

# OLYMPUS

Your Vision, Our Future



NBI IS CLINICALLY PROVEN TO DIAGNOSE  
MORE LARYNGEAL CANCER



# 18%

**Detects 18% more true-positive laryngeal cancer lesions<sup>1</sup>**

<sup>1</sup>Simo et al., European Laryngological Society: ELS recommendations for the follow-up of patients treated for laryngeal cancer. Eur Arch Otorhinolaryngol. 2014 Sep;271(9):2469–79.



# 23%

**Increases sensitivity by 23% in the identification of laryngeal cancer<sup>2</sup> while maintaining high specificity (96%)**

<sup>2</sup>Kraft et al., Value of narrow band imaging in the early diagnosis of laryngeal cancer. 2015 Wiley Periodicals, Inc. Head Neck 38: 15–20, 2016.



# 85%

**Reduces 85% of superficial positive margins<sup>3</sup>**

<sup>3</sup>Garofolo et al., Intraoperative Narrow Band Imaging Better Delineates Superficial Resection Margins During Transoral Laser Microsurgery for Early Glottic Cancer, Ann Otol Rhinol Laryngol. 2015 Apr;124(4):294–8.

Figures compared to white light endoscopy

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**OLYMPUS EUROPA SE & CO. KG**

Postbox 10 49 08, 20034 Hamburg, Germany | [www.olympus-europa.com](http://www.olympus-europa.com)

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