



AGENT IDE is a prospective, multicenter, randomized controlled trial in the United States to evaluate the safety and effectiveness of the AGENT™ Drug-Coated Balloon (DCB) compared to balloon angioplasty in patients with in-stent restenosis (ISR).¹

AGENT IDE Study Design

Prospective, randomized, multicenter, superiority trial across 40 US Site (N=480 patients*)

- Key Inclusion Criteria: Patients with ISR of a lesion previously treated with BMS or DES; lesion length <26 mm, RVD >2.0 - ≤4.0 mm, and %DS >70 - <100% (asymptomatic) or %DS >50 - <100% (symptomatic)</p>
- ➤ Key Exclusion Criteria: Recent STEMI, bifurcation, LM, SVG or arterial graft, thrombus in target vessel



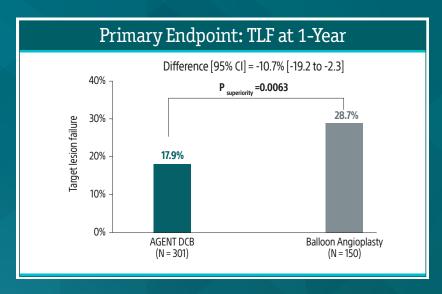
Primary Endpoint: Target Lesion Failure at 1-year (composite of TLR, TV-MI, or cardiac death) **Clinical follow-up:** In-hospital, 30 days, 6 months, 1-year and annually between 2 and 5 years)

Primary Endpoint²

AGENT DCB showed statistically superior outcomes compared to balloon angioplasty for TLF at 1-year. (17.9% versus 28.7%, P=0.0063).

The TLF relative risk reduction from using AGENT DCB was approximately 38%.

38% relative risk reduction for TLF

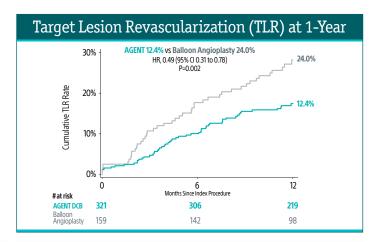


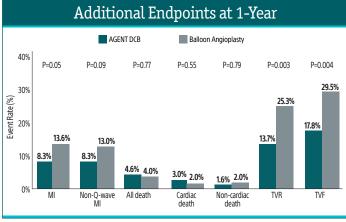


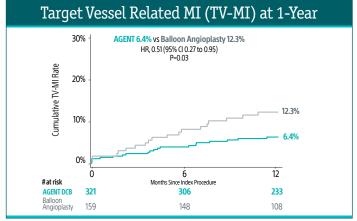
➤ Additional Endpoints²

At 1-year, AGENT DCB also demonstrated statistically lower event rates:

- > 51% risk reduction in TLR (12.4% vs. 24.0%, P=0.002)
- ▶ 49% risk reduction in TV-MI (6.4% vs 12.3%, P=0.03)
- > Zero definite/probable ST (0.0% vs. 3.9%, P=0.001)

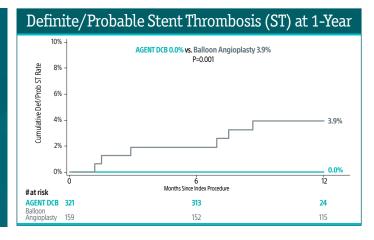






> Antiplatelet Therapy

DAPT with aspirin and a P2Y12 inhibitor was required for at least 1-month post-procedure. Antiplatelet monotherapy was continued thereafter for the entire duration of the study.



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www.bostonscientific.com/agent

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1. Yeh, R, et all, Rationale and design of a randomized study comparing the agent drug coated balloon to the plain old balloon angioplasty in patients with In-Stent Restenosis, American Heart Journal 2021.

2. AGENT IDE Clinical Trial data presented at TCT 2023 by Dr. Robert Yeh.



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