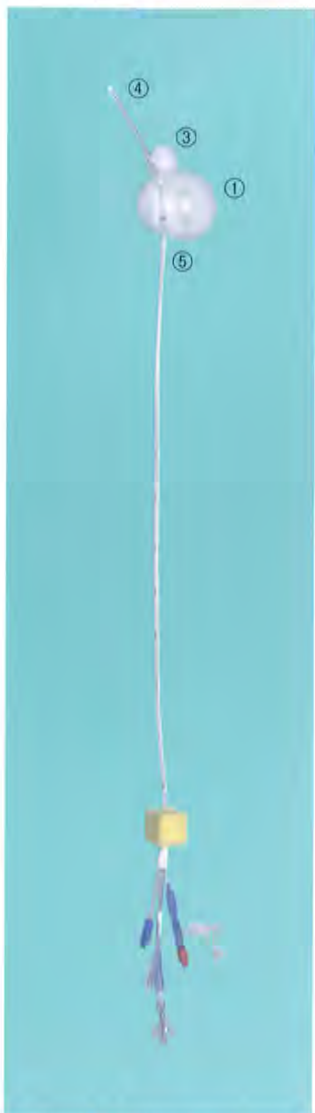
Product No.	Nominal Size	External diameter Effective length (mm)	Side opening	Gastric Balloon	Esophageal Balloon	Depth mark
002-182-0400	16Fr	5.3-850	Gastric suction opening ; 3 holes Esophageal suction opening ; 2 holes	Length ; 60mm Air volume ; Average ;150-200cc Maximum ; 350cc	Length ; 140mm Internal pressure ; 40mmHg at 32mm outer diameter	Indicated by lines with figures at 25, 30, 35, 40, 45 and 50cm from the balloon confirmation mark.
002-182-0420	18Fr	6.0-850				
002-182-0440	20Fr	6.7-850				

Package: 1 piece per box, Sterilized with Eto gas.

TYPE 52



TYPE 53



- ① Gastric balloon
- ② Esophageal balloon
- ③ Fixing balloon
- ④ Gastric suction opening
- ⑤ Esophageal suction opening

All Silicone Sengstaken Blakemore Tube

TYPE 52·53

S-B Tubes Types 52 and 53

S-B Tubes Types 52 and 53 with balloons for emergent angiopressure of the bleeding induced by gastric varices.

Endoscopic injection sclerotherapy(EIS) is an established method for the treatment of esophageal varices, but it is said that it is different to treat gastric varices(particularly discrete varices found in the region of the fundus of the stomach) with this therapy. Varices in the region of the fundus where blood flow is large are sometimes fatal because of the difficulty of stopping bleeding.

A large balloon, which has been often used for the emergent hemostasis of the bleeding caused by gastric varices in the region of the fundus, leads to not only the distention of the stomach with the relaxation of the gastric acceptability but also the expansion of the bleeding site.

S-B Tubes Types 52 and 53 have been developed to overcome these defects. It is said that there are many soft tissues to accelerate the relaxation of the gastric acceptability. However, the diaphragm does not fall into this category of tissues. Bleeding can be stopped by putting the bleeding site of varices between the diaphragm and an S-B Tube.

Application method of S-B Tubes Type 52 and 53

A fixing balloon is installed in S-B Tubes Types 52 and 53 in addition to the balloon to stop bleeding from gastric varices. Insert each balloon into the stomach, and pour 60mℓ of sterilized distilled water into the fixing balloon. Then, send air slowly into the gastric balloon, and pull back the tube till the balloon slightly presses the junction of esophagus and stomach to tract the tube with a force of 300-500g. It should be noted that S-B Tube Type 52 has no esophageal balloon.

The following figure shows how to apply Type 53 tube.

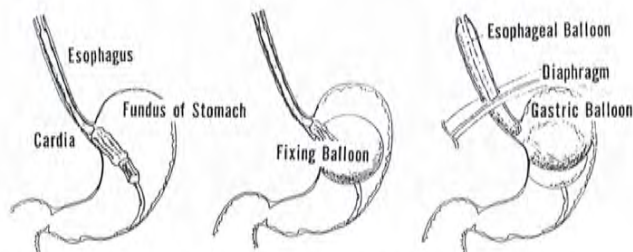


Figure in use of Type 53 tube

SPECIFICATIONS

Type	Product No.	Nominal Size	O.D. & Effective Length (mm)	Side Opening	Gastric Balloon	Esophageal Balloon	Fixing Balloon
Type 53	002-182-5318	18Fr	6.0-850	Gastric suction opening; 4 holes Esophageal suction opening; 2 holes	Length; 40~70mm Air volume; Average; 200~300mℓ Maximum; 400mℓ	Length; 140mm, Internal pressure; about 40mmHg at 32mm outer diameter	Capacity; 60mℓ of sterile distilled water
Type 52	002-182-5218	18Fr	6.0-850			No esophageal balloon for type 52	

Graduation marks: Indicated by lines with figures at 25, 30, 35, 40, 45 and 50cm from the balloon confirmation mark.
Package: 1 piece per box. Sterilized with EtO gas.

Please note that a partial amendment in specifications is made occasionally, as studies and developments have been performed continuously.

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