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(54) Title: ENDOSCOPIC BIOPSY INSTRUMENT, ENDOSCOPE, AND METHOD FOR TAKING A BIOPSY SAMPLE

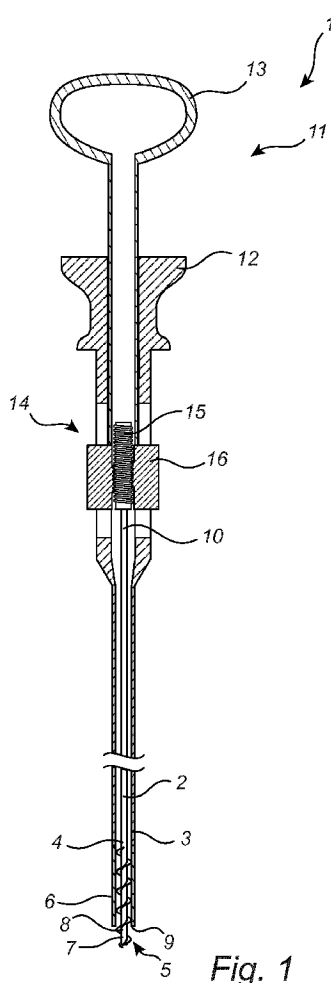


Fig. 1

(57) Abstract: An endoscopic biopsy instrument (1) is disclosed comprising a guide wire (2) arranged in a sheath (3), a drill device (5) arranged at a first end (4) of said guide wire (2), and an actuator (11) for actuating said drill device (5), said actuator being arranged at a second end (10) of said guide wire (2). The drill device (5) comprises an outer tube (6) and an inner cutting device (7). The inner cutting device (7) is slidable and rotatable inside said outer tube (6). The inner cutting device (7) has a helical cutting edge (8). An endoscope comprising such an endoscopic instrument (1) is also disclosed, as well as a method for taking a biopsy sample from a tissue of a subject.



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ENDOSCOPIC BIOPSY INSTRUMENT, ENDOSCOPE, AND METHOD FOR TAKING A BIOPSY SAMPLE

Technical Field of the Invention

The present invention relates to an endoscopic biopsy instrument, to an endoscope comprising such an endoscopic biopsy instrument, as well as
5 to a method for taking a biopsy sample from a tissue of a subject.

Background Art

When evaluating various lesions and tumours, tissue samples may be acquired using a biopsy instrument. If a suspected lesion or tumour is located
10 in or adjacent the gastrointestinal tract, an endoscopic biopsy instrument may be used. An example of an endoscopic biopsy instrument is described in US-5,865,724. This endoscopic biopsy instrument is generally comprised of a forceps arranged at a distal end of two control wires, and a handle arranged at a proximal end of the control wires, the control wires being enclosed in a
15 plastic sheath. When taking a tissue sample with this type of endoscopic biopsy instrument, the wires in their sheath are inserted in a working channel of an endoscope, and the forceps are advanced to the site in the gastrointestinal tract where the sample is to be taken. By operating the handle of the endoscopic biopsy instrument, the forceps may be manoeuvred to scoop out a
20 sample from the surface of the tissue.

For some diagnostic purposes the millimetre-sized sample thus retrievable is sufficient. However, for some types of lesions and tumours, such a small and superficial sample is inadequate for making a diagnosis. This is the case, e.g., for submucosal tumours, such as gastrointestinal stromal tumours
25 (GIST). Since these tumours are located beneath the mucosa of the stomach or intestines, the forceps of the above-mentioned type of endoscopic biopsy instrument cannot reach into the tumour and retrieve a sufficiently large sample. Therefore, in order to get a sample that makes it possible to diagnose a submucosal tumour, it is often necessary to retrieve the sample surgically.
30 Unfortunately, the fact that a patient has had surgery for diagnostic purposes increases the risk of complications, and reduces the survival rate, even if a malignant tumour is removed during subsequent therapeutic surgery. Thus, a need for an improved endoscopic biopsy instrument, which makes it possible

to take larger samples and/or samples at a larger depth, e.g., beneath the mucosa of the gastrointestinal tract, remains.

Summary of the Invention

5 It is an object of the invention to provide an endoscopic biopsy instrument, which overcomes the problems described above.

It is also an object of the invention to provide an endoscope which overcomes these problems.

A further object of the invention is to provide a method for taking a biopsy sample from a tissue of a subject, which overcomes the problems described above.

According to a first aspect of the invention, these and other objects are achieved, in full or at least in part, by an endoscopic biopsy instrument comprising:

15 a guide wire arranged in a sheath,
a drill device arranged at a first end of said guide wire, and
an actuator for actuating said drill device, said actuator being arranged at a second end of said guide wire,

wherein said drill device comprises an outer tube and an inner cutting device, said inner cutting device being slidable and rotatable inside said outer tube, said inner cutting device having a helical cutting edge. With such an endoscopic biopsy instrument, it is possible to take a biopsy sample at a greater depth as compared to prior art instruments. Further, a larger sample may be taken. Especially for investigating submucosal tumours, it is important to be able to take the sample at a greater depth, since otherwise it may not be possible to reach the tumour, through the overlying tissue. For other types of tumours, it is useful to get a larger sample, since this may provide more diagnostic material.

The sheath may have a diameter of 1-5 mm in order to fit in a working channel of an endoscope. The diameter of the drill device may be adapted to the diameter of the sheath, and may be 0.5-4 mm, generally 1-2 mm.

In an embodiment, the outer tube is advancable over the inner cutting device on an outside of said inner cutting device. Thereby, the outer tube may

be advanced over the inner cutting to enclose the sample cut out from the tissue.

The inner cutting device of the drill device may comprise an inner core, said helical cutting edge being formed on a helical flange surrounding said inner core. In this manner, a rigid inner cutting device may be achieved, which may penetrate even tough tissues, such as the mucosa of the gastrointestinal tract.

The inner cutting device may be made of metal. Metal is readily machinable to the desired helical shape and may readily be sharpened to present a cutting edge. Metal is particularly advantageous if the endoscopic biopsy instrument is used in an endoscope comprising an ultrasound probe, since metal is visible in an ultrasonogram. Thus, the operator may, in an image acquired by the ultrasound probe, for instance see how deep into the tissue the inner cutting device has penetrated.

In an embodiment, the outer tube of the drill device has a cutting front edge. In this manner, the sample may even more securely be cut out from the tissue, should it not be completely cut off by the helical cutting edge of the inner cutting device.

At the second end, the guide wire may comprise an outside thread, and the actuator may comprise a rotatable portion having an inside thread, the inside thread being engagable with the outside thread of the guide wire for advancing the guide wire inside said sheath. In this manner, an easily manoeuvrable guide wire advancing device may be achieved. In one embodiment, the operator may advance the guide wire by simply rotating the rotatable portion between his or her thumb and index finger.

Alternatively, at the second end, the guide wire may comprise a toothed portion, and the actuator may comprise a toothed gear, the toothed gear being engagable with the toothed portion of the guide wire for advancing the guide wire inside the sheath. This is another way of achieving an easily manoeuvrable guide wire advancing device. In one embodiment, the operator may advance the guide wire by simply rotating the toothed gear with his or her index finger.

The actuator may comprise a plunger arranged to advance said outer tube of said drill device on an outside of said inner cutting device. In this manner, an easily manoeuvrable outer tube advancing device may be achieved.

- 5 The actuator may comprise a second rotatable portion arranged to advance said outer tube of said drill device on an outside of said inner cutting device. This is another way of obtaining an easily manoeuvrable outer tube advancing device.

 According to a second aspect of the invention, these and other objects
10 are achieved, in full or at least in part, by an endoscope comprising:

- an endoscopic insertion tube,
- an imaging device arranged in said endoscopic insertion tube,
- an endoscopic biopsy instrument of the invention arranged in said endoscopic insertion tube. With such an endoscope, the same advantages may
15 be achieved as with the endoscopic biopsy instrument according to the first aspect of the invention. In the endoscope, the endoscopic biopsy instrument may be embodied in the same ways as the endoscopic biopsy instrument according to the first aspect of the invention, with the same advantages.

 According to an embodiment, the imaging device is an ultrasound
20 probe. Ultrasonic imaging is particularly advantageous for evaluating submucous tumours.

 According to a third aspect of the invention, these and other objects are achieved, in full or at least in part, by a method for taking a biopsy sample from a tissue of a subject, comprising:

- 25 providing an endoscopic biopsy instrument comprising a guide wire arranged in a sheath, a drill device arranged at a first end of said guide wire, and an actuator for actuating said drill device, said actuator being arranged at a second end of said guide wire, wherein said drill device comprises an outer tube and an inner cutting device, said inner cutting device being slidable and
30 rotatable inside said outer tube, said inner cutting device having a helical cutting edge,

 inserting said first end of said guide wire into a body cavity of said subject,

advancing said guide wire until said drill device is applied to a surface of the tissue from which the biopsy sample is to be taken,

advancing said guide wire inside said sheath such that said inner cutting device of said drill device is rotatably bored into said tissue, such that the
5 biopsy sample is cut out from said tissue,

enclosing said biopsy sample in said outer tube by a translational movement of said outer tube in relation to said inner cutting device, and

retrieving said biopsy sample by withdrawing said first end of said guide wire from said body cavity. With such a method, it is possible to take a
10 biopsy sample from a greater depth as compared to prior art methods. It is also possible to take a larger sample.

The body cavity may be part of the gastrointestinal tract of the subject.

In a variant of the method, the outer tube is advanced over the inner cutting device on an outside of the inner cutting device. In this way, the sam-
15 ple cut out by the inner cutting device is enclosed by the outer tube.

The endoscopic biopsy instrument may be inserted in an endoscopic insertion tube of an endoscope, said endoscope comprising an imaging device arranged in said endoscopic insertion tube. In this way, the endoscopic biopsy instrument may be securely guided to the site where the biopsy sam-
20 ple is to be taken.

Generally, the method of the invention may be varied in accordance with the different embodiments of the first aspect of the invention, with the same accompanying advantages.

Other objectives, features and advantages of the present invention will
25 appear from the following detailed disclosure, from the attached claims, as well as from the drawings. It is noted that the invention relates to all possible combinations of features.

Generally, all terms used in the claims are to be interpreted according to their ordinary meaning in the technical field, unless explicitly defined otherwise herein. All references to "a/an/the [element, device, component, means, step, etc.]" are to be interpreted openly as referring to at least one instance of said element, device, component, means, step, etc., unless explicitly stated otherwise. The steps of any method disclosed herein do not have to be per-
30 formed in the exact order disclosed, unless explicitly stated.

As used herein, the term “comprising” and variations of that term are not intended to exclude other additives, components, integers or steps.

Brief Description of the Drawings

5 The invention will be described in more detail with reference to the appended schematic drawings, which show an example of a presently preferred embodiment of the invention.

 Fig. 1 is a cross sectional view of an endoscopic biopsy instrument according to an embodiment.

10 Fig. 2 is a detail view of an actuator of the endoscopic biopsy instrument of Fig. 1.

 Fig. 3 is a cross sectional view of an endoscopic biopsy instrument according to a second embodiment.

 Fig. 4 is a detail view of an inner cutting device of the endoscopic biopsy instrument of Fig. 1 or Fig. 3.

15 Fig. 5 is a cross sectional view showing use of an endoscope according to an embodiment.

 Fig. 6 is a detail view of an actuator of an endoscopic biopsy instrument according to a third embodiment in a first position.

20 Fig. 7 is a detail view of the actuator of Fig. 6 in a second position.

Detailed Description of Preferred Embodiments of the Invention

 In Fig. 1, an endoscopic biopsy instrument 1 is shown. The endoscopic biopsy instrument 1 comprises a guide wire 2 arranged in a sheath 3. At a first, distal end 4 of the guide wire 2, a drill device 5 is arranged. The drill device 5 comprises an outer tube 6 and an inner cutting device 7. The inner cutting device 7 is slidable and rotatable inside the outer tube 6, and has a helical cutting edge 8. The outer tube 6 is cylindrical and has a straight edge 9.

 At a second, proximal end 10 of the guide wire 2, an actuator 11 comprising a handle 12 and a plunger 13 is arranged. The actuator 11 further comprises a guide wire advancing device 14. The guide wire advancing device comprises a threaded portion 15 at the proximal end of the guide wire 2 having an outside thread, and a rotatable portion 16 or nut having an inside thread. The threaded portion 15 of the guide wire 2 is engagable with the nut

16, such that rotation of the nut 16 causes the guide wire to rotate and move in its longitudinal direction, thus moving along the inside of the sheath 3.

As may be seen more clearly in Fig. 4, the inner cutting device 7 has an inner core 17 surrounded by a helical flange 18. The helical cutting edge 8 of the inner cutting device 7 is formed on the helical flange 18. The helical flange 18 forms more than one complete winding or turn around the inner core 17. At the distal end 19 of the inner cutting device 7 a hook or anchoring portion 20 is formed on the helical flange 18.

With reference to Fig. 2, the actuator 11 further comprises a housing 21 in which the wire, via the nut 16, is retained at retaining points 22, and a sheath advancing device 23 in the form of bars 24 attached to the plunger 13. Abutment portions 25 of the bars abut a cut-out edge of the sheath 3, such that when the plunger 13 is depressed, the bars 23, via the abutment portions 24, push the sheath 3 outwardly from the housing 21. Thereby, the sheath 3 advances the outer tube 6 of the drill device 5 over the inner cutting device 7 on an outside of the inner cutting device 5.

In Fig. 3, an endoscopic biopsy instrument 101 according to a second embodiment is shown. Except for the actuator 111, the endoscopic biopsy instrument 101 in Fig. 3 has the same structure as the endoscopic biopsy instrument in Fig. 1. Like parts are in the embodiment in Fig. 3 marked with the same reference numerals as used in Fig. 1, but with the addition of 100 on each reference numeral.

Thus, the endoscopic biopsy instrument 101 comprises a guide wire 102 arranged in a sheath 103. At a distal end 104 of the guide wire 102 a drill device 105 of the same construction as the drill device 5 shown in Fig. 1 is arranged. The inner cutting device 107 is of the same construction as that shown in detail in Fig. 4. At the proximal end 110 of the guide wire 102, an actuator 111 is arranged. The actuator 111 comprises a handle 112, a plunger 113, and a guide wire advancing device 114. Different from the embodiment shown in Figs. 1 and 2, the guide wire advancing device 114 comprises a teathed portion 115 at the proximal end of the guide wire 102, and a toothed gear 116, which is engagable with the teathed portion 115 of the guide wire 102. By rotating the toothed gear 116, the guide wire 102 may be

rotated and advanced in its longitudinal direction, thus moving along the inside of the sheath 103.

In Fig. 6, an endoscopic biopsy instrument 201 according to a third embodiment is shown. Except for the actuator 211, the endoscopic biopsy instrument 201 in Fig. 6 has the same structure as the endoscopic biopsy instrument in Fig. 1. Like parts are in the embodiment in Fig. 6 marked with the same reference numerals as used in Fig. 1, but with the addition of 200 on each reference numeral.

The actuator 211 comprises a guide wire advancing device 214 which similarly to the embodiment shown in Fig. 1 comprises a threaded portion 215 at the proximal end of the guide wire having an outside thread, and a first rotatable portion 216 or nut having an inside thread. The threaded portion 215 of the guide wire is engagable with the wheel or nut 216, such that rotation of the nut 216 causes the guide wire to rotate and move in its longitudinal direction, thus moving along the inside of the sheath 203. The outer tube advancing device 223 differs from the one in the first embodiment in that it comprises a second rotatable portion in the form of a second wheel or nut 226. Rotation of the second nut 226 causes a sheath advancing portion 228 connected to two parallel guide bars 227 to travel in a distal direction from a position shown in Fig. 6 to a position shown in Fig. 7, thereby advancing the sheath 203. The sheath 203 in turn advances the outer tube 206 of the drill device 205 over the inner cutting device on an outside of the inner cutting device. In the embodiment shown, the outer tube advancing device 223 additionally comprises an end block 229 attached to the proximal end of the guide bars 227. As an alternative to rotating the second nut 226, the end block 229 may be depressed, thereby advancing the sheath advancing portion 228, which in turn advances the sheath 203, and thereby the outer tube 206.

In all of the shown embodiments, the sheath is made of a medical grade plastic material, whereas the outer tube and inner cutting device of the drill device are made of medical grade metal.

An endoscopic biopsy instrument according to either embodiment may be inserted in an endoscope 30 and used in the way schematically illustrated in Fig. 5. An example of an endoscope with which the endoscopic biopsy in-

strument of the invention may be used may be seen in EP-1 849 414. In the following description of Fig. 5, the reference numerals used for the embodiment shown in Fig. 6 are used, but the endoscopic biopsy instrument according to the embodiment shown in Fig. 1 or Fig. 3 may just as well be used in
5 the same way.

The endoscopic biopsy instrument 201 is inserted in a working channel of an endoscopic insertion tube 31 of the endoscope 30. A control unit 34 for the endoscope 30 is arranged at a proximal end 35 of the endoscopic insertion tube 31. At a distal end 36 of the insertion tube 31, an imaging device in
10 the form of an ultrasound probe 37 or camera is arranged. Images captured by the ultrasound probe 37 or camera may be displayed on a display 38.

In the illustration in Fig. 5, the endoscope is a gastroscope 30, which is inserted through the mouth of a patient. The insertion tube 31 is advanced through the oesophagus, down into the stomach, until the distal end 36 of the
15 insertion tube 31 reaches the site which is to be investigated. Using the images acquired by the ultrasound probe 37 or camera, the operator may see the investigated site on the display 38. Since the inner cutting device 207 is made of metal, it is visible in an ultrasonogram. During insertion of the endoscopic insertion tube 31 to the site to be investigated, the inner cutting device
20 207 is enclosed in the outer tube 206, such that the inner cutting device 207 does not injure the mucosa along the passage through the mouth, oesophagus and stomach, and such that the sample taken is not soiled by tissue accidentally caught by the inner cutting device 207 before the site to be investigated is reached. When the desired location is reached, the distal end 19 of
25 the inner cutting device 207 of the endoscopic biopsy instrument 201 is applied to the surface of the mucosa, and the hook 20 is anchored in the mucosa. By rotating the first nut 216, the operator advances the inner cutting device 207, boring it into and through the mucosa, and into the lesion or tumour to be evaluated. The inner cutting device 207 may be rotated a plurality
30 of turns, in order to get a large sample from the quite tough mucous tissue. With a sufficiently long inner cutting device 207, the inner cutting device 207 may also be bored through the lesion or tumour, thereby also including some overlying tissue in the sample. In this manner, a layered sample may be ob-

tained, thereby enabling orientation of the retrieved biopsy sample. Once the inner cutting device 207 has been bored into the lesion or tumour to a depth which the operator, guided by the images acquired by the ultrasound probe 37, considers is sufficient, the operator rotates the second nut 226, thereby
5 advancing the outer tube 206 of the drill device 205 on the outside of the inner cutting device 207. In this manner, the sample cut out and caught on the flange 18 of the inner cutting device 207 is enclosed by the outer tube 206. Subsequently, the endoscopic biopsy instrument is withdrawn from the endoscope. Once the drill device 205 is outside the body of the patient, the outer
10 tube 206 of the drill device 205 may be retracted, exposing the sample on the flange 18 of the inner cutting device 207. The sample is removed from the inner cutting device 207 and prepared for microscopic examination. Generally, more than one sample will be taken by reinserting the endoscopic biopsy instrument 201 in the endoscope 30, boring the inner cutting device 207 into
15 the tissue, enclosing the cut-out sample in the outer tube 206, and withdrawing the endoscopic biopsy instrument 201 from the endoscope 30. This procedure may be repeated a number of times, until a desired number of biopsy samples have been obtained. When the desired number of samples has been retrieved, the endoscope may be withdrawn from the stomach, out through
20 the oesophagus and mouth.

The skilled person realises that a number of modifications of the embodiments described herein are possible without departing from the scope of the invention, which is defined in the appended claims.

For instance, although the endoscope shown in Fig. 5 is a gastro-
25 scope, the invention is equally applicable to other endoscopes, such as colonoscopes, and bronchoscopes.

The imaging device may be a camera. For investigating many types of tumours, a camera will be the first choice of imaging device. However, for investigating submucous tumours, the use of an ultrasound probe has been
30 shown to give better results (See, e.g., Thorlacius et al. Endoskopiskt ultraljud inom gastroenterologin. Läkartidningen. 17 November 2009, No. 47.). Still, even when investigating submucosal tumours, the investigation may be started using a fibre-optic endoscope with a camera, and if the results are not

satisfactory, the operator may switch to an endoscope with an ultrasound probe.

The edge of the outer tube is straight and, in the embodiments described above, not sharp. However, the edge may be made sharp, such that
5 the outer tube has a cutting edge.

The material of the sheath is chosen such that the sheath may easily be inserted in the working channel of the endoscope in which it is to be supported, and such that the guide wire may be securely enclosed, yet freely movable inside the sheath. Examples of suitable materials are medical grade
10 plastics materials, e.g., PTFE, FEP or polyolefin.

In the embodiments described above, the outer tube of the drill device is made of metal, e.g. medical grade steel. However, other materials, such as plastics may be used.

The inner cutting device is preferably made of metal, such as medical
15 grade steel, in order to make it visible in an ultrasonogram. However, if the endoscope in which the endoscopic biopsy instrument is supported, uses another type of imaging device, such as a camera, other materials may be used.

The length of the endoscopic biopsy instrument, or rather the length of the guide wire, may be chosen depending on where in the body of the patient
20 the biopsy sample is to be taken. For instance, for use in a gastroscope, the length of the guide wire may be approximately 160 cm.

Similarly, the length of the inner cutting device may be chosen depending on where the biopsy sample is to be taken. As non-limiting examples, a length of 5-7 mm may be sufficient for taking a superficial biopsy, whereas a
25 biopsy of a submucosal tumour, such as GIST, may require a length of 10-12 mm, or even 15 mm.

In the embodiments described above, the inner cutting device has an inner core. The inner cutting device may also be constructed without an inner core, as long as the inner cutting device has a helical cutting edge and is stiff
30 enough to penetrate into the tissue at the site of investigation.

In the embodiment shown in Fig. 6, there are two ways of manoeuvring the outer tube advancing device 223, i.e. by rotation of the second nut 226 or by depression of the end block 229. It may in many instances be advanta-

geous to use rotation for advancing the outer tube 206, because experiments show that if depression of the end block 229 is used, the operator may have a tendency of slightly pulling back the instrument while depressing the end block 229. This may lead to shearing of the biopsy. Therefore, the instrument
5 may very well be constructed without the end block 229. In such case, the guide bars 227 need not extend all the way through the actuator 211, but could be replaced by shorter guide bars or other guide elements guiding the sheath advancing portion 228. However, the end block 229 and the longer guide bars 227 may provide comfortable stability to the actuator 211.

10 In the method described above, when the sample has been cut out from the tissue, the outer tube is advanced on the inner cutting device, such that the sample is enclosed in the outer tube. Instead, the inner cutting device may be retracted into the outer tube. In other words, the inner cutting device and the outer tube should be moved in translation relative to each other in
15 order to enclose the cut-out sample in the outer tube.

The endoscopic biopsy instrument is preferably a disposable instrument, for single use. However, it may be constructed for multiple use, as long as the materials chosen are suitable for the necessary sterilization, such as autoclaving.

20 The endoscopic biopsy instrument, the endoscope, and the method described above are particularly suitable for taking biopsy samples from sub-mucous tumours. However, the invention may be used to advantage also for taking biopsy samples from other tumours and lesions.

CLAIMS

1. An endoscopic biopsy instrument comprising:
a guide wire (2; 102) arranged in a sheath (3; 103; 203),
5 a drill device (5; 105; 205) arranged at a first end (4; 104) of said guide wire (2; 102),
and an actuator (11; 111; 211) for actuating said drill device, said actuator being arranged at a second end (10; 110; 210) of said guide wire (2; 102),
10 wherein said drill device (5; 105; 205) comprises an outer tube (6; 106; 206) and an inner cutting device (7; 107; 207), said inner cutting device (7; 107; 207) being slidable and rotatable inside said outer tube (6; 106; 206), said inner cutting device (7; 107; 207) having a helical cutting edge (8; 108).
- 15 2. An endoscopic biopsy instrument as claimed in claim 1, wherein said outer tube (6; 106; 206) is advancable over said inner cutting device (7; 107; 207) on an outside of said inner cutting device (7; 107; 207).
- 20 3. An endoscopic biopsy instrument as claimed in claim 1 or 2, wherein said inner cutting device (7; 107; 207) of said drill device (5; 105; 205) comprises an inner core (17), said helical cutting edge being formed on a helical flange (18) surrounding said inner core (17).
- 25 4. An endoscopic biopsy instrument as claimed in any one of the preceding claims, wherein said inner cutting device (7; 107; 207) is made of metal.
5. An endoscopic biopsy instrument as claimed in any one of the preceding claims, wherein said outer tube (6; 106; 206) of said drill device (5; 105; 206) has a cutting front edge (9; 109).
- 30 6. An endoscopic biopsy instrument as claimed in any one of the preceding claims, wherein said guide wire (2) at said second end (10) comprises an outside thread (15), and wherein said actuator comprises a first rotatable portion

(16; 216) having an inside thread, said inside thread being engagable with said outside thread (15; 215) of said guide wire (2) for advancing said guide wire (2) inside said sheath (3; 203).

5 7. An endoscopic biopsy instrument as claimed in any one of claims 1-5, wherein said guide wire (102) at said second end (110) comprises a toothed portion (115), and wherein said actuator (111) comprises a toothed gear (116), said toothed gear (116) being engagable with said toothed portion (115) of said guide wire (102) for advancing said guide wire (102) inside said
10 sheath (103).

8. An endoscopic biopsy instrument as claimed in any one of the preceding claims, wherein said actuator (11; 111) comprises a plunger (13; 113) arranged to advance said outer tube of said drill device on an outside of said
15 inner cutting device.

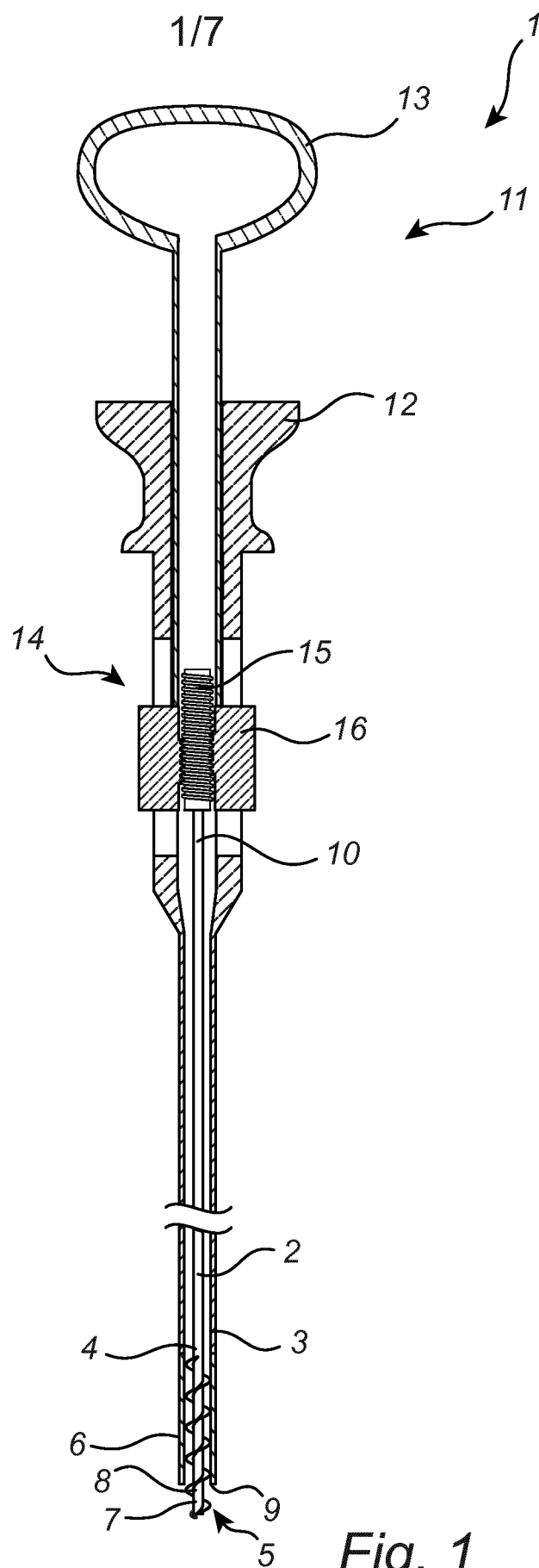
9. An endoscopic biopsy instrument as claimed in any one of claims 1-7, wherein said actuator (211) comprises a second rotatable portion (216) arranged to advance said outer tube of said drill device on an outside of said
20 inner cutting device.

10. An endoscope comprising:
an endoscopic insertion tube (31),
an imaging device (37) arranged in said endoscopic insertion tube (31),
25 an endoscopic biopsy instrument (1; 101; 201) as claimed in any one of claims 1-9 arranged in said endoscopic insertion tube (31).

11. An endoscope as claimed in claim 10 wherein said imaging device is an ultrasound probe (37).

12. A method for taking a biopsy sample from a tissue of a subject, comprising:

- providing an endoscopic biopsy instrument (1; 101; 201) comprising a guide wire (2; 102) arranged in a sheath (3; 103; 203), a drill device (5; 105; 205) arranged at a first end (4; 104) of said guide wire (2; 102), and an actuator (11; 111; 211) for actuating said drill device (5; 105; 205), said actuator (11; 111; 211) being arranged at a second end (10; 110) of said guide wire (2; 102), wherein said drill device (5; 105; 205) comprises an outer tube (6; 106; 206) and an inner cutting device (7; 107; 207), said inner cutting device (7; 107; 207) being slidable and rotatable inside said outer tube (6; 106; 206), said inner cutting device (6; 106; 206) having a helical cutting edge (8; 108), inserting said first end (4; 104) of said guide wire (2; 102) into a body cavity of said subject,
- advancing said guide wire (2; 102) until said drill device (5; 105; 205) is applied to a surface of the tissue from which the biopsy sample is to be taken, advancing said guide wire (2; 102) inside said sheath (3; 103; 203) such that said inner cutting device (7; 107; 207) of said drill device (5; 105; 205) is rotatably bored into said tissue, such that the biopsy sample is cut out from said tissue,
- enclosing said biopsy sample in said outer tube (6; 106; 206) by a translational movement of said outer tube (6; 106; 206) in relation to said inner cutting device, and
- retrieving said biopsy sample by withdrawing said first end (4; 104) of said guide wire (2; 102) from said body cavity.



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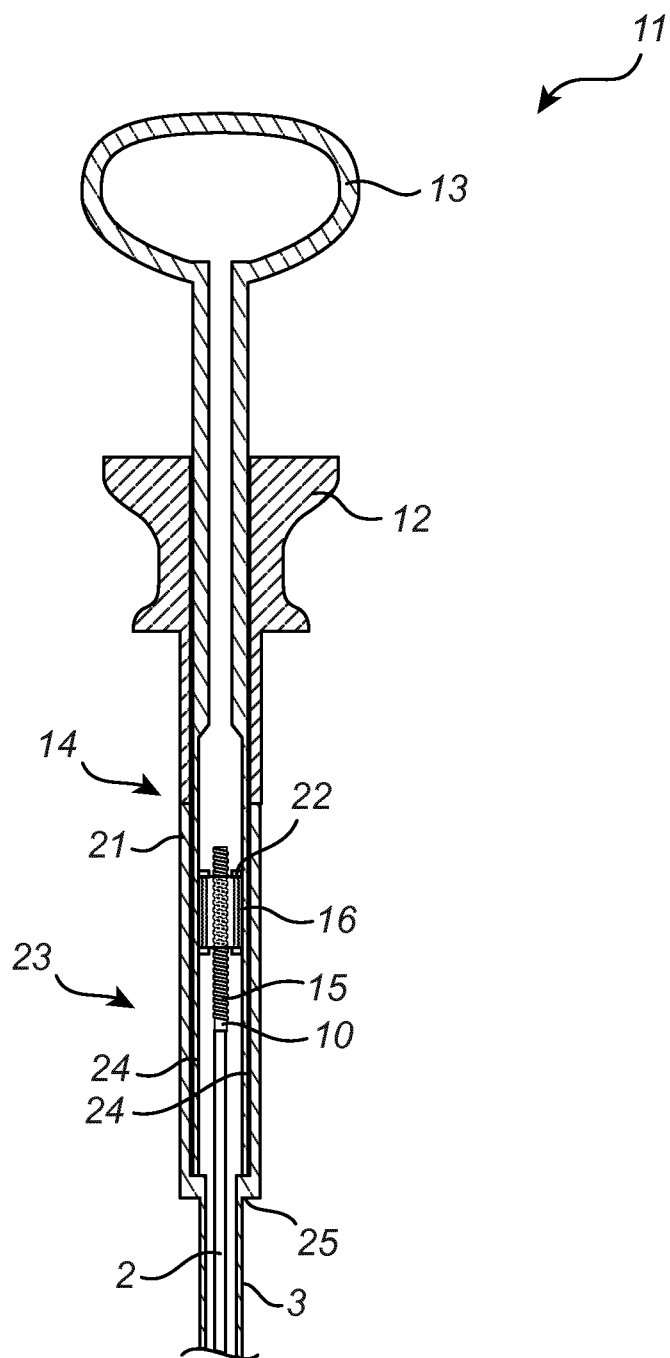


Fig. 2

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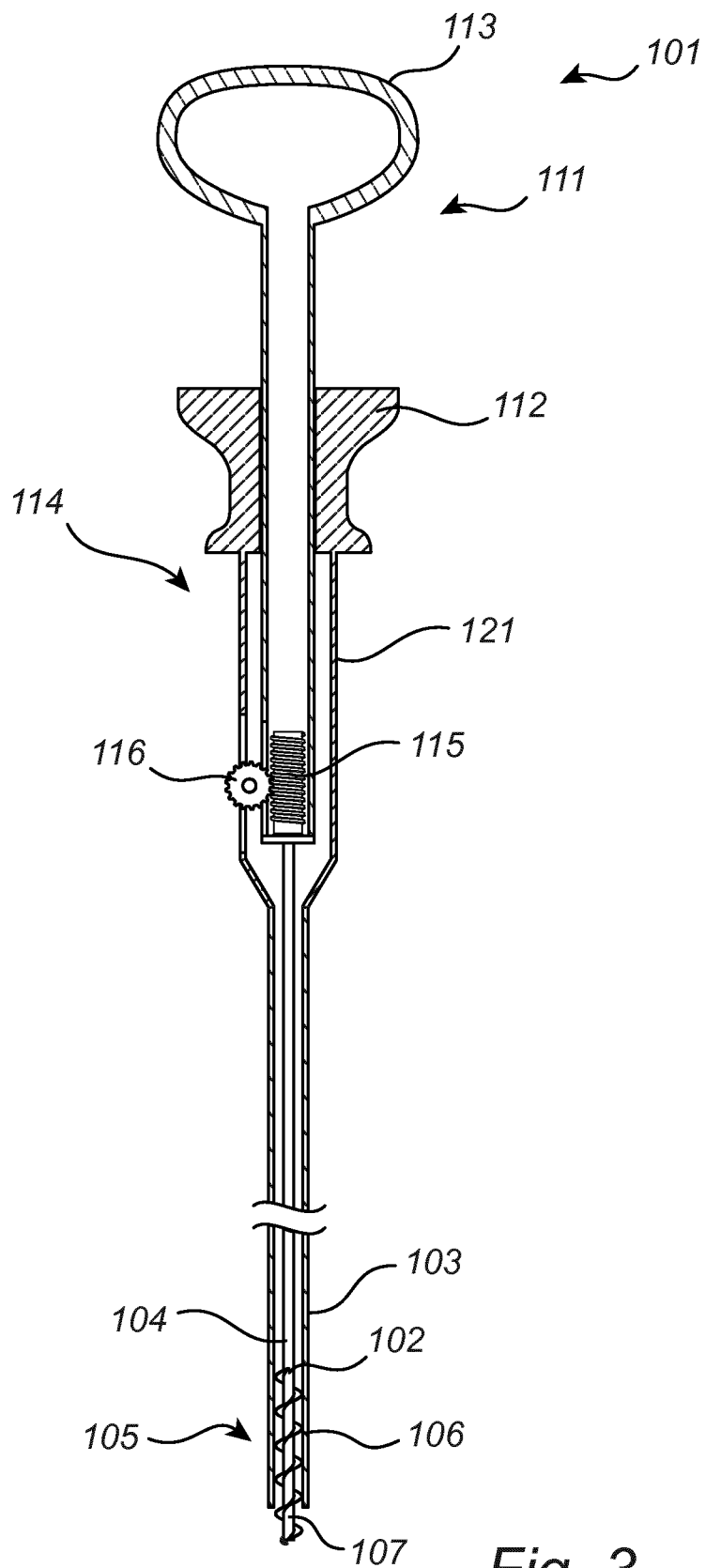


Fig. 3

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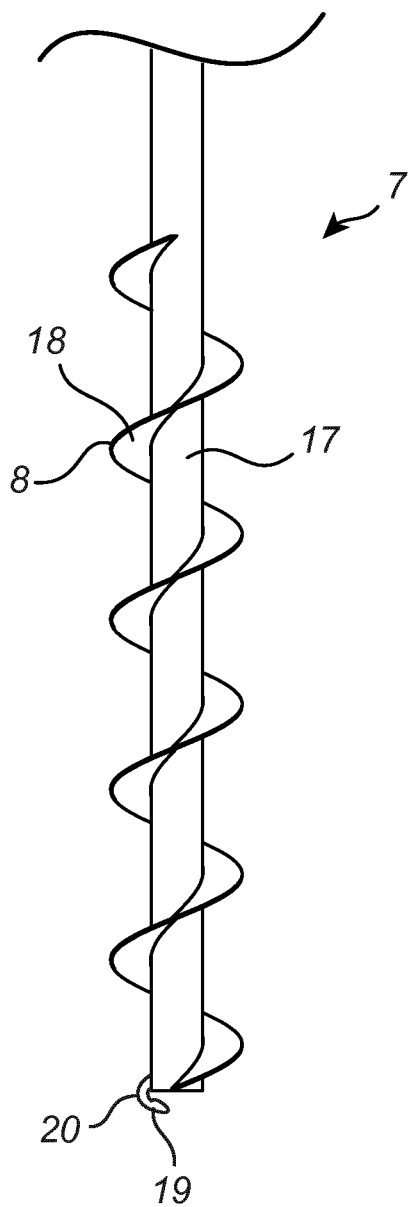


Fig. 4

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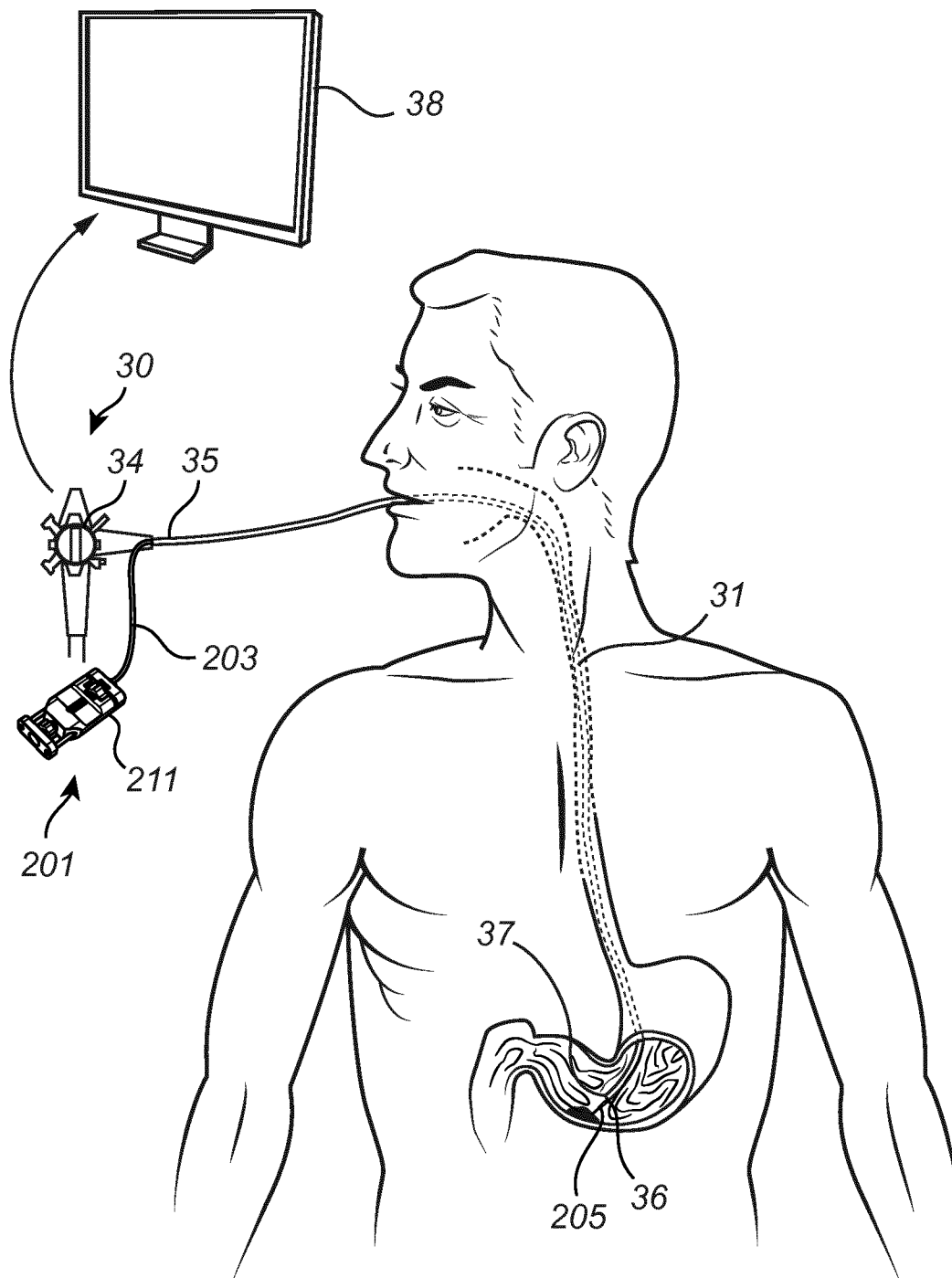
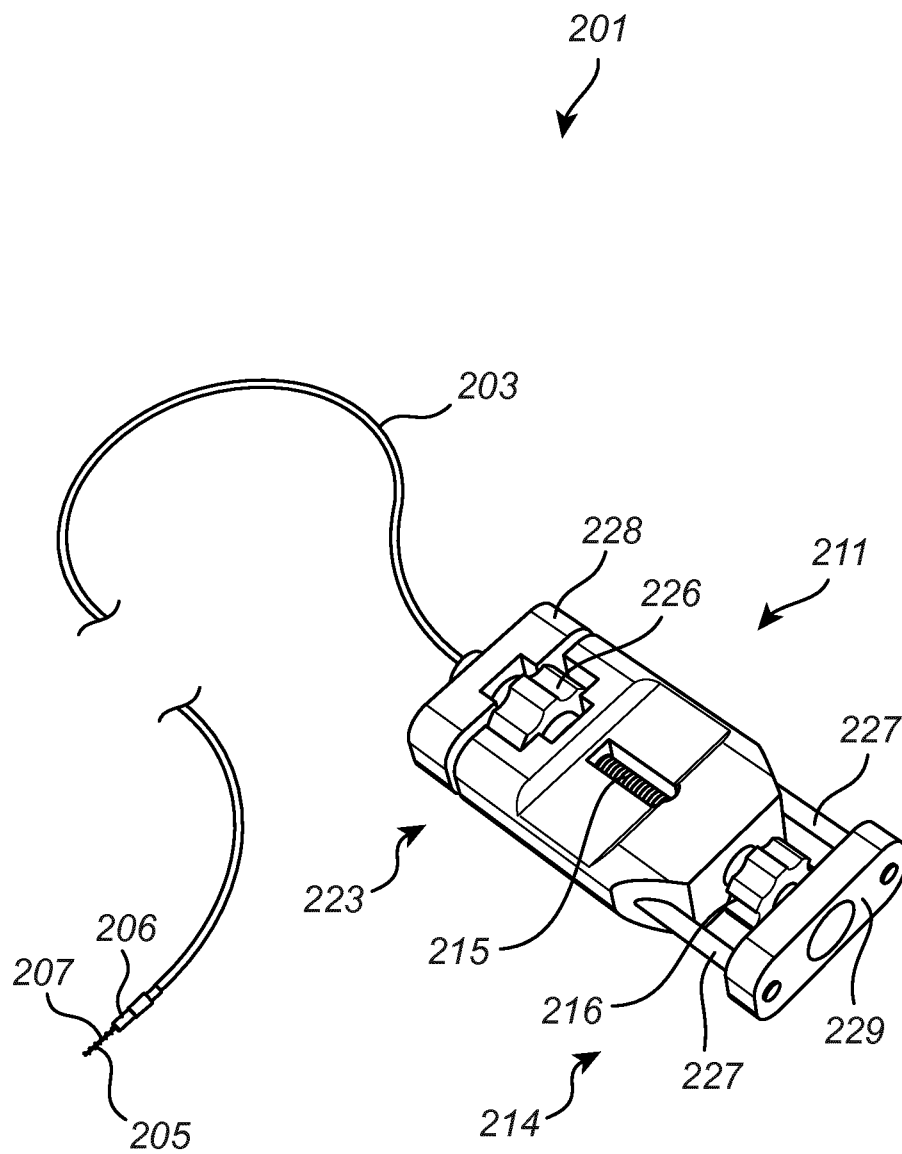


Fig. 5

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*Fig. 6*

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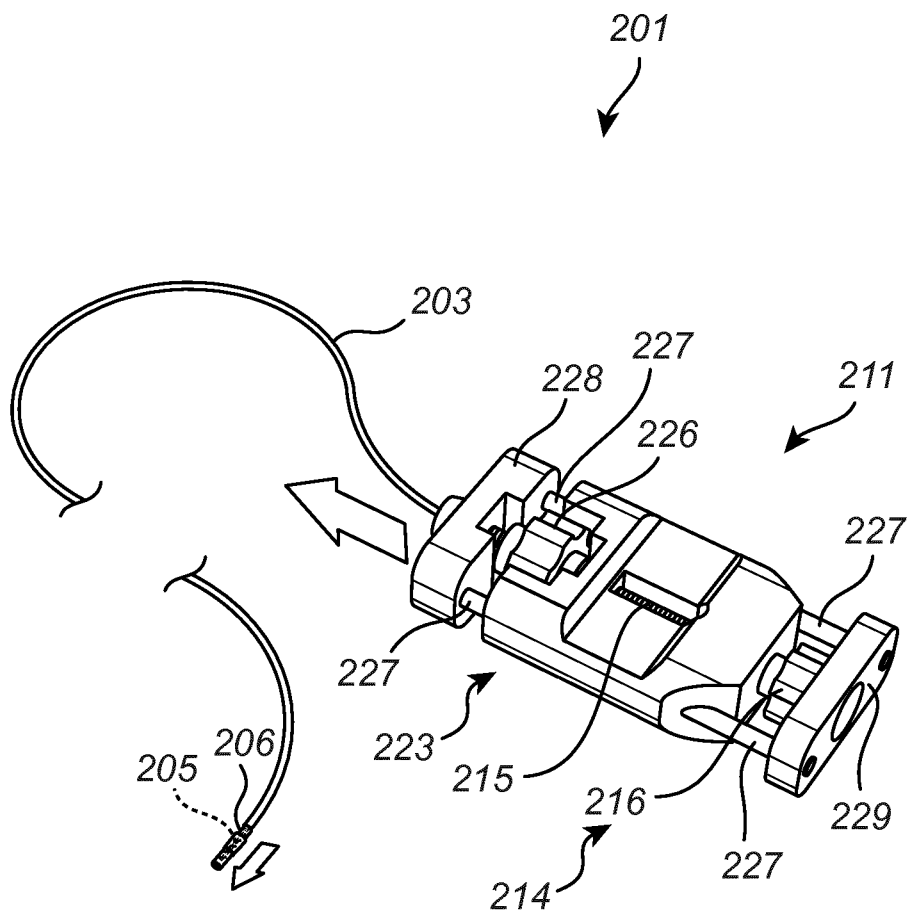


Fig. 7

INTERNATIONAL SEARCH REPORT

International application No.
PCT/EP2013/066275

Box No. II Observations where certain claims were found unsearchable (Continuation of item 2 of first sheet)

This international search report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☒ Claims Nos.: 12
because they relate to subject matter not required to be searched by this Authority, namely:
Claim 12 relates to a method for treatment of the human or animal body by surgery according to Rule 39.1(iv) PCT.
2. ☐ Claims Nos.:
because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:
3. ☐ Claims Nos.:
because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).

Box No. III Observations where unity of invention is lacking (Continuation of item 3 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

1. ☐ As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.
2. ☐ As all searchable claims could be searched without effort justifying an additional fees, this Authority did not invite payment of additional fees.
3. ☐ As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:
4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

- ☐ The additional search fees were accompanied by the applicant's protest and, where applicable, the payment of a protest fee.
- ☐ The additional search fees were accompanied by the applicant's protest but the applicable protest fee was not paid within the time limit specified in the invitation.
- ☐ No protest accompanied the payment of additional search fees.

INTERNATIONAL SEARCH REPORT

International application No

PCT/EP2013/066275

A. CLASSIFICATION OF SUBJECT MATTER
 INV. A61B10/04
 ADD.

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)
 A61B

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)

EPO-Internal, WPI Data

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	US 2009/118641 A1 (VAN DAM JACQUES [US] ET AL) 7 May 2009 (2009-05-07) paragraph [0051] - paragraph [0052] paragraph [0058] paragraph [0067] - paragraph [0068] paragraph [0074]; figures 1-16d -----	1-6,8-11
X	WO 2011/104692 A2 (ROBIN MEDICAL INC [US]; NEVO EREZ [US]) 1 September 2011 (2011-09-01) paragraph [0011]; figures 1-6 paragraph [0023] paragraph [0032] - paragraph [0033] -----	1,4,7
X	US 2012/197157 A1 (RYAN SHAWN [US] ET AL) 2 August 2012 (2012-08-02) paragraph [0015] - paragraph [0025]; figures 1-4 -----	1,4,5, 10,11



Further documents are listed in the continuation of Box C.



See patent family annex.

* Special categories of cited documents :

"A" document defining the general state of the art which is not considered to be of particular relevance

"E" earlier application or patent but published on or after the international filing date

"L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)

"O" document referring to an oral disclosure, use, exhibition or other means

"P" document published prior to the international filing date but later than the priority date claimed

"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"&" document member of the same patent family

Date of the actual completion of the international search

16 September 2013

Date of mailing of the international search report

25/09/2013

Name and mailing address of the ISA/

European Patent Office, P.B. 5818 Patentlaan 2
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Authorized officer

Jansson Godoy, Nina

INTERNATIONAL SEARCH REPORT

Information on patent family members

International application No

PCT/EP2013/066275

Patent document cited in search report	Publication date	Patent family member(s)	Publication date
US 2009118641 A1	07-05-2009	US 2009118641 A1	07-05-2009
		WO 2009058436 A1	07-05-2009

WO 2011104692 A2	01-09-2011	US 2012322070 A1	20-12-2012
		WO 2011104692 A2	01-09-2011

US 2012197157 A1	02-08-2012	US 2012197157 A1	02-08-2012
		WO 2012106293 A1	09-08-2012

专利名称(译)	内窥镜活检器械，内窥镜和用于取活检样品的方法		
公开(公告)号	EP2879588A1	公开(公告)日	2015-06-10
申请号	EP2013745068	申请日	2013-08-02
[标]申请(专利权)人(译)	WALTHER CHARLES		
申请(专利权)人(译)	WALTHER , CHARLES		
当前申请(专利权)人(译)	WALTHER , CHARLES		
[标]发明人	WALTHER CHARLES		
发明人	WALTHER, CHARLES		
IPC分类号	A61B10/04		
CPC分类号	A61B10/0233 A61B10/04 A61B2010/0208 A61B1/005 A61B1/018 A61B1/2736 A61B8/12 A61B8/445 A61B17/32002 A61B2017/0034 A61B2017/00862 A61M25/09 A61M2025/09183		
优先权	1250909 2012-08-03 SE		
其他公开文献	EP2879588B1		
外部链接	Espacenet		

摘要(译)

公开了一种内窥镜活组织检查器械（1），包括布置在护套（3）中的导丝（2），布置在所述导丝（2）的第一端（4）处的钻孔装置（5），以及致动器（11）用于致动所述钻孔装置（5），所述致动器设置在所述导丝（2）的第二端（10）。钻孔装置（5）包括外管（6）和内切割装置（7）。内切割装置（7）可在所述外管（6）内滑动和旋转。内切割装置（7）具有螺旋切割边缘（8）。还公开了一种包括这种内窥镜器械（1）的内窥镜，以及一种用于从受试者的组织中取出活组织检查样品的方法。