

neuro | mate® - key features

About *neuromate*®

- The first certified image-guided neurosurgical robot to be used in the world
- Designed specifically for neurosurgery and can be used for neuro-endoscopy, stereoencephalography (SEEG), deep brain stimulation (DBS), biopsy and several other applications
- Estimated at over \$30 million R&D investment to date¹
- Renishaw is a world leader in precision engineering
- Installed systems in several countries worldwide

Surgical applications

- Stereotactic neurosurgery procedures
 - DBS
 - Biopsy
 - Implantation of depth electrodes for epilepsy monitoring (SEEG)
 - Motor cortex stimulation (MCS)
- Neuroendoscopy

And many other research applications

System benefits

- Complete procedure solution
 - Procedure specific modules / tools
 - Comprehensive surgical planning / navigation system
 - C-arm, O-arm & X-ray interfaces
 - 2D - 3D registration
 - Frameless & frame-based support (all standard frames)
- Time saving in multiple trajectories
- Compact, easy to transport and easy to clean
- Designed for quick parts replacement
- Quick to set up and operate
- On-board system diagnostics
- Customisable
 - Dimensions
 - Frame adaptors
 - Imaging modalities
 - Powered tool holders for standard or custom tools
- Strong international clinical support team



Safety features

- The *neuromate*® robot has been used for over 20 years in the clinical field for an estimated 10,000 procedures²
- Anti-collision system
- Constant accuracy checking with redundant encoders
- Safety line constantly monitoring the status of mechanical and electrical components
- Remote control with safety trigger
- Non-backdrivable joints with no backlash ensure immediate, stiff mechanical locking in case of error condition or power outage
- Full image guidance during planning and operation

As a replacement for the targeting arc of a stereotactic frame or for a tracking system, *neuromate*® offers the following safety benefits:

- Regular calibration ensures system remains within accuracy specifications
- Reduced risk of invisible mechanical damage or wear (compared to a stereotactic frame arc)
- No need for error-prone writing down or setting of target co-ordinates
- Stable mechanical attachment (compared to a stereotactic frame or clamping systems used with a navigation system)
- Stiff tool holding

Planning and navigation software

(IVS Technology VoXim®/neuromate®)

General features

- Medical image analysis software
- Neurosurgical planning software
 - For stereotactic frame
 - For *neuromate*® system
- Neurosurgical execution and navigation software
 - For *neuromate*® system

DICOM import

- DICOM import
- Data import from DICOM files
- CT and MRI data supported
- CT gantry tilt supported

X-ray import

- Import of image files
- Direct scanner acquisition
- Co-registration
 - With localizer plates
 - With anatomical landmarks
- 2D / 3D / 3D fusion display supported

Patient database

- All data stored in the local file system
- Multiple independent databases can be defined
- Data can be archived, exported, imported, backed up to a CD, restored
- All actions are instantly and automatically saved

Analysis tools

- Zoom
- Move and turn
- Change gray scale
- Localize coordinates of points
- Measure 2D / 3D distances, angles, areas, volumes and bone density

3D reconstruction

- Support of segmentation thresholds
- 3D cut viewing modes

Segmentation

- Manually definable volume segmentations
- Customizable display of multiple segmentations across fused data sets
- Computation of segmentation volume

Co-registration and fusion

- Co-registration modalities:
 - Frame registration (using frame localizer)
 - Device coordinates (identical imaging device and patient position)
 - Automatic matching (mutual information algorithm)
 - Point matching (user-defined anatomical or fiducial point matching)
 - Scaling

Atlas co-registration

- Supported atlases:
 - Schaltenband-Wahren
 - Talairach-Tournoux atlas and connection map
- Co-registration modalities:
 - Talairach transform
 - User-defined point matching

Trajectory definition

- Can be defined anatomically or with statistical (AC/PC) coordinates
- Definition of AC/PC
- Definition of mid-plane: essential for targeting accuracy
 - Patient may be tilted or rotated
- Realignment of all views according to AC/PC line/mid-plane

Endoscopic trajectories

- Definition of safety volumes for endoscopic trajectories including tool insertion position
- Endoscope motion using remote control
- Full navigation capability with tool position display
- Modification of safety volume possible

Surgeon eye view

- Reconstructed planes parallel and perpendicular to the trajectory at various depths
- Dynamically updated view during execution (navigation capability)

Frame-based registration

- All standard frames
- 6 markers in at least 2 slices should be identifiable
- Automatic or manual marker identification supported
- Frame may be tilted

Printing a surgical plan

- Comprehensive multi-page surgical plan comprising surgical coordinates and frame coordinates
- Multiple frame configurations (e.g. reversed bow)

Frameless registration

- Marker search
- Robot control and frameless registration
- Definition of a safety region for robot arm motion

Verification trajectory

- Definition and execution of a trajectory pointing to a visible anatomic landmark, to verify the patient registration

Execution

- Full navigation capability with tool position display

References

¹ Renishaw internal data

² Renishaw field service data

