

ASPIRATE TO APPLICATION[™]

Without Centrifugation

Bone Marrow Aspirate Collected
With The Marrow Cellution™ System Has
Shown An Increase In Key Stem And
Progenitor Cells When Compared To
Centrifuged Marrow From
Leading Systems





The patent pending Marrow Cellution™ systems maximize the yield of stem and progenitor cells by giving the clinician the ability to efficiently harvest bone marrow from multiple levels within the medullary space, while restricting dilution caused by peripheral blood.

What are the Limitations of a Traditional Needle?

Traditional bone marrow aspiration needles aspirate primarily through an open-ended cannula, which leads to excess peripheral blood dilution and inadequate collection of key stem and progenitor cells. For this reason a high volume of bone marrow aspirate must be collected and then manipulated (i.e. centrifuged) before being applied for regenerative therapies.

How Does the Marrow Cellution™ System Overcome These Limitations?

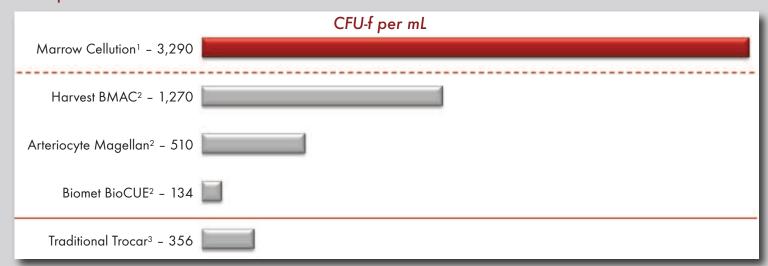
The unique design of the Marrow Cellution™ system offers two key features that are not capable with a traditional needle:

- Closed-tip aspiration cannula that restricts aspiration through the side holes of the cannula and away from the channel caused by the tip of the needle, avoiding excess peripheral blood infiltration.
- A mechanical means for measured controlled retraction of the aspiration cannula to collect bone marrow aspirate from multiple geographies inside the medullary space with a single puncture.





Competitive Performance



- 1. Scarpone M, et al. Marrow Cellution Bone Marrow Aspiration System and Related Concentrations of Stem and Progenitor Cells. White Paper 2015.
- 2. Hegde V, et al. A prospective Comparison of Three Approved Systems for Autologous Bone Marrow Concentration Demonstrated Non-Equivalency in Progenitor Cell Number and Concentration. J Orthop Trauma. 2014 Oct; 28(10):591-8
- 3. McLain R, et al. Aspiration of Osteoprogenitor Cells for Augmenting Spinal Fusion: Comparison of Progenitor Cell Concentrations from the Vertebral Body and Iliac Crest. J Bone Joint Surg Am. 2005 Dec; 87(12): 2655-2661.

PRODUCT DETAILS

Marrow Cellution™ is offered in two unique styles – both utilizing the same patent(s) pending technique for optimized bone marrow aspiration.

Style	Description	Catalog #	Effective Length
For Bone Marrow Aspirate	Marrow Cellution™ is available in both 11 and 13 gauge and includes an introducer needle, blunt stylet, aspiration cannula and 10mL syringe. The technology is available in multiple lengths and is designed for use in the Iliac Crest, Pedicle, Calcaneous or Tibia.	MC-RAN-13C	3.5" Aspiration Needle
		MC-RAN-11C	3.5" Aspiration Needle
		MC-RAN-11CSTS (Designed for obese patients)	4.5" Aspiration Needle
For Bone Marrow Aspirate + Percutaneous Cancellous Bone Harvesting	Delivering "Gold Standard" autograft in a minimally invasive manner, this version includes an 11 gauge Marrow Cellution™. Bone Marrow Aspiration system with all componentry along with an 8 gauge Trephine Needle with a specially designed cancellous bone extraction tool to harvest bone dowels percutaneously.	MC-RAN-8C	3.5" Aspiration Needle with 4" Trephine Needle
		MC-RAN 8CSTS (Designed for obese patients)	4.5" Aspiration Needle with 6" Trephine Needle

KEY BENEFITS

Reduce the Cost of Utilizing Biologics

The Marrow Cellution™ System delivers a better regenerative solution at a reduced cost compared to the industry leading solutions.

Minimize O/R Time

Centrifugation systems typically require 20 minutes or more of spin time during the surgical procedure, not to mention the additional support time needed for preparation and cleanup of the equipment.

Minimize Sterility Challenges

Centrifugation systems require passing the BMA off the sterile field for processing and back on for implantation. The Marrow CellutionTM System eliminates the additional steps where infection concerns must be managed.

Minimize Sample Waste

Centrifugation systems typically discard 80% of the aspirate due to the high levels of peripheral blood. Worse, significant numbers of the desired cells (approx. 40%) are discarded because as these cells increase in density prior to division, they are processed into the undesired red cell centrifuge component and thus discarded, substantially limiting the regenerative potential of the resulting sample.

Minimize Use of Anti-Coagulants

Centrifugation systems require at least 10% dilution by volume for the addition of anti-coagulant to allow the sample to separate, and also require another 10% dilution in the form of a neutralizing agent such as thrombin and calcium chloride in order for the marrow to clot in the graft. The Marrow CellutionTM System eliminates these requirements.

Eliminate the Need to Filter

Protocols require the marrow to be filtered prior to centrifugation. Cells bound within a clot cannot be counted but they can be delivered to the patient when mixed with graft material or injected. This is not the case when clots are filtered out prior to centrifugation. Filtering takes additional time, but more importantly, filtering reduces regenerative potential.

