Intermediate-Term (24-Month) Results of the TRANSCEND Study

Comparing a Next-Generation Paclitaxel Drug-Coated Balloon (SurVeil™ DCB) to IN.PACT® Admiral® DCB in the Treatment of Femoropopliteal Artery Disease

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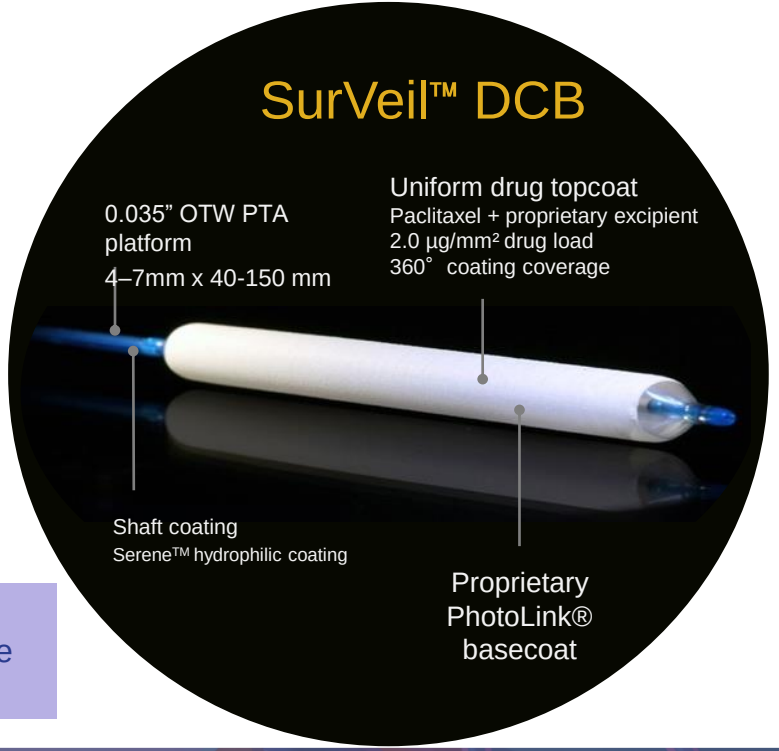
SURVEIL™ DCB – Next Generation DCB

Next-generation DCB – Intent

- Higher Efficacy: To develop a device that could improve the therapeutic window by achieving therapeutic outcomes equivalent to high-dose technologies and with lower potential for complications.
- Lower Dose: Technology goal was a lower Paclitaxel drug dose of 2.0 µg/mm^2, more uniform drug distribution, better efficiency of drug transfer, and fewer downstream emboli
- Comparable Clinical Results: To demonstrate this with a well-designed, well conducted head-to-head pivotal trial versus a high-dose device

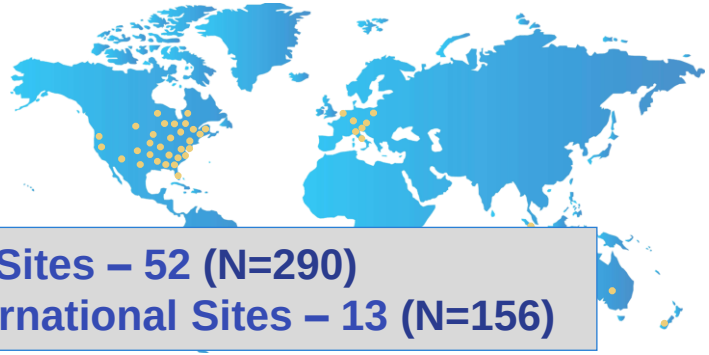


THESIS: If a DCB can achieve similar clinical outcomes with a lower dose of drug as demonstrated in a head-to-head RCT then it would advance the state of the art and could provide a better therapeutic choice

TRANSCEND Study Overview

- **Prospective, multicenter, international, randomized, single-blind trial of Surveil™ DCB versus IN.PACT® Admiral® DCB (1:1)**
- **446 subjects randomized**
  - **SurVeil (N=222) & IN.PACT ADMIRAL (N=224)**
  - **Follow-up through 60 months**
- Independent / blinded: DUS and Angiographic Core Labs, Clinical Events Committee
- **Hypotheses test: Non-inferiority (15% NI Margin for efficacy and 10% for safety)**
  - **Sensitivity Analysis-Complete Case**
  - **Primary Analysis-Multiple Imputation**

GLOBAL SITE PARTICIPATION



US Sites – 52 (N=290)
International Sites – 13 (N=156)

PRINCIPAL INVESTIGATORS
Kenneth Rosenfield, MD
Marianne Brodmann, MD
William Gray, MD

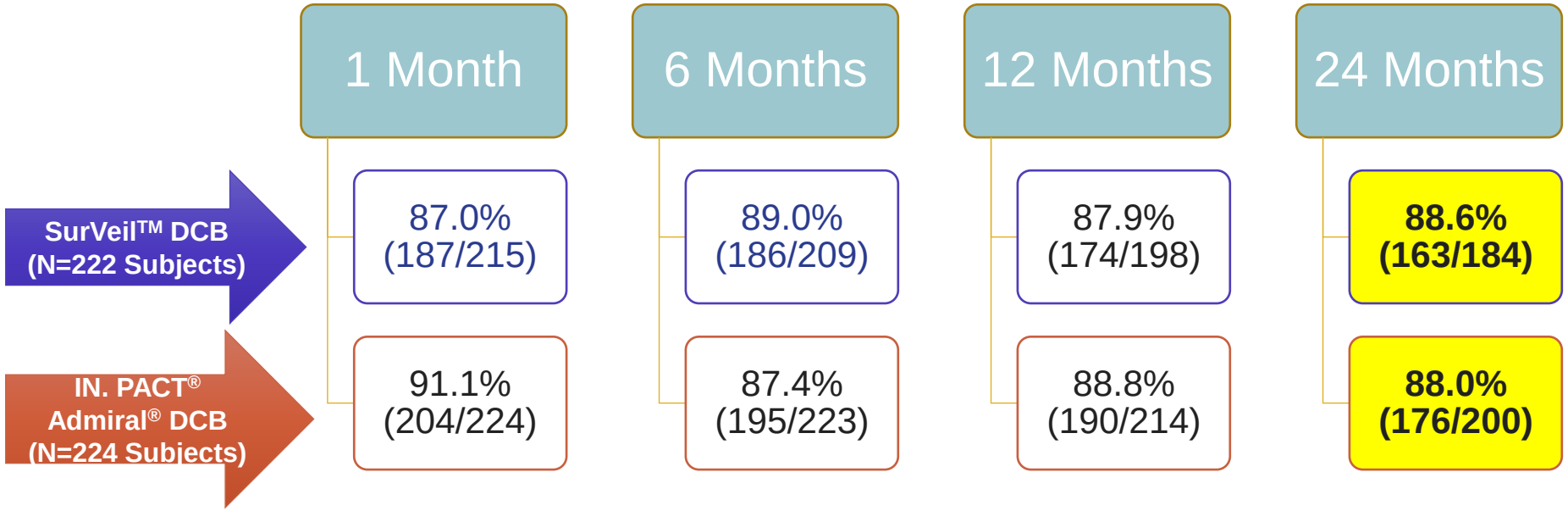
TRIAL DESIGN, BIOSTATISTICS, DSMB, CEC
Baim Institute

TRIAL OPERATIONS
Medpass and Mobius (OUS); Clinlogix (US)

KEY ELIGIBILITY AND PRIMARY ENDPOINTS

- **KEY ELIGIBILITY**
  - Target limb Rutherford Class 2, 3, or 4
  - De Novo or non-stented restenotic lesion
  - Target lesion: length ≤ 180 mm; diameter ≥ 4mm & ≤ 7mm; stenosis ≥ 70% by visual estimate
- **PRIMARY SAFETY ENDPOINT (COMPOSITE)**
  - Freedom from device- and procedure-related death through 30 days post-index procedure
  - Freedom from major target limb amputation (above the ankle)
  - Clinically-driven target vessel revascularization (CD-TVR) through 12 months post-index procedure
- **PRIMARY EFFICACY (PRIMARY PATENCY COMPOSITE)**
  - Freedom from clinically-driven target lesion revascularization (CD-TLR)
  - Binary restenosis through 12 months post-index procedure

Follow-Up Compliance by Visit



Percentages are in window visits/expected visits

Baseline Demographics And Lesion Characteristics

	SURVEIL™ N = 222 subjects	IN.PACT® N = 224 Subjects	P-value
Age (yrs)	68.7 ± 9.4 (222)	67.4 ± 9.3 (224)	0.136
Male	62.6% (139/222)	63.4% (142/224)	0.922
Rutherford Class[2]			0.013
2	21.6% (48/222)	34.4% (77/224)	
3	75.7% (168/222)	61.2% (137/224)	
4	2.7% (6/222)	4.5% (10/224)	
Lesion length (mm)[1]	72.5 ± 48.4 (221)	70.0 ± 50.5 (223)	0.597
Minimum Lumen Diameter (mm) [1]	1.4 ± 1.1 (221)	1.3 ± 1.0 (223)	0.106
Reference Vessel Diameter (mm) [1]	5.3 ± 0.9 (221)	5.3 ± 0.7 (223)	0.842
% Diameter stenosis[1]	72.9 ± 18.8 (221)	75.8 ± 18.1 (223)	0.102

[1] Core Lab reported data
[2] Site reported data
Data reported as Mean±SD (N) or % (n/N)

Procedural Characteristics

	SURVEIL™ N = 222 subjects	IN.PACT® N = 224 Subjects	P-value
Stenosis (%)			
After Pre-Dilatation[1]	29.5 ± 15.2 (212)	31.2 ± 16.0 (218)	0.280
After DCB deployment[2]	20.3±10.4 (215)	19.9±10.1 (220)	0.728
Final[2]	18.7 ± 9.6 (217)	18.9 ± 9.3 (223)	0.875
Max Inflation Pressure (atm)[3]	8.3 ± 2.4	9.2 ± 2.4	<0.001
Inflation Duration (sec)[3]	183.3 ± 64.4	185.5 ± 63.6	0.686
Final MLD (mm)[2]	4.3 ± 0.8 (221)	4.3 ± 0.7 (223)	0.604
Dissection (>/= Grade C) (Post Procedure)[2]	21.7% (47/217)	15.7% (35/223)	0.113
% of subjects requiring Post dilatation	18.0% (40/222)	17.4% (39/224)	0.902
% of subjects with Bailout stenting	8.1% (18/222)	6.7% (15/224)	0.592

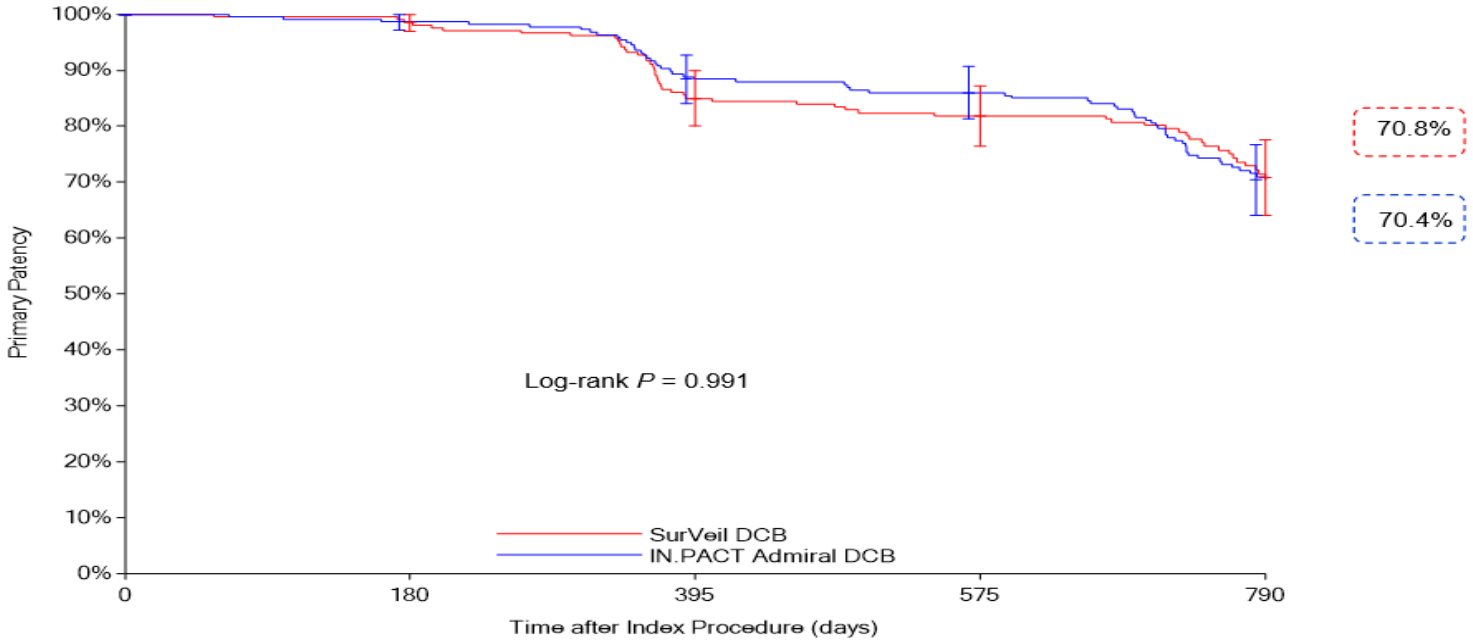
[1] Site Data [2] Core Lab data [3] information based on number of devices used Data reported as Mean ± SD (N) or % (n/N)

Primary Results (12 Months)

	TRANSCEND TRIAL	
	SURVEIL™	IN.PACT®
Primary safety (ITT)	**91.7%**	**89.6%**
All cause death at 30 days	**0.5%** (1/218)	**0.0%** (0/223)
Target limb major amputation	**0.0%** (0/196)	**0.0%** (0/215)
CD-TVR	**7.6%** (15/198)	**10.1%** (22/217)
Primary effectiveness (ITT)	**81.7%**	**85.9%**
Binary restenosis (PSVR>2.4)	**12.0%** (19/158)	**8.8%** (16/181)
CD-TLR	**8.1%** (16/198)	**5.6%** (12/215)

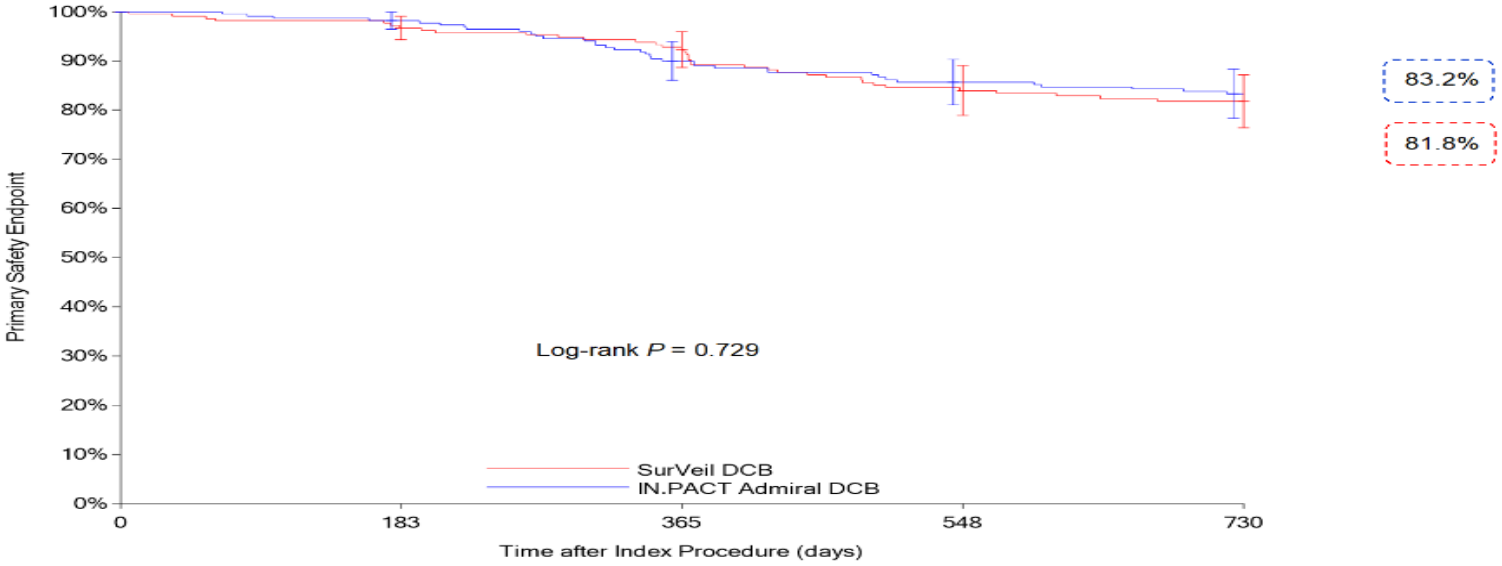
- **SurVeil™ met primary safety**
  - Strong safety profile, no amputations, low CD-TLR
- **SurVeil™ met primary efficacy**
  - Comparable effectiveness at a substantially lower dose
- All analyzed cohorts (ITT/PP/AT) demonstrated consistent outcomes; multiple imputation/complete case analyses consistent

K-M Primary Patency – 24 months



Number at risk					
SurVeil	222	205	164	150	98
IN.PACT Admiral	224	218	187	177	125

K-M Secondary Safety – 24 months



Number at risk					
SurVeil	222	202	182	157	132
IN.PACT Admiral	224	217	191	178	156

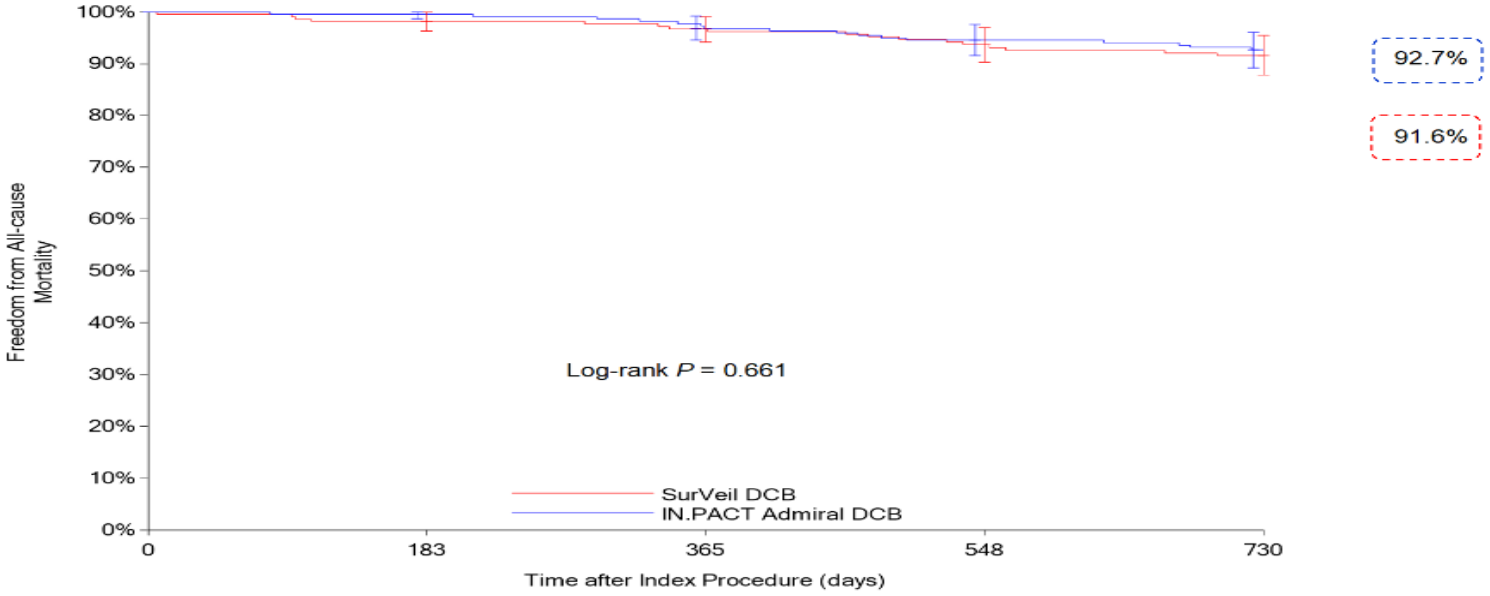
Safety endpoint is a composite of freedom from device- and procedure-related death through 30 days post-index procedure and freedom from major target limb amputation (above the ankle) and clinically-driven target vessel revascularization (TVR).

Secondary Safety and Efficacy Endpoints – 24 months

	SURVEIL™ N=222 Subjects	IN.PACT® N=224 Subjects	P-value
Target vessel patency [1]	63.0% (102/162)	63.1% (118/187)	1.000
Clinically-driven TLR	14.7% (27/184)	11.8% (24/204)	0.453
Major target limb amputation	0.0% (0/181)	0.5% (1/204)	1.000
Thrombosis at the target lesion	0.6% (1/181)	0.0% (0/204)	0.470

[1]Defined as freedom from clinically-driven TVR and binary restenosis (restenosis defined as DUS PSVR ≥2.4 or ≥50% stenosis as assessed by independent angiographic and DUS core labs), within 24 months

K-M Freedom From All Cause Mortality -24 Months

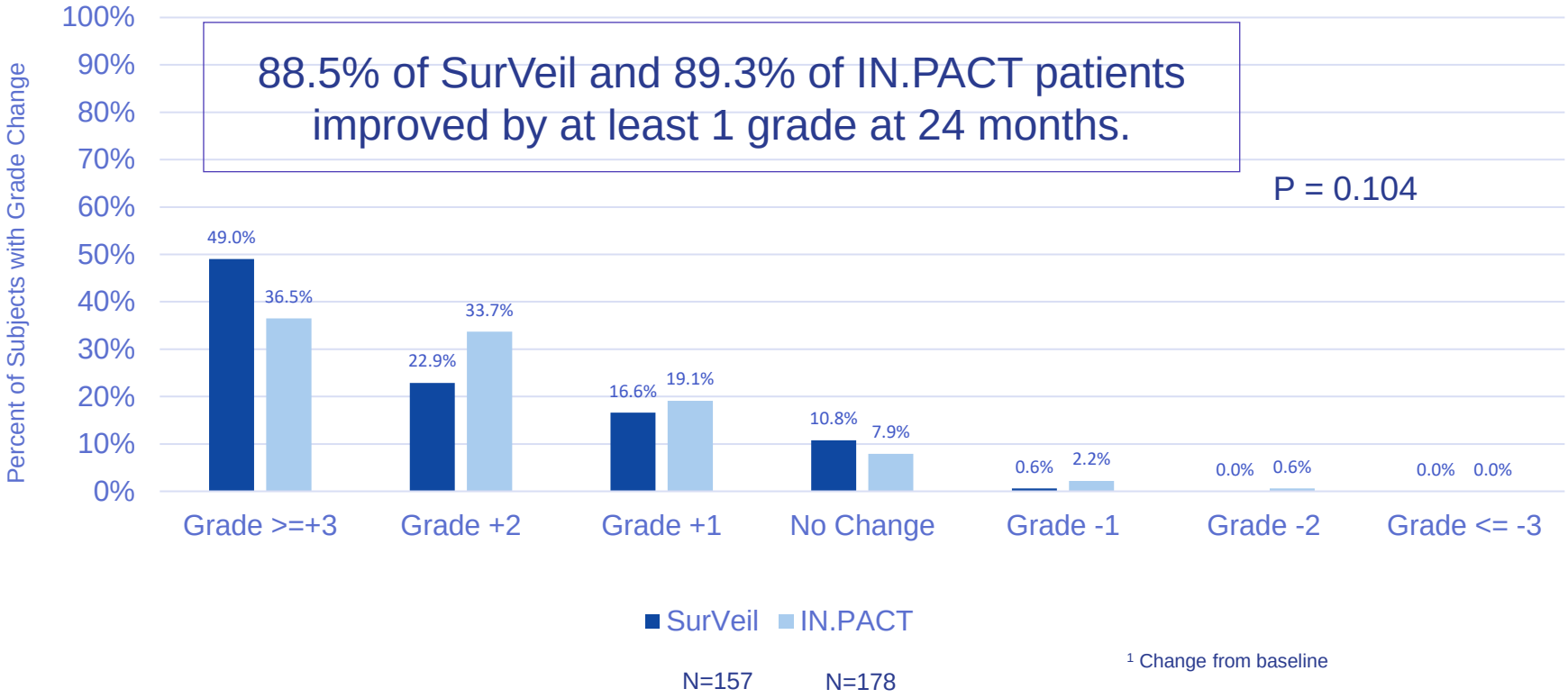


Number at risk					
SurVeil	222	207	195	184	162
IN.PACT Admiral	224	221	211	206	188

Functional outcomes at 24 Months

TRANSCEND PIVOTAL TRIAL RESULTS

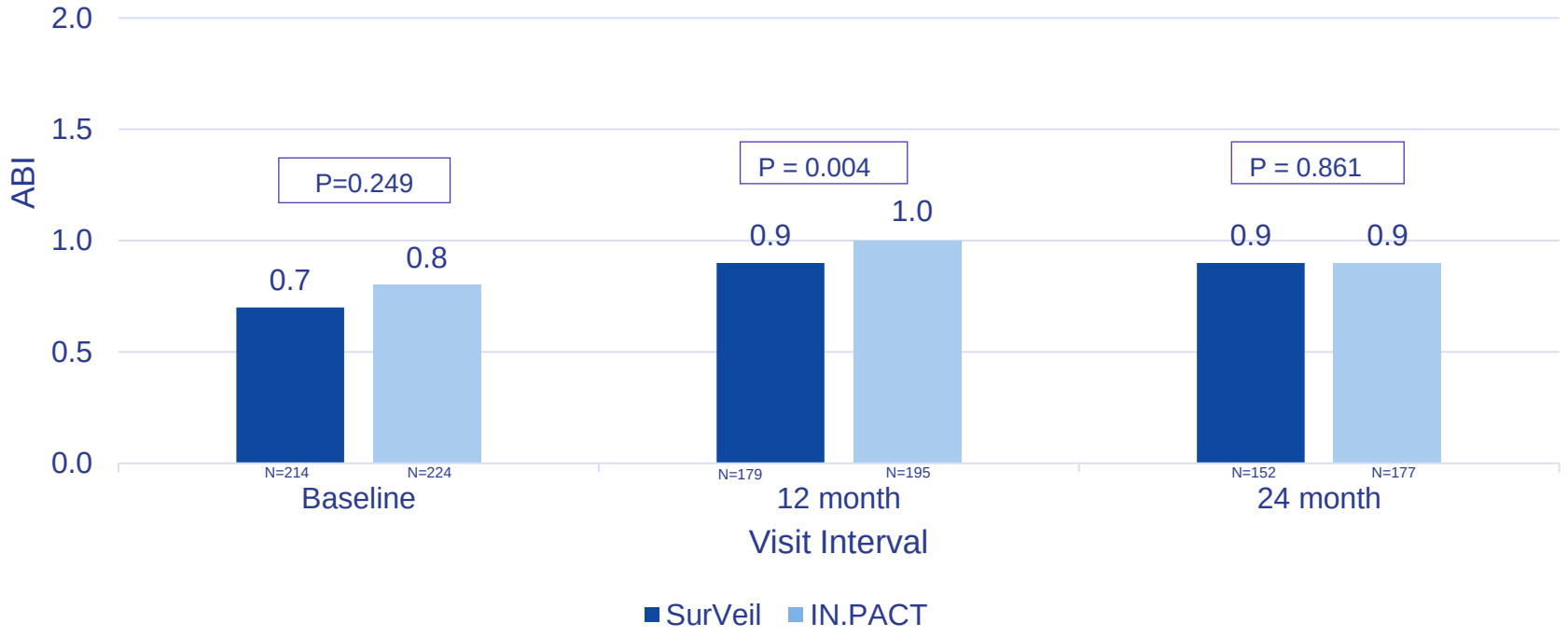
Rutherford Classification Change[1]



[1] Change from baseline

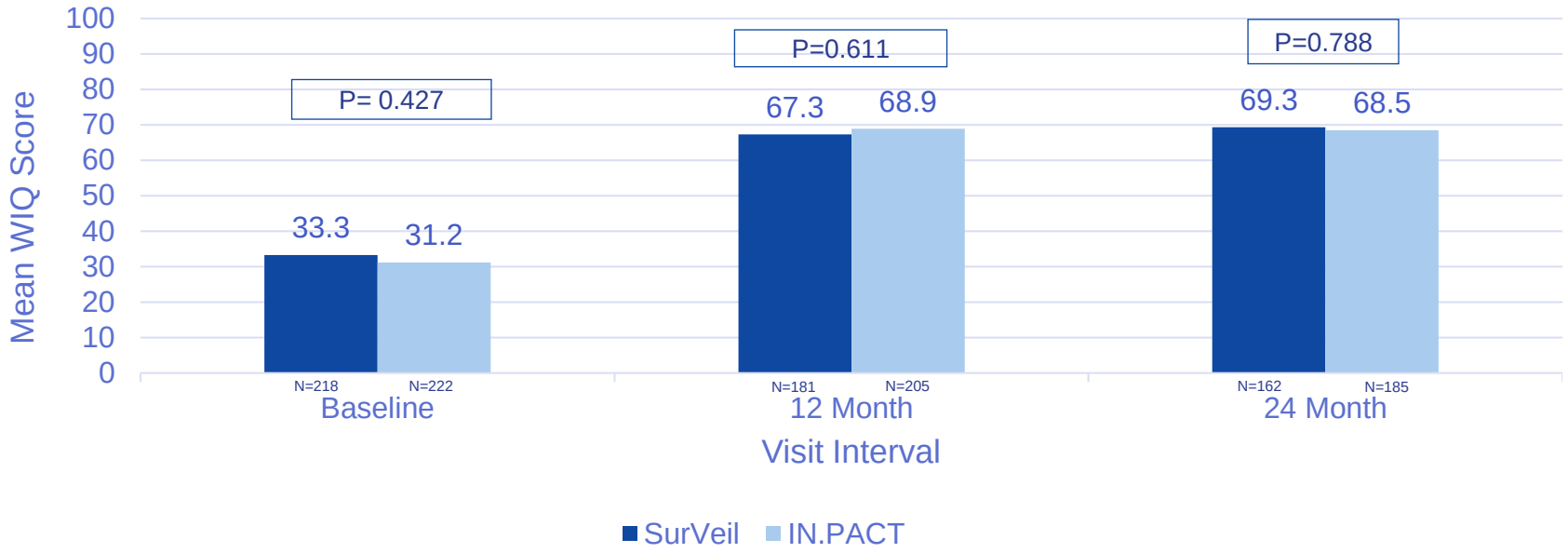
Ankle Brachial Index (24 months)

Sustained improvement



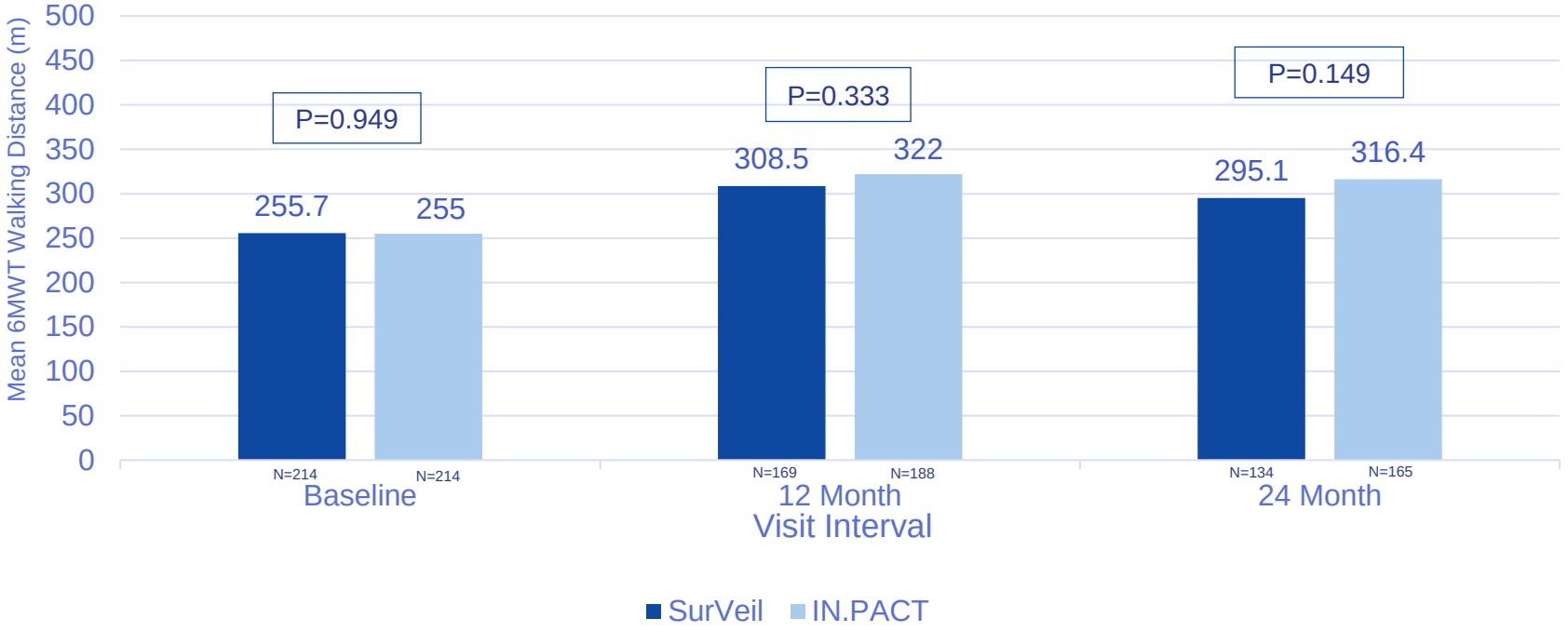
Walking Impairment Questionnaire (WIQ) (24 months)

Sustained improvement



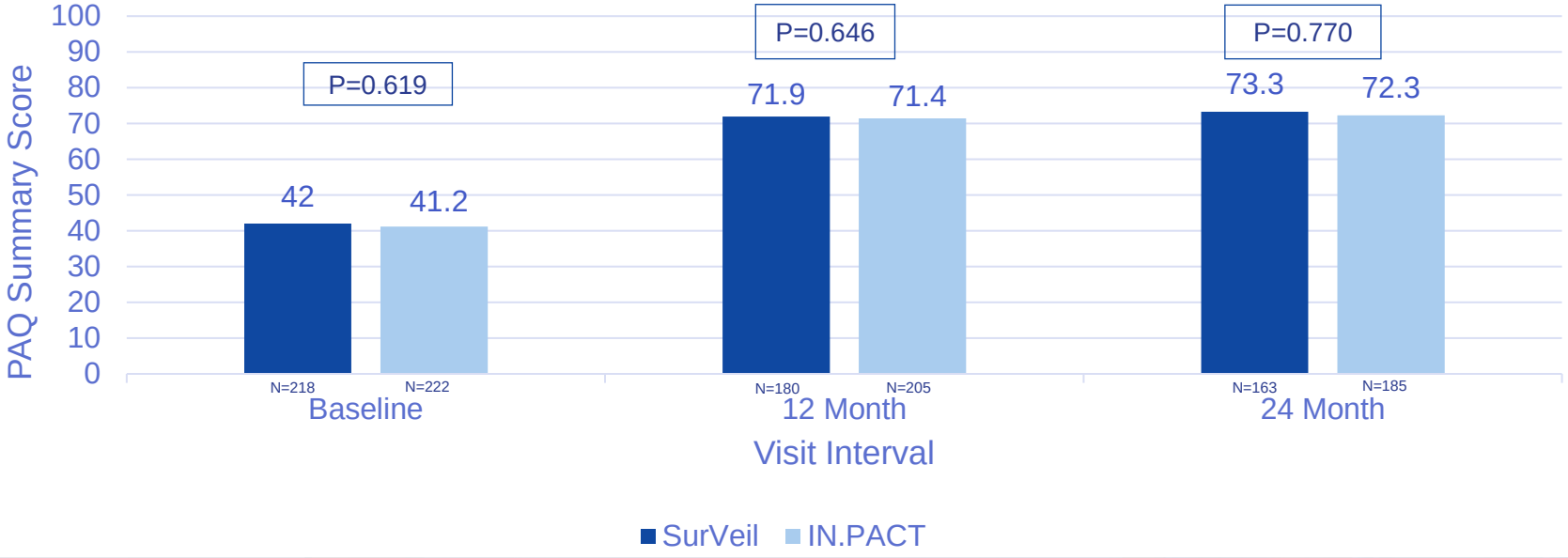
6 Minute Walk Test (6MWT) Walking Distance

Sustained improvement



Peripheral Artery Questionnaire (PAQ) Summary Score (24 months)

Sustained improvement



Conclusions

- SurVeil™ DCB demonstrated excellent efficacy and safety in a pivotal RCT…24 Month Results

  → sustained durability of safety and efficacy endpoints

  → comparable efficacy and safety at substantially lower dose

- SurVeil DCB is non-inferior to market leading IN.PACT® Admiral® DCB