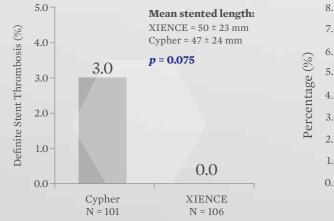
### UNPARALLELED SATETY<sup>1</sup> FOR EVEN THE MOST CHALLENGING LESIONS



### **XIENCE DEMONSTRATES LOW STENT** THROMBOSIS RATES IN LONG LESIONS AND IN PATIENTS WITH DIABETES

#### **Definite Stent Thrombosis** in Long Lesions at 3 years CIBELES Trial<sup>4</sup>



#### **ARC Definite Stent Thrombosis at 2 Years Insulin-Dependent Diabetic Patients** TUXEDO Trial<sup>5</sup> (n = 1,830)



\*Based on ST rates from SPIRIT II, SPIRIT III and SPIRIT IV. XIENCE Xpedition IFU and data on file at Abbott.

**References:** 1. Palmerini, et al. The Lancet. 379:9824, 14-20 April 2012, pp. 1393-1402; Bangalore S, et al. Circ Cardiovasc Interv, Aug 6, 2013. doi: 10.1161/circinterventions.113.000415.; Valgimigli, Effects of Cobalt-chromium Everolimus eluting or bare metal stent on fatal and non-fatal cardiovascular events. A patient-level meta analysis. EuroPCR 2014; Serruys, PW et al. RESOLUTE All Comers Trial, NEJM 2010. Published online June 16, 2010; Fajadet, J, et al. PLATINUM PLUS 30-day Poster, TCT 2012. 2. 100,000 patients and 100+ clinical trials numbers are based on trials registered on www.clinicaltrials.gov and www.cvpipeline.com as of July 2015. 3. SPIRIT II (n = 223), SPIRIT III (n = 669), SPIRIT IV (n = 2,458), SPIRIT V (n = 1,662), SPIRIT Women (n = 1,506), XIENCE V USA (n = 6,516), XIENCE V India (n = 931), COMPARE (n = 897), STOPDAPT (n = 1,525). 4. Moreno, R., et al., A Randomised Between Everolimus- and Siro -Eluting Stents in Chronic Coronary Total Occlusions. Final Results of the CIBELES Trial. EuroPCR 2012. 5. Tuxedo Trial: Kaul, U et al Two Year TUXEDO Outcomes, TCT 2016.

### Xience Xpedition 48

Everolimus Eluting Coronary Stent System

#### LONGEST LENGTH DES

Extends the maximum length of single stent coronary DES available in clinical practice by 26%.\*

#### ORDERING INFORMATION Available in 4 diameters

Stent Diameter	Stent Length										
	8 mm	12 mm	15 mm	18 mm	23 mm	28 mm	33 mm	38 mm	48 mm		
2.25 mm	1070225-08	1070225-12	1070225-15	1070225-18	1070225-23	1070225-28	_	-	-		
2.50 mm	1070250-08	1070250-12	1070250-15	1070250-18	1070250-23	1070250-28	1070250-33	1070250-38	1070250-48		
2.75 mm	1070275-08	1070275-12	1070275-15	1070275-18	1070275-23	1070275-28	1070275-33	1070275-38	1070275-48		
3.00 mm	1070300-08	1070300-12	1070300-15	1070300-18	1070300-23	1070300-28	1070300-33	1070300-38	1070300-48		
3.25 mm	1070325-08	1070325-12	1070325-15	1070325-18	1070325-23	1070325-28	1070325-33	1070325-38	_		
3.50 mm	1070350-08	1070350-12	1070350-15	1070350-18	1070350-23	1070350-28	1070350-33	1070350-38	1070350-48		
4.00 mm	1070400-08	1070400-12	1070400-15	1070400-18	1070400-23	1070400-28	1070400-33	1070400-38	_		

#### STENT SPECIFICATIONS\*\*

Stent Design	MULTI-LINK	K, 3-3-3, non-linear link	Nominal Pressure	11 atm		
Stent Material	aterial L-605 Cobalt Chromium		Rated Burst Pressure	18 atm		
Drug	Everolimus		Shaft Measurements	Proximal	Mid-Shaft	Distal
lymer Fluorinated Copolymer				Min: 0.035"	Min: 0.032"	
Strut Thickness	0.0032"			Max: 0.028"	Max: 0.038"	Max: 0.034"
Maximum Expansion Diameter	Size (mm) Max Expansion (mm)		GW Notch Width, Average	0.033"		
	2.5	3.25	Balloon Material	Multilayer Pebax*		
	2.75-3.0	3.75	Crossing Profile	0.0439" (3.0 x 48 mm)		
	3.5	4.5	Stent to Shoulder	0.918 mm		
			Tip Entry Profile, Average	0.0168**		
			Working Catheter Length	145 cm		
			0			

\* From 38 mm to 48 mm \*\* Data on file at Abbott

Caution: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use provided inside the product carton (when available), at *eifu.abbottvascular.com* or at *Manuals.sjm.com* for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events. **Information contained herein for presentation outside the U.S. only**. Check the regulatory status of the device before distribution in areas where CE marking is not the regula Illustrations are artist's repres ons only and should not be considered as engineering drawings or photographs

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#### STENT DELIVERY SYSTEM SPECIFICATIONS\*\*

## Xience **Xpedition 48**

**Everolimus Eluting Coronary Stent System** 

#### 48 mm Delivers Like a 28 mm<sup>1</sup>

Smooth Tracking Unparalleled

#### Safety<sup>2</sup>

## SIZE UP YOUR OPTIONS

Source: 1. Data from Catheter Performance Test on file at Abbott. 2. Palmerini, et al. The Lancet. 379:9824, 14-20 April 2012, pp. 1393-1402; Bangalore S, et al. Circ Cardiovasc Interv, Aug 6, 2013. doi: 10.1161/circinterventions.113.000415.; Valgimigli, Effects of Cobalt-chromium Everolimus eluting or bare metal stent on fatal and non-fatal cardiovascular events. A patient-level meta analysis. EuroPCR 2014; Serruys, PW et al. RESOLUTE All Comers Trial, NEJM 2010. Published online June 16, 2010; Fajadet, J., et al. PLATINUM PLUS 30-day Poster, TCT 2012.

From top to bottom, a XIENCE Xpedition 3.0 x 48 mm, 3.0 x 38 mm and 3.0 x 33 mm are depicted. Information contained herein for presentation outside the U.S. only. Check the regulatory status of the device before distribution in areas where CE marking is not the regulation in force. ©2018 Abbott. All rights reserved. AP2945298-OUS Rev. A





### SIZE UP YOUR OPTIONS

# SMOOTH.

### TREAT LONG LESIONS WITH CONFIDENCE<sup>1</sup>

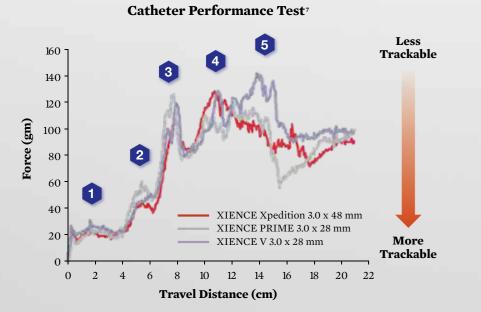
#### XIENCE Xpedition 48 brings the excellent safety and performance of XIENCE to the longest coronary lesions, providing an outstanding alternative to overlapping with multiple stents.

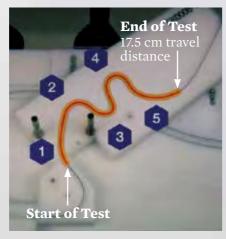
### Clinical and economic benefits of using a single stent instead of two overlapping stents include:

- No metal overlap, which may lower clinical event rates and reduce the risk of geographic miss<sup>2</sup>
- Reduce fluoroscopy time by 23%<sup>3</sup>
- Reduce contrast usage by **50%**<sup>3</sup>
- Reduce procedural time by 45%<sup>3</sup>
- Reduce procedural costs by **31%**<sup>4</sup>

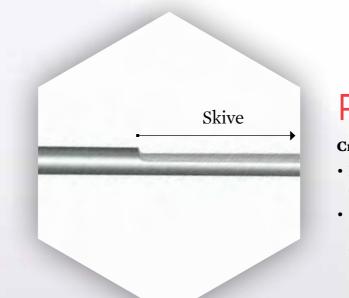
### 48 MM DELIVERS LIKE A 28 MM<sup>5</sup>

The Longest DES Available with No Sacrifice in Deliverability<sup>6</sup>





### DESIGNED FOR SMOOTH TRACKING



### TRACKABLE

#### Track smoothly through tortuous anatomy

- Fully integrated tip continues to guide wire notch with no transitions for excellent tracking
- Ultra low distal seal technology for outstanding crossability

Sources: 1. Moreno, R., et al., A Randomised Comparison Between Everolimus- and Sirolimus-Eluting Stents in Chronic Coronary Total Occlusions. Final Results of the CIBELES Trial. 2. Raber, L., et al. Impact of Stent Overlap on Angiographic and Long-term Clinical Outcome in Patients undergoing DES Implantation. *J Am Coll Cardiol.* 2010;55:1178–1188. 3. Tests performed and data on file at Abbott. 4. Hoffmann, R., et al. Randomized Comparison of Success and Adverse Event Rates and Cost Effectiveness of One Long Versus Two Short Stents for Treatment of Long Coronary Narrowings. *Am J Cardiol.* 2002;90:460–464. 5. Test results show similar work is required to deliver XIENCE Xpedition 3.0 x 48 mm, XIENCE PRIME 3.0 x 28 mm, and XIENCE V 3.0 x 28 mm. Test performed by and data on file at Abbott. 6. From a major global manufacturer. 7. Test performed by and data on file at Abbott.

# AGILE.

### PUSHABLE

#### Cross challenging anatomy with ease

- Hypotube skive transitions for exceptional support
- Smooth and reduced transitions across the entire system for optimal force transfer

### FLEXIBLE

#### Deliver in long lesions with confidence

• Flexible multilayered balloon with flatter compliance for superior deliverability

