IR congress news

New Product Launches CIRSE 2015

The CIRSE Annual Meeting has become the number one platform for minimally invasive image-guided procedures worldwide. Every year, key players in the field choose CIRSE to launch their innovative new products.

To find out more about the products being officially launched during CIRSE 2015, please visit the company booths in the Exhibition Hall. You will find a detailed floor plan overleaf! A full list of exhibitors and a floor plan can be found in your pocket guide, as well as via the CIRSE app.

I

ABBOTT VASCULAR

Armada 18 – 0.018" PTA Catheter
Hi-Torque Command 18 – 0.018" Peripheral Guide Wire

Abbott Vascular presents two new great products in the .018 segment.

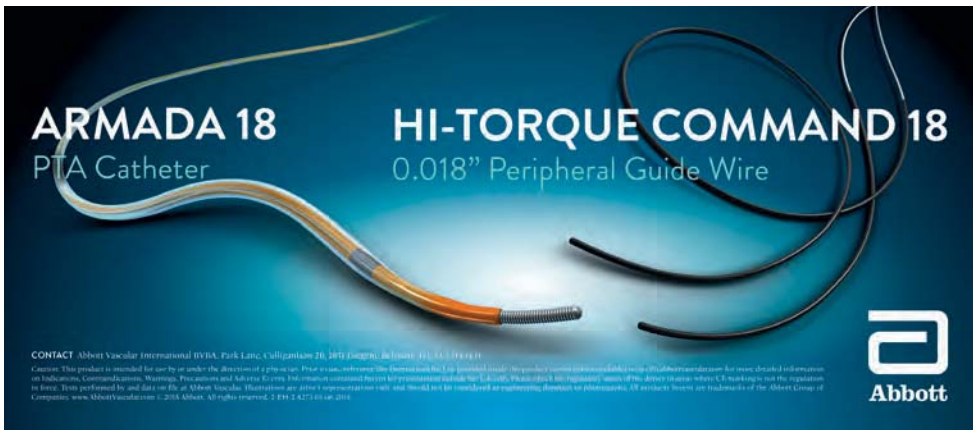
Armada 18 is Abbott Vascular's latest 018 peripheral vascular balloon. Armada 18 has a coaxial, over-the-wire design that results in excellent pushability, trackability, and deflation times for your challenging cases. The Armada 18 is available in diameters of 2-6 mm and lengths 20-200 mm. It includes a 5.5 mm diameter to enable precise vessel preparation when implanting a 5.0 mm Supera.

The Armada 18 PTA catheter is indicated to dilate stenoses in femoral, popliteal, infra-popliteal, tibial, peroneal and renal arteries, and for the treatment of obstructive lesions of native or synthetic arteriovenous dialysis fistulae. In addition, the device is also indicated for post-dilatation of balloon expandable and self-expanding stents.

The Armada 18 catheter and balloon design combine flexibility and strength to reach more distal lesions, so that it provides an outstanding platform for both the SFA and BTK.

Hi-Torque Command 18 is Abbott Vascular's latest 018 guide wire family. Command 18 has a hybrid design that combines the durability of nitinol and the push, torque, and support of stainless steel.

There are three wires in the family:
- Command 18 ST
  - A wire with short taper design that has a supportive body with flexible tip
- Command 18 LT
  - A wire with long taper is a navigation wire with flexible support and moderate tip load.
- Command 18 High Tip Load
  - A high tip load wire for greater penetration power.



II

Boston Scientific

AngioJet® ZelanteDVT™ thrombectomy catheter

Boston Scientific announced that it has received European CE Mark for the AngioJet™ ZelanteDVT™ thrombectomy catheter, a new technology purpose-built to treat Deep Vein Thrombosis (DVT).

This 8 F (2.7 mm) catheter is the largest and strongest thrombectomy catheter in the market-leading AngioJet portfolio, with four times the thrombus removal power of previous generation catheters. ZelanteDVT is torqueable and directional, enabling rapid thrombus removal in large-diameter Iliofemoral and lower extremity veins ≥ 6.0 mm in diameter and upper extremity peripheral veins ≥ 6.0 mm in diameter.

The ZelanteDVT catheter is 105 centimeters in length and is Power Pulse™ enabled for the infusion of physician-specified fluids including thrombolytic agents.

The catheter utilizes an over-the-wire 0.035"(0.89 mm) guidewire and an 8 F sheath for delivery. Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device.

Information for the use only in countries with applicable health authority product registrations. This material is not intended for use or distribution in France.

III

CORDIS

Outback® Elite Re-Entry Catheter

Cordis Corporation announced the launch of OUTBACK® Elite Re-Entry Catheter.

This expansion of the CORDIS® Crossing Portfolio for treatment of chronic total occlusions (CTO) further underlines the company's decade-long commitment to the space.

The redesigned OUTBACK® Elite Re-Entry Catheter enables faster and more precise re-entry into the true lumen in the most challenging cases, with a focus on control and precision, the OUTBACK® Elite Catheter was redesigned with an ergonomic handle and torque control location enabling single handed operation by the user.

The addition of an 80 cm shaft length will aid in optimizing procedures by reducing the length of shaft outside the patient.

These new features combined with a redesigned package make the OUTBACK® Elite Re-Entry Catheter a more convenient, precision re-entry tool for the toughest lesions of peripheral vascular disease.

In a recent study by Gandini et al., the OUTBACK® Re-Entry Catheter was shown to have a higher success rate of precision re-entry versus manual wire techniques.

Gandini R, Fabiano S, Spano S, Volpi T, Morosetti D, Chiaravalloti A, Nano G and Simonetti G (2013), – Randomized control study of the OUTBACK™ LTD re-entry catheter versus manual re-entry for the treatment of chronic total occlusions in the superficial femoral artery. Cathet. Cardiovasc. Intervent., 82: 485-492. doi:10.1002/ccd.24742. Compared with manual re-entry.

IV

HANSEN MEDICAL ®

New Data on Reduced Radiation with Robotics

Radiation Exposure Using the Magellan™ Robotic System: Sandeep Rao, MD, Society of Interventional Radiology Annual Meeting, March 2015

Radiation (Reduction) in the Interventional Lab: Barry T. Katzen, MD, Charing Cross, May 2015

New data presented by Sandeep Rao, MD and Barry Katzen, MD indicates a >90% radiation reduction to the operator during robotic-assisted endovascular procedures.

Image guided procedures are a leading source of radiation exposure. Interventional procedures require the staff to be positioned close to the source, within 4-6 feet. Acute exposure is typically within regulatory limits, but stochastic exposure over a career may cause adverse health effects including cataracts, thyroid disease, reproductive health effects and brain tumors.

Drs. Rao and Katzen collected data during a series of TACE and EVAR procedures performed with the Magellan™ Robotic System. They placed badges on themselves and at the bedside, where the operator would stand during a conventional endovascular procedure. In comparing the two sets of data, Dr. Katzen experienced a 95% radiation reduction from the bedside dose control during the EVAR procedures, and Dr. Rao experienced a 92% radiation reduction from the bedside dose control during the TACE procedures. The physicians attributed the radiation difference to their ability to remotely navigate guide wires and robotic catheters using the Magellan physician workstation. The physicians noted that the Magellan system also offers the potential to reduce fluoroscopy times and radiation exposure to the patient by enabling efficient, predictable procedure times.

Visit Hansen Medical® at Booth 54 to test drive the Magellan Robotic System at CIRSE 2015.

V

LAURANE MEDICAL®

OmniBone™ Biopsy System

Laurane Medical SAS is delighted to announce the preliminary launch of the new generation of its bone access and biopsy devices – The OmniBone™ Biopsy System.

OmniBone™ is set to significantly raise the bar in both manual and power-driven intraosseous procedures for interventional radiologists, haematologists, and orthopaedic surgeons.

This new, patented technology by Laurane Medical SAS features a uniquely grooved introducer for immediate bone purchase and controlled access. This can be used over a guide wire for unparalleled precision, minimizing exposure and overall procedure time. Removable handles also make every component of the OmniBone™ system versatile, lightweight, and easy to use.

Incredibly adaptable, the OmniBone™ range combines manual introduction and biopsy collection with the option to switch to power-driven operation at any time during the procedure.

The OmniBone™ is an all-in-one kit, meaning that the choice is always where it should be – in your hands.

We look forward to meeting you at Booth 68, Pavilion 1.

VI

Medtronic

Emprint™ Ablation System with Thermosphere™ Technology Antenna Improvement and new Emprint Procedure Planning Software.

The Emprint™ ablation system with Thermosphere™ technology provides clinicians three kinds of spatial energy control–thermal, field and wavelength–to create predictable spherical ablation zones regardless of target location, tissue type or changes in tissue properties during a procedure[1].

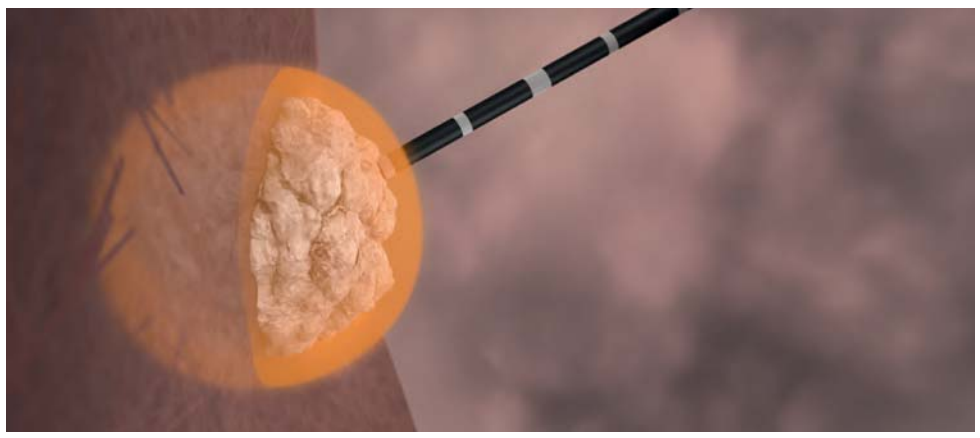
Now making a commitment by investing in research and development to create visionary technologies that help clinicians advance cancer care and drive new paradigms in therapy, an important improvement has been made to the Emprint™ Ablation system.

The Emprint™ ablation system with Thermosphere™ antenna is now equipped with a sharper tip designed to decrease the insertion force of the antenna. Testing shows that there is a 40% reduction in insertion force with the new design[2].

Come and learn more about the Emprint™ ablation system with Thermosphere™ technology and about planning for powerful predictability at booth number 4 and at the symposium on Sunday September 27th at 14.30, auditorium 6.

1 Covidien "In Vivo Performance Testing of the Emprint Microwave Ablation System in a Porcine Model" – R0043973 Rev A; Emprint Instructions for use (IFU).

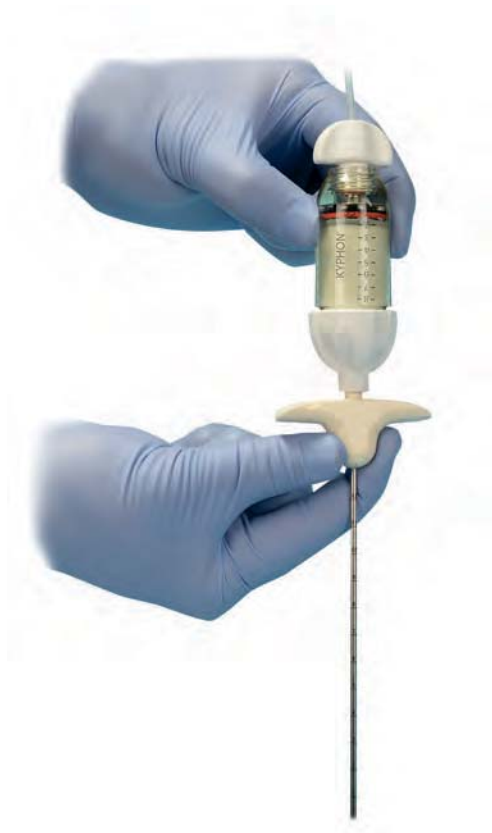
2 RE00010615. Emprint Trocar Sharpness Improvement Engineering Memo 31/3/2015



VII

Medtronic

KYPHON® V™ Premium Vertebroplasty Kit 13ga



KYPHON® V™ Premium Vertebroplasty Kit 13ga combines small gauge bone access with the innovative KYPHON® Cement Delivery System.

VIII

Medtronic

HawkOne™ directional atherectomy system.

The latest addition to Medtronic's directional atherectomy portfolio, the HawkOne™ system provides physicians with an enhanced* cutting mechanism to more effectively treat the widest variety of plaque in patients with peripheral arterial disease (PAD).

"One Device, All Morphologies" The HawkOne™ directional atherectomy system is the most versatile directional atherectomy system**, enabling operators to treat all lesion morphologies more consistently, including heavy calcium. The system is designed to be easy to use both procedurally and during cleaning.

Medtronic's directional atherectomy portfolio includes the TurboHawk™ peripheral catheter and SilverHawk™ plaque excision peripheral catheter and is backed by more than 15 peer-reviewed studies. Recent published data from the DEFINITIVE LE study in the Journal of American College of Cardiology, Cardiovascular Interventions demonstrated 95 percent limb salvage in patients with critical limb ischemia (CLI) and 78 percent overall patency (the ability for the treated artery to remain open) in claudicant patients at 12 months following treatment with directional atherectomy**.

*Comparison and claims in reference to the TurboHawk™ High Efficiency Cutter

**McKinsey J, Zeller T, Rocha-Singh K, Jaff M, Garcia L, DEFINITIVE LE Investigators. Lower Extremity Revascularization Using Directional Atherectomy: 12-Month Prospective Results of the DEFINITIVE LE Study. JACC: Cardiovascular Interventions 2014; 7(8):923-33.

Floor Plan

Discover more about these exciting new products:
visit the company booths in the Exhibition Hall!

Hansen Medical
New Data on Reduced Radiation with Robotics
Booth 54

Laurane Medical
OmniBone™ Biopsy System
Booth 68

Abbott Vascular
Armada 18 – 0.018" PTA Catheter / Hi-Torque Command 18 – 0.018" Peripheral Guide Wire
Booth 7

Boston Scientific
AngioJet® ZelanteDVT™ thrombectomy catheter
Booth 1

Cordis
Outback® Elite Re-Entry Catheter
Booth 2

Medtronic
- **Emprint™ Ablation System with Thermosphere™ Technology Antenna Improvement and new Emprint Procedure Planning Software**
- **KYPHON® V™ Premium Vertebroplasty Kit 13ga**
- **HawkOne™ directional atherectomy system**

Booth 4

Links to the company websites can be found on the CIRSE website, www.cirse.org, or via the CIRSE app.