Magtrace Press Release Template

(Hospital Name) is Among First in the Region to Adopt
New Innovative Breast Cancer Technology

Magtrace®, a non-radioactive dual tracer, helps surgeons to simplify treatment and improve the patient experience during a breast mastectomy.

**City, State (Date):** Breast cancer patients in (region) now have access to a new option when preparing for breast cancer surgery. Magtrace®, offered at (Hospital Name), provides a simple, safe and more comfortable alternative to the traditional radioactive and blue-dye dual tracer technique used during breast cancer procedures.

Breast cancer is the most common form of cancer in women, with 2.3 million new cases of breast cancer diagnosed globally per year according to the American Cancer Society. One common procedure that occurs during a patient’s breast cancer care pathway is a sentinel lymph node biopsy (SLNB), used to help determine if the cancer has spread from the primary tumor.

Unlike traditional SLNB techniques, Magtrace® enables a more comfortable injection for the patient and offers a wide injection window, ranging from weeks ahead of surgery up to just minutes prior to the procedure in the OR. This improves scheduling flexibility for the patient and reduces long wait times, improving the overall patient experience. The tracer is optimally sized; both small enough to move rapidly through the breast, yet large enough to be filtered by the first draining or ‘sentinel’ lymph nodes, most likely to carry cancer. The collection of Magtrace® in these nodes allows the surgeon to accurately target them for removal, without disrupting the rest of the nodes in the armpit. This is critical in determining the tumor stage and deciding on the patient’s best treatment pathway.

Not only can Magtrace® improve the patient experience during a SLNB, it also enables a new surgical approach known as delayed SLNB (dSLNB), which is only possible with Magtrace®. A dSLNB is ideal for patients undergoing a mastectomy for Ductal carcinoma in situ (DCIS), as studies have shown that up to 80% of high-risk DCIS patients see no clinical benefit from a traditional SLNB1. Meaning that those patients are spared an unnecessary axillary surgery, eliminating the risk of lymphedema and other adverse side effects1.

Insert Quote(s) from Surgeon/Hospital Executive Here

(Hospital Name), which provides cancer care to over (X Number) patients per year, identified Magtrace® as the most patient-centered solution available. This new technology offers significant advantages for both the surgeon and the patient and has been chosen as the health system’s preferred dual tracer technique for SLNB procedures. Mammotome is the exclusive distributor of Magtrace® in North America and worked with (Hospital Name) as their clinical partner in the implementation of Magtrace®

**END**

**For further information please contact:
(Add Contact Information)**

**About (Hospital)**

1Karakatsanis A,et al.,P24: Superparamagnetic Iron Oxide Nanoparticles (SPIO): A Sentinel Node (SN) Tracerwith Novel Applications. Presented at 2019 the Society of Surgical Oncology Annual Cancer Symposium.Available at:https://eventmobi.com/sso2019/agenda/a68d98c3-ec1d-4ac1-b81c-db45c027f559/d4ed4867-c0dd-4e02-9ed9-eaa65060587e [Last accessed February 2020].

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