Tria™ Ureteral Stent

Unlike any other
Urine calcium and magnesium salt deposits are contributing factors to stent complications such as encrustation.\(^1,2\)

-10 of 13 (76%) of long term in-dwell stents may become encrusted within 6 months.\(^3\) Stent encrustation can lead to increased risk of infection and obstruction.\(^4,5\)

13 out of 100 ureteral stents may be forgotten.\(^6\)

*In vitro* studies of Tria™ Ureteral Stent demonstrate a reduction in the combined urine calcium and magnesium salt deposits, both in the presence and absence of bacteria.\(^7,8\)

In both sterile and bacterial infection urine bench test models, Tria Firm Stent and Tria Soft Stent reduced the combined Ca and Mg urine salt accumulation as compared to competitive stents.\(^7,8\) The mean difference of salt crystal material was a statistically significant reduction in each model.*
The material difference
The Tria™ Ureteral Stent’s quality-driven manufacturing process, combined with the unique PercuShield™ design, produces consistent inner and outer surfaces, minimizing irregularities of the stent and reducing the likelihood of salt adhesion.

- **Significant durometer changes** – Designed to be stiffer during placement to navigate patient anatomy while softening by over 40% at body temperature, which may promote greater patient tolerability.7,9,10

- **Optimal coverage** – Unlike an applied coating, the PercuShield technology is embedded into the stent to provide protection throughout the entire indwell.

- **No contraindications** – Potentially treat more patients.

To learn more about the features and benefits of the Tria™ Ureteral Stent, [watch this video](#)
For each condition, the difference between the Tria Stent and the competitor stent on mean amount of salt crystal material was assessed at the 0.05 level of significance using a (one-sided) two-sample t test. 

Biocompatible material designed for up to a 365-day indwelling time. Where long-term use is indicated, it is recommended that indwelling time for stent (with retrieval line removed) not exceed 365 days. This stent should be evaluated by the physician on or before 90 days post-placement.

7. The testing was performed by or on behalf of BSC. Data on file. Bench test or pre-clinical study results may not necessarily be indicative of clinical performance.
8. Study methodology: Testing was performed by an independent third-party using the in-vitro BEST™ method to evaluate salt adhesion of the ureteral stents. A total of 30 samples from each ureteral stent family were tested in both a sterile Artificial Urine Model and a Bacterial Infection Model (n=15 in each model) for 2 weeks. Proteus mirabilis was used as the microbial challenge in the Bacterial Infection Model due to its known urine production and involvement in struvite formation.
9. Reduction in stent durometer represents the average percent drop in stent durometer from 25°C to 37°C in air.

CAUTION: The law restricts these devices to sale by or on the order of a physician. Indications, contraindications, warnings, and instructions for use can be found in the product labelling supplied with each device or at www.IFU-BSCI.com. Products shown for INFORMATION purposes only and may not be approved or for sale in certain countries. This material not intended for use in France.

Please consult your sales representative for more information and ordering details. To learn more, visit www.bostonscientific.com/Tria

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