

Making the Case for Tumark[®] Biopsy Site Markers

A diagnostic interventional radiologist's experience using
Tumark markers for ultrasound-guided biopsy

Diagnostic interventional breast radiologist, Tchaiko Parris, M.D., Ph.D., has long used Tumark[®] biopsy site markers for ultrasound-guided core biopsy procedures. Dr. Parris finds the markers to be reliable and appreciates their unique 3D shape, visibility on imaging, and accurate deployment.



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For more information, contact
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[hologic.com/hologic-products/
breast-health-solutions/breast-
biopsy-markers](https://hologic.com/hologic-products/breast-health-solutions/breast-biopsy-markers)

Designed for Visibility

When Dr. Parris joined Bellin Health Hospital, she introduced her colleagues to the Tumark Vision marker, which she has used for many years. The biopsy site marker's distinct 3D shape is designed for confident site identification and to anchor in place upon deployment for minimal migration.

"When it deploys, the echogenic shape of the marker is so beautiful via sonography that you are able to identify it without difficulty within the targeted lesion instantly. Via mammography it is easily visible and stands out in the tissue. Under MRI the Tumark Vision marker does not create a blooming artifact that would distort the image or obscure the true margins of a small irregular mass," said Dr. Parris.

“My surgeon loves when we use Tumark markers for the axilla.”

It is Dr. Parris's experience that some clips can be difficult to locate during ultrasound after a patient undergoes neoadjuvant chemotherapy, and there is interval response to the treatment in the breast and/or axilla.

"When you image with ultrasound after a patient has received neoadjuvant chemotherapy, where there has been complete response, the Tumark Vision clip is easily identifiable.

It provides added reassurance when the patient is prepared for surgery whether via placement of an RFID localizer or wires that you are targeting the correct location and are able to convey this information to the surgeon with confidence so that clear margins are obtained," said Dr. Parris.

In addition, Dr. Parris states, "My surgeon loves when we use Tumark markers for the axilla. This is because they are easy to identify in previously enlarged and abnormal lymph nodes that have responded to treatment."



Dr. Parris's experience is echoed by others. In fact, in 85% of marker placements, physicians reported that the ultrasound visibility was good to excellent upon deployment.¹

Tumark markers are also designed for long-term visibility.¹ Dr. Parris affirmed that her experience reflects this, noting that she has found the Tumark markers have excellent long-term visibility and are able to maintain their efficacy longer than other clips she has used.

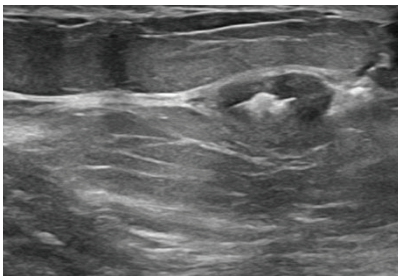


Confidence in Results

Dr. Parris has found that some biopsy needle and marker combinations can be complicated to deploy, citing clips that curl backward after deployment. This requires the radiologist to remember where to place the tip of the marker so it is deployed central to the targeted lesion.

“ I go for accuracy. Together with the Tumark and Celero, I’ve never missed my target. ”

Tumark markers are specially designed to minimize this kind of deployment issue. When pairing these markers with the Celero[®] Vacuum-Assisted Breast BiopsyDevice, Dr. Parris has found targeting is consistent, straightforward, and precise.



Tumark under Ultrasound

“That’s the beauty of the Tumark Vision marker. I know what it’s going to do. As long as my tip is central to my lesion, big or small, I know that it’s going to come out with a bright echogenicity right at the tip of the needle and that it will stay right there,” said Dr. Parris. “I go for accuracy. Together with the Tumark and Celero, I’ve never missed my target.”

The Celero biopsy device is designed to help physicians get consistent sample cores with vacuum assistance and more control with the pre-fire option that enables confirmation of aperture placement prior to tissue acquisition. Not only does it allow Dr. Parris to confidently approach lesions, but the ergonomic handle with single-handed operation also lends itself to a concise procedure.

“I usually do my procedures in 10-15 minutes for a single site – and that includes patient introductions,” said Dr. Parris.

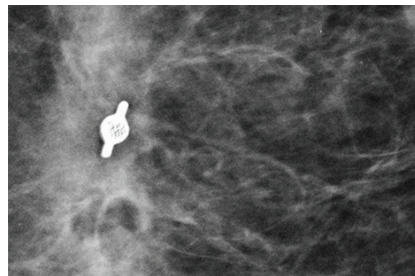
The Celero[®] breast biopsy device is the first spring-loaded core device with integrated

vacuum technology. It is designed to ensure large samples and consistent cores – something Dr. Parris has come to appreciate and rely on.



“When I take three to four cores with the Celero device, I know I’m going to get a good amount of tissue to give to my pathologist. If the results are benign, I am comfortable and confident with the results,” said Dr. Parris.

For Dr. Parris, ultrasound-guided biopsies are all about confidence, accuracy, and visibility. The Tumark marker paired with the Celero biopsy device delivers on these requirements.



Tumark under Mammography

Tumark[®]
Biopsy Site Markers

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¹Tumark[®] Marker Data Collection Study, 2017, DHM-06169, 3 clinicians at 3 hospitals for 90 marker placements, 2017.