

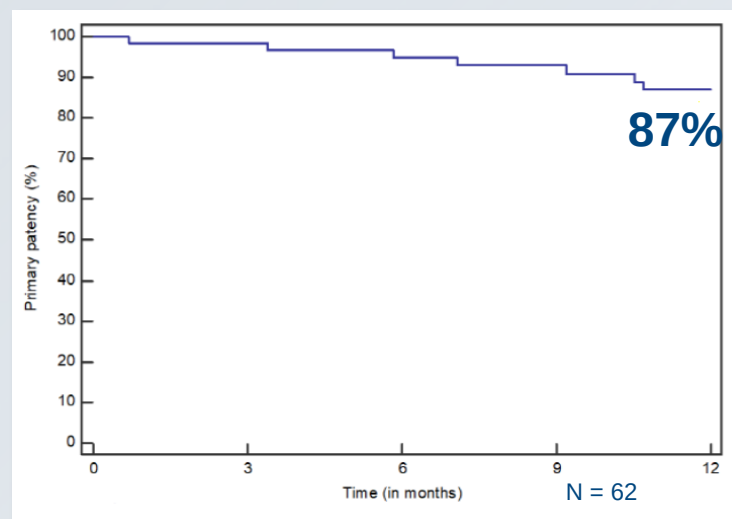
In 200 mm lesions, the Eluvia™ Drug-Eluting Vascular Stent System demonstrated 87% Primary Patency. Nearly half the patients had CLI.

Boston
Scientific

Results from the Münster All-Comers Registry (Germany, n=62):

- 48% critical limb ischemia
- 200 mm mean lesion length
- 42% moderate / severely calcified
- 79% occlusions
- 76% extending into the distal SFA
- 44% extending into the P1 segment
- 5 incidents aneurysmal dilatation of SFA*
- 0% stent fracture rate^b
- 87% Freedom from TLR

12-month Primary Patency^a



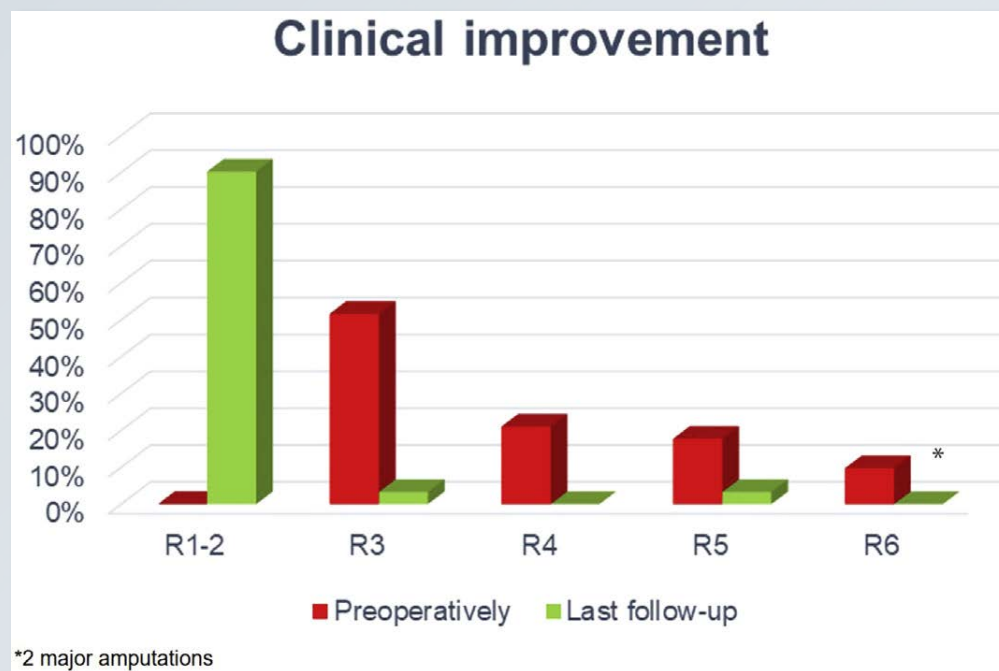
Bisdas, T., et al. JACC:IC Vol. 11, No. 10, 2018, May 28, 2018:957–66. ^aDuplex ultrasound peak systolic velocity ratio ≤ 2.0 ^b6-month results

* There have been no other cases of aneurysms reported with Eluvia globally to date. BSC is investigating the reports in this center. Aneurysms have been reported in literature with other paclitaxel devices (IN.PACT and Lutonix DCBs; J Vasc Surgery 2015;62:1320-2).

CAUTION: Eluvia is an investigational device. Limited by US law to investigational use only. Not available for sale.

At 1 year, 90% of patients were categorized as Rutherford class 1 or 2.
All patients were Rutherford 3 or greater at baseline.

Clinical Improvement^a in Rutherford^b Class Between Baseline and Last Follow-Up



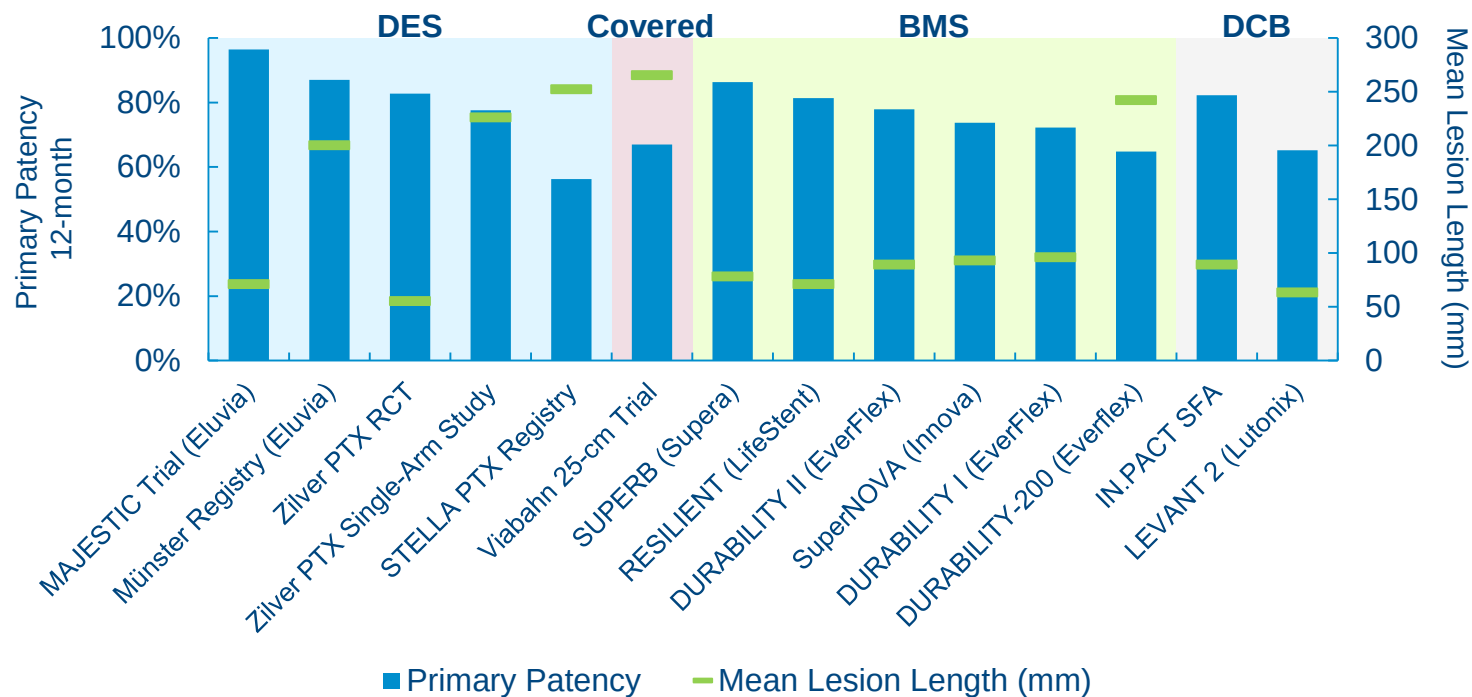
^a Bisdas, T., et al. JACC:IC Vol. 11, No. 10, 2018, May 28, 2018:957–66.

^b Rutherford Scale: Category 0: Asymptomatic; Category 1: Mild claudication; Category 2: Moderate claudication; Category 3: Severe claudication; Category 4: Rest pain; Category 5: Minor tissue loss, ischemic ulceration not exceeding ulcer of the digits of the foot; Category 6: Major tissue loss, severe ischemic ulcers or frank gangrene

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Eluvia™ demonstrated exceptional patency rates in the SFA even in long, challenging lesions

Primary patency for DES, Covered Stents, BMS and DCB in the SFA



Results from different clinical investigations are not directly comparable. Information provided for educational purposes only.

Bisdas, T., et al. JACC:IC Vol. 11, No. 10, 2018, May 28, 2018:957-66.
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