

Boston Scientific

Advancing science for *life*™

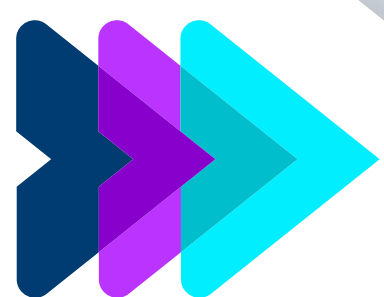
ESG: A proven, minimally invasive procedure for sustainable weight loss

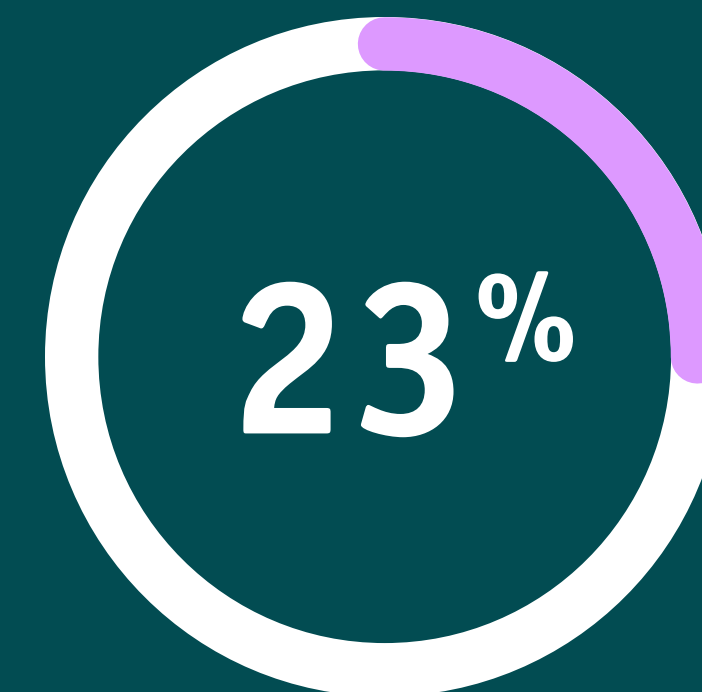
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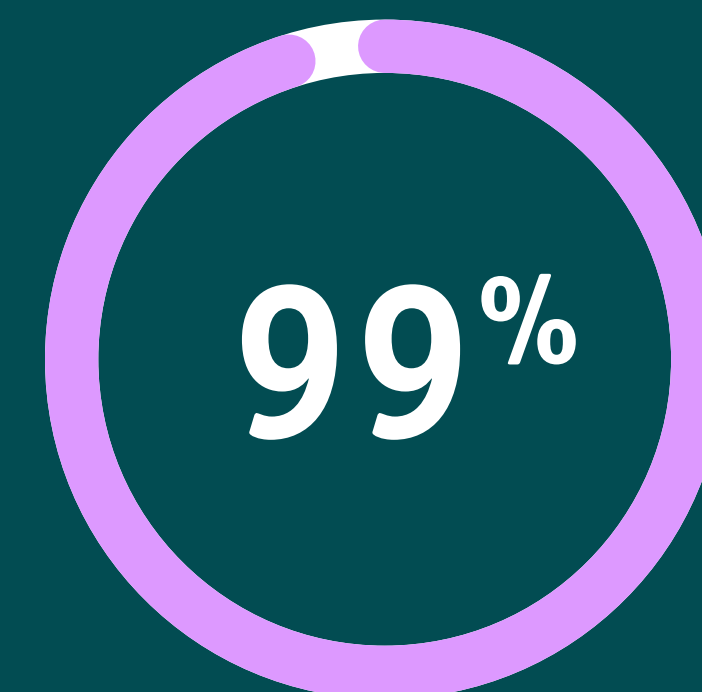
Endoscopic Sleeve Gastroplasty (ESG) is one of the procedures that is part of Endura Weight Loss Solutions from Boston Scientific.

endura
Weight Loss Solutions





of adults
in Europe
are obese.¹



will never receive
a weight loss
procedure.²



Introducing Endoscopic Sleeve Gastroplasty (ESG)

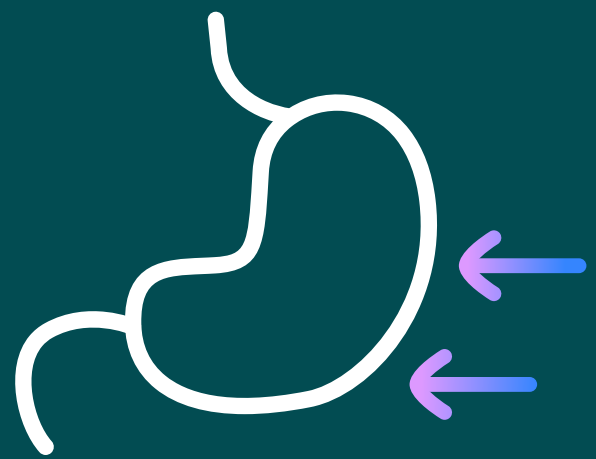
ESG is a minimally invasive procedure designed to support gradual, lasting weight loss when combined with lifestyle changes.

It reduces stomach size using sutures placed through the mouth during a simple outpatient procedure – helping patients eat less and feel fuller, faster.

- No incisions or scars
- Typically a same day procedure
- Organ-sparing, reversible
- Preserves future treatment options



One procedure. Sustainable results.



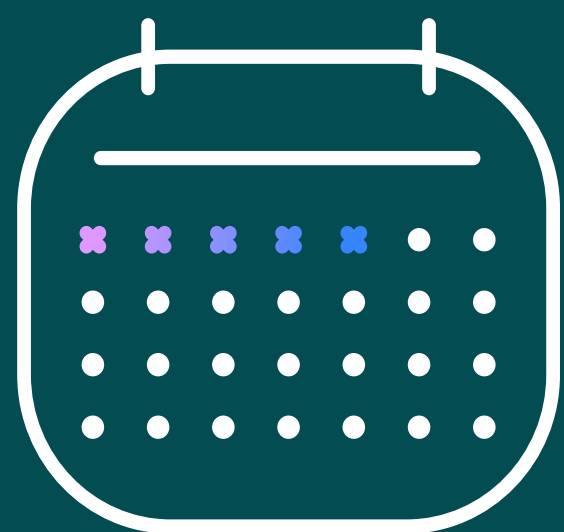
~70 – 80 % stomach reduction

ESG helps people living with obesity feel fuller, faster, resulting in significant weight loss when combined with diet and lifestyle modifications.



Proven weight loss that lasts

In a randomised clinical study, ESG patients lost an average of 13.6% of total body weight at year 1.³



Minimal time away

Most patients typically go home the same day as the procedure and can return to routine daily activity in 2–3 days.³



How is the ESG procedure performed?

ESG is performed under general anesthesia by a trained gastroenterologist or surgeon that uses the OverStitch™ System to create 6-8 plications along the greater curve of the stomach.



6–8 running sutures are placed in a U-shaped pattern along the greater curve of the stomach.



When tightened and secured, the sutures draw together the anterior and posterior walls of the greater curve to shorten gastric length and reduce diameter.



The endoscopic plications result in similar shape to laparoscopic sleeve gastrectomy, but with the fundus and antrum spared.



Clinical evidence

Clinical evidence demonstrates that ESG can lead to significant, lasting weight loss when combined with a prescribed diet and exercise programme. Over the past decade, the body of evidence supporting ESG's safety, efficacy, and durability has been meticulously developed, encompassing both level 1 evidence and large meta-analyses.

40,000

**ESG procedures
performed
worldwide.***

15,000

**patients included
in clinical studies.***

+200

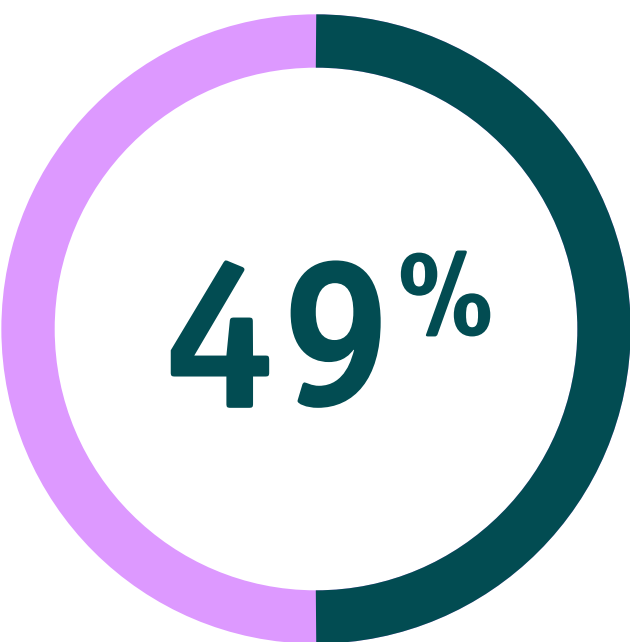
**Over 200 clinical
papers and abstracts
published.***

* IFSO (International Federation for the Surgery of Obesity and Metabolic Disorders) Bariatric Endoscopy Committee Evidence-Based Review and Position Statement on Endoscopic Sleeve Gastroplasty for Obesity Management. 2024.

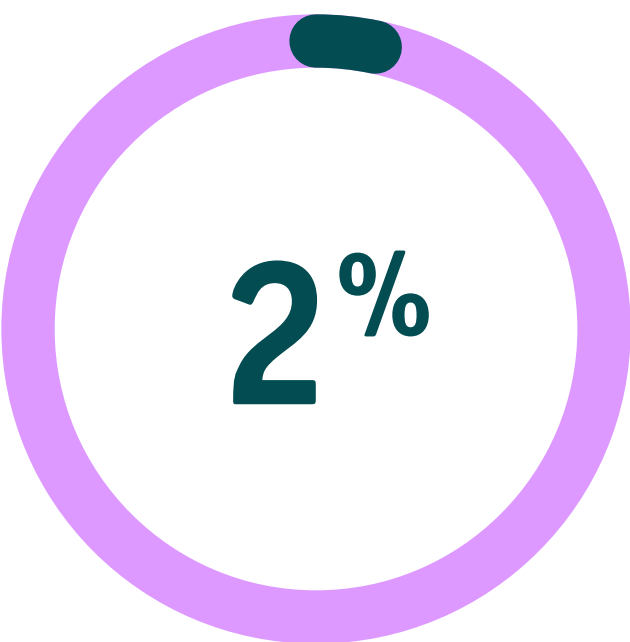


MERIT Study

The Merit Trial is a multicentre, prospective, randomised clinical trial that evaluated the safety and effectiveness of the ESG procedure versus a medically monitored regimen of diet and healthy lifestyle.

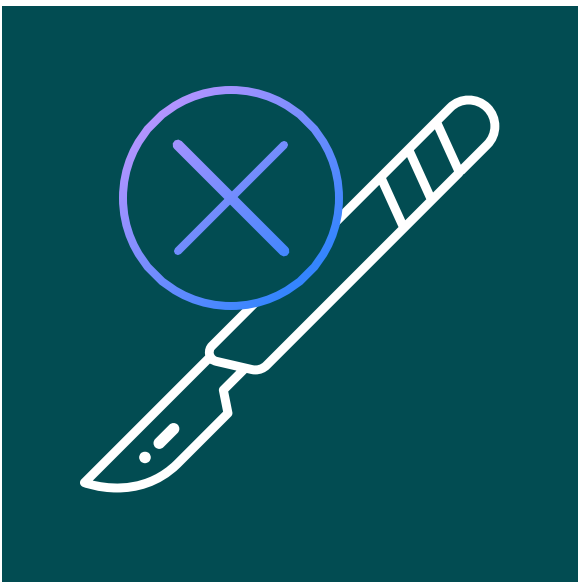


Excess body weight loss 12 months after the procedure.³

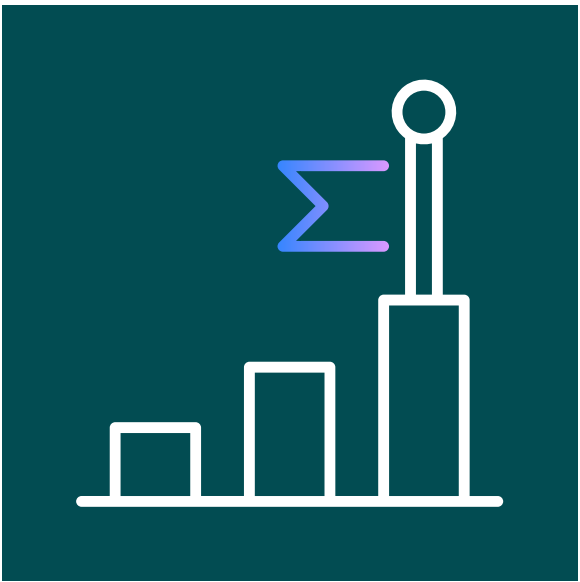


Rate of serious adverse events among all the ESG completers (Clavien-Dindo Grade III or higher).³

ESG delivers on all fronts:



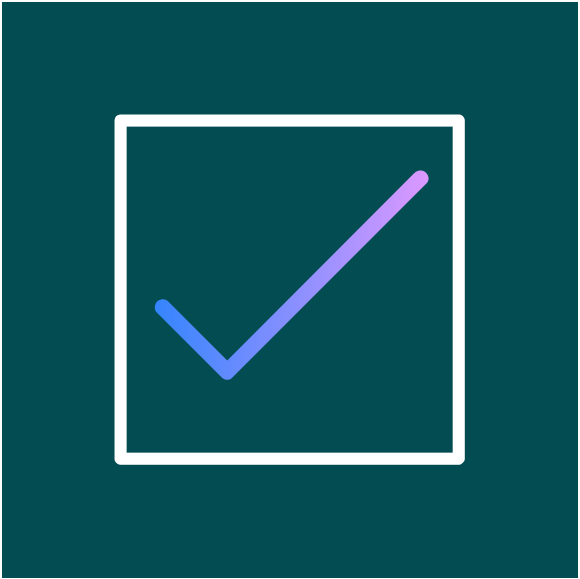
Minimally invasive solution



Significant and lasting weight loss



Clinically proven



Safety



1. WHO European Regional Obesity Report 2022. <https://apps.who.int/iris/bitstream/handle/10665/353747/9789289057738-eng.pdf>.
2. ASMB. Estimate of Bariatric Surgery Numbers 2011-2020.
3. Endoscopic sleeve gastropasty for treatment of class 1 and 2 obesity (MERIT): a prospective, multicentre, randomised trial. Barham K Abu Dayyeh et al. Lancet. 2022 Aug 6;400(10350):441-451.

The OverStitch™ System is intended to be used by trained gastroenterologists or surgeons that perform bariatric procedures to facilitate weight loss by reducing stomach volume through endoscopic sleeve gastropasty in adult patients with obesity who have not been able to lose weight, or maintain weight loss, through more conservative measures.

Contraindications

ESG procedure is not indicated where endoscopic interventions are contraindicated, on malignant tissue, or in patients with large hiatal hernia, potentially bleeding gastric lesions (e.g. ulcers; erosive gastritis; varices; or vascular malformations), affective disorders not under medical supervision or refractory to medical therapy and all eating disorders (e.g. anorexia nervosa; binge eating disorder; specified feeding and eating disorders; avoidant restrictive food intake; rumination), coagulopathy and antiplatelet/anticoagulant therapy that cannot be corrected, or pregnancy.

All patients need to review and understand all the complications and risks before undergoing any procedure. At all times physicians will act as an independent agent and use their independent medical judgement to determine whether any procedure is in the best interest of any particular patient.

Potential risks associated with the OverStitch™ System include: pharyngitis, vomiting, nausea, moderate abdominal pain, constipation, generalized weakness after procedure, heartburn, fever, gastrointestinal bleeding (with or without melena or hematemesis), dehydration and/or nutritional deficiency requiring hospital admission, perigastric fluid collection, leak, hemoperitoneum, hematoma, paresthesia, GERD, peritonitis, pneumoperitoneum, pulmonary embolism, perforation (gastric or esophageal), pneumothorax, pneumomediastinum, gallbladder suture, spleen laceration, deep vein thrombosis, esophageal tear, pleural effusion, persistent vomiting, bowel obstruction, infection/sepsis, bloating, stricture, liver abscess, intra-abdominal (hollow or solid) visceral injury, aspiration, shortness of breath, acute inflammatory tissue reaction, death.

Every practice should review its informed consent practices with respect to endobariatric procedures such as ESG, with their own administration and counsel.

For full safety information, visit www.IFU-BSCI.com.

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