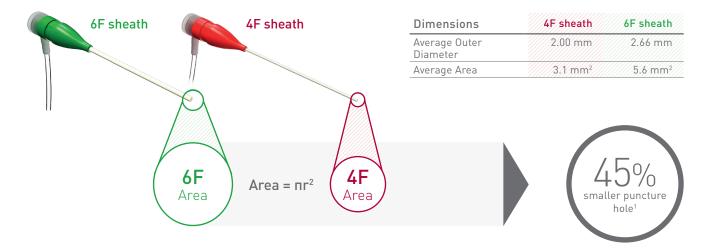
4F Solutions – Minimal is Optimal

4F access – with products allowing treatment of SFA* disease



*SFA – Superficial Femoral Artery; ** excluding Pulsar-35 (6F)

4F access – how much smaller is the puncture size?¹



4F access – who may benefit?^{2,3}

Patient

- Smaller puncture hole means:
- Less wound complications
- Day case intervention
- Vessel preservation for future intervention

Physician

- Technical success may be improved low crossing profile
- Potential for reduced risk of distal thrombo-embolization due to low crossing profile
- May permit ambulatory treatment potentially reducing hospital costs
- May reduce need for Vascular Closure Devices

Smaller puncture hole reducing access site complications.²



4F Solutions – Minimal is Optimal

4F – improved acute outcomes vs 6F²

Potential for safer, faster and simpler procedures than 6F

- Clinically proven lower access site complication rates²
- Shorter compression time²
- 45% smaller puncture site than 6F¹
- No need for a closure device²
- Potential for ambulatory treatment

4F – proven clinical outcomes²

Pulsar long-term safety and efficacy

		12 months		24 months	
	A.L.L. [†]	PP ⁺⁺	FTLR§	PP ⁺	FTLR§
ALL-COMERS BIOFLEX PEACE ⁴ (stent only)	8.2 cm	84.7%	89.3%	78.4%	89.3%
4F INTERVENTIONS 4EVER ^{2,3}	7.1 cm	81.4%	89.3%	72.3%	82.7%
LONG & OCCLUDED TASC D ⁵	24.5 cm	77.0%	86.0%	-	-

+ A.L.L. - Average lesion length; ++ PP - Primary Patency; § FTLR - Freedom from Target Lesion Revascularization

Astron Pulsar, Pulsar-18, Pulsar-18 T3 have the same stent platforms, therefore the clinical results are valid for the Pulsar range.

4F – thinner strut stents reduce inflammatory response⁶

Stent strut thickness in perspective⁷

Pulsar
BIOTRONIK

140 µm

Supera

178 µm

Lifestent	ΧL
Bard	

192µm

Zil	verF	-lex	
Со	ok N	Medic	al

193 µm

Innova Boston Scientific

L		
L		
J	T	

213 µm

Medtronic

Everflex Entrust

L	

228 µm

Pulsar 140 µm thin struts are thinner than the leading brands⁷ and thin strut stents may reduce inflammatory response associated with restenosis.⁶

1. BIOTRONIK data on file; 2. Bosiers M, et al. 4-French -Compatible Endovascular Material is Safe & Effective in the Treatment of Femoropopliteal Occlusive Disease: Results of the 4EVER Trial. J ENDOVASC THER. 2013; 20: 746-756; 3. Bosiers M. 4EVER 24 month results: long-term results of 4F Pulsar stent in femoropopliteal lesions. Presented at: CIRSE 2013; Barcelona, Spain; 4. Lichtenberg et al. Effectiveness of the Pulsar-18 self-expanding stent with optional drug-coated balloon angioplasty in the treatment of femoropopliteal lesions analysis of the Pulsar-18 self-expanding stent with optional drug-coated balloon angioplasty in the treatment of femoropopliteal lesions analysis of the Pulsar-18 Self-expanding stent with optional drug-coated balloon angioplasty in the treatment of femoropopliteal lesions analysis of the Pulsar-18 Self-expanding stent in Journal Journal 5264000785; 5. Lichtenberg M. Superficial Femoral Artery TASC D registry: 12-month effectiveness analysis of the Pulsar-18 SEl nitinol stent in patients with critical limb ischemia. J Cardiovasc Surg (Torinol. 2013; 54(4):433-9; 6. N. Foin et al. Impact of stent strut design in metallic stents and biodegradable scaffolds, International Journal of Cardiology 177 (2014) 800 -808; 7. BIOTRONIK data on file. 6.0 mm diameters

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