

The logo for LINC (Lipid and Inflammation in Cardiovascular Disease) is located in the top left corner. It features the letters 'LINC' in a white, sans-serif font. To the right of the text is a stylized graphic consisting of two overlapping, curved shapes in red and orange, resembling a flame or a dynamic motion, set against a dark blue background with a large, abstract brushstroke.

Safety & Effectiveness of the Stellarex DCB with Low Dose Paclitaxel: ILLUMENATE Pivotal Trial Four Year Results

Sean P. Lyden MD

Chairman, Vascular Surgery

Cleveland Clinic Foundation

Cleveland, Ohio

On Behalf of the P. Krishnan, MD & the Pivotal Investigators

Disclosure

Speaker name: Sean P. Lyden, MD

I have the following potential conflicts of interest to report:

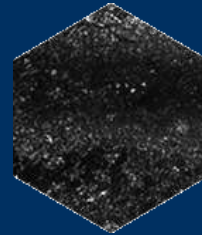
- Consulting: PQ Bypass, Intact Vascular, Philips, Medtronic
Boston Scientific, Endologix, Shockwave, VIVA Physicians
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)

- I do not have any potential conflict of interest

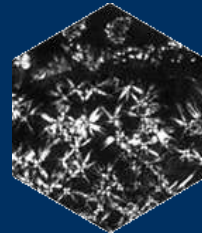
Stellarex Coating: Designed to maximize efficiency of Ptx delivery & clinical performance

DCB design goals

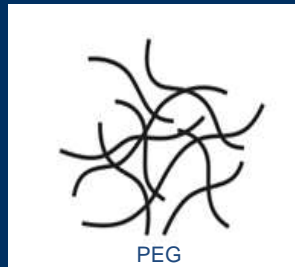
- Limited drug dose
- Limited drug loss
- High drug transfer
- High deliverability
- Clinical performance



AMORPHOUS
PACLITAXEL



CRYSTALLINE PACLITAXEL



PEG

- Prompt availability
- Optimized tissue residency with anti-proliferative effect

- More durability during handling, tracking, inflation
- Dissolves slowly to protect paclitaxel from loss prior to balloon inflation at target site
- Aids in keeping dose level low

1. Mark, J. et al. Physical Properties of Polymers – Cambridge University Press 3rd edition, 2004

2. Data on file at Philips

Stellarex Clinical Program

- Stellarex data analyses have confirmed its efficacy and safety: ILLUMENATE trials met their Primary Safety/Efficacy Endpoints
- Over 2300 patients treated with Stellarex in ATK DCB trials with independent CEC for AE adjudications

Trial	Type	ATK/ BTK	Enrollment	Sites	Region	Status
ILLUMENATE FIH	First in Man	ATK	80	3	Europe	Closed
ILLUMENATE PK	Pharmacokinetic	ATK	25	2	Europe	Closed
ILLUMENATE EU RCT	Pivotal	ATK	328	18	Europe	Follow Up
ILLUMENATE Pivotal	Pivotal	ATK	300	43	US/Europe	Follow Up
ILLUMENATE Global	Post Market	ATK	371	37	Europe, AUS, NZ	Follow Up
ILLUMENATE Global-ISR	Labeling Expansion	ATK	129	26	Europe, AUS, NZ	Follow Up
SAVER	Real World Evidence	ATK/BTK	~1700	42	Europe	Enrolling
ILLUMENATE BTK PM	Post Market	BTK	17/75	9	Europe	Enrolling
ILLUMENATE BTK IDE	Label expansion	BTK	53/354	17	US/Europe	Enrolling

ILLUMENATE Pivotal Study Design

Circulation



Stellarex Drug-Coated Balloon for Treatment of Femoropopliteal Disease: Twelve-Month Outcomes From the Randomized ILLUMENATE Pivotal and Pharmacokinetic Studies
 Prakash Krishnan, Peter Faries, Khusrow Niazi, Ash Jain, Ravish Sachar, William B. Bachinsky, Joseph Cardenas, Martin Werner, Marianne Brodmann, J. A. Mustapha, Carlos Mena-Hurtado, Michael R. Jaff, Andrew H. Holden and Sean P. Lyden

Circulation. 2017;136:1102-1113; originally published online July 20, 2017;
 doi: 10.1161/CIRCULATIONAHA.117.028893

Circulation is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
 Copyright © 2017 American Heart Association, Inc. All rights reserved.
 Print ISSN: 0009-7322. Online ISSN: 1524-4539

12-Month primary Endpoints Met and Published

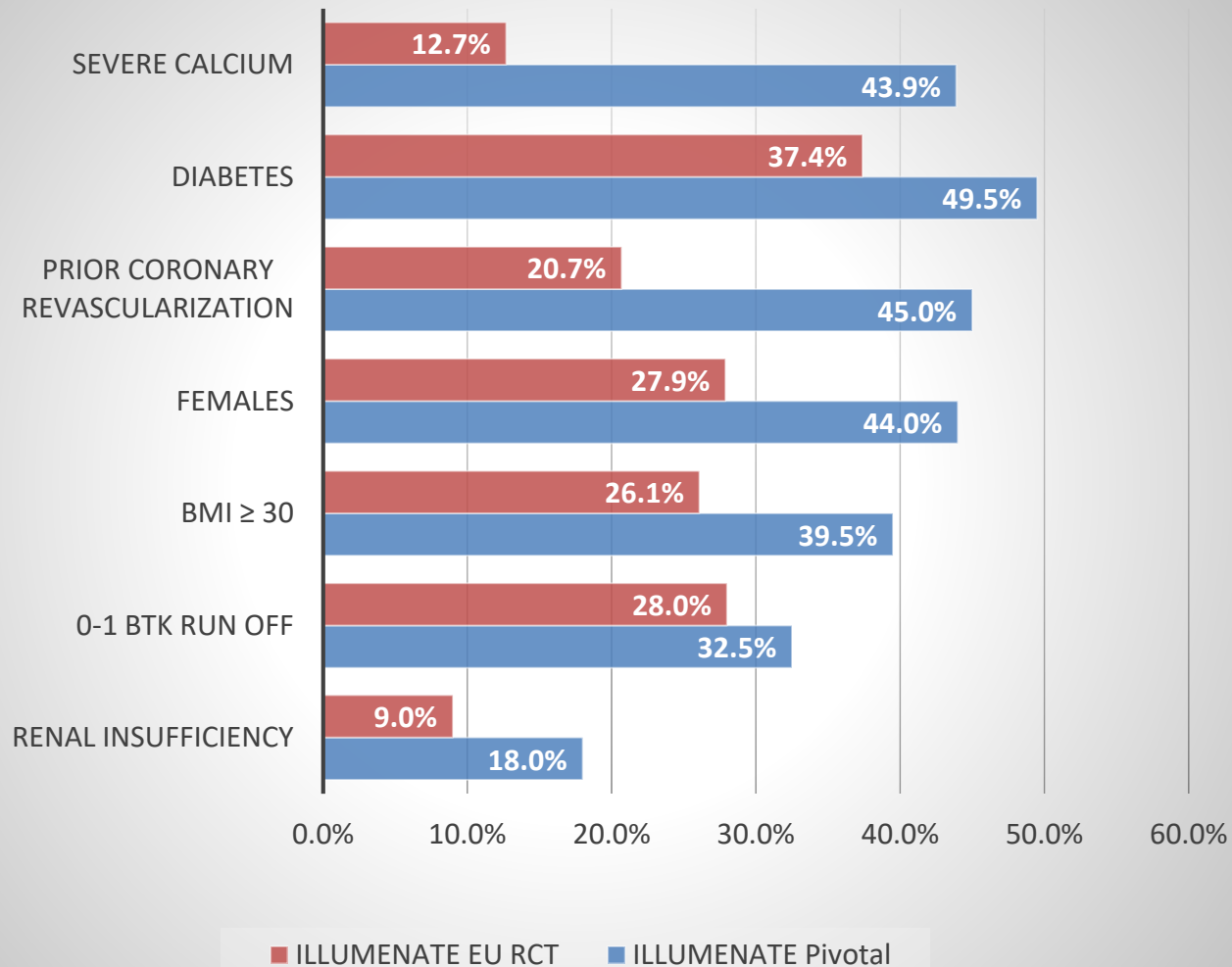
Objective: Demonstrate safety and effectiveness of the Stellarex DCB vs. standard PTA for treatment of arterial disease in the SFA and/or popliteal arteries

N Patients	300
Multicenter (N sites)	43 (US & EU)
Enrollment	Dec 2012 – Apr 2015
Follow Up	5 Years (through PAS)
Randomization	2:1
Pre-dilatation	Mandatory
Duplex Core-lab	✓
Angiographic Core-lab	✓
External Monitoring with 100% SD Verification	✓
Clinical Event Committee	✓
Data Safety Monitoring	✓

Baseline Characteristics

Patient Characteristics	Stellarex	PTA	p
Age (years)	68.3 ± 10.3 (200)	69.8 ± 9.8 (100)	0.225
Female	44% (88/200)	36% (36/100)	0.185
Rutherford Clinical Category			0.735
2	31.5% (63/200)	35.0% (35/100)	
3	64.5% (129/200)	60.0% (60/100)	
4	4.0% (8/200)	5.0% (5/100)	
ABI	0.75 ± 0.21 (193)	0.76 ± 0.2 (100)	0.508
Hypertension	93.5% (187/200)	94.0% (94/100)	0.867
Hyperlipidemia	88.0% (176/200)	90.0% (90/100)	0.606
Previous or Current Smoker	84.0% (168/200)	75.0% (75/100)	0.061
Diabetes	49.5% (99/200)	52.0% (52/100)	0.683
Renal Insufficiency	18.0% (36/200)	17.0% (17/100)	0.830
Patient Characteristics	Stellarex	PTA	p
Lesion Length (cm)	8.0 ± 4.5 (199)	8.9 ± 4.6 (100)	0.105
Total Occlusion	19.0% (38/200)	18.0% (18/100)	0.834
Restenotic	9.5% (19/200)	18.0% (18/100)	0.035
Severe Calcification	43.9% (87/198)	43.0% (43/100)	0.877
Baseline Diameter Stenosis (%)	73.9 (200)	74.8 (100)	0.673

Higher Patient Complexities in ILLUMENATE Pivotal



No Differences in All-Cause Mortality through 4 Years including Vital Status

4 Year Vital Status Compliance Update

Reporting Period	Vital Status Compliance
December 2019	95% (284/300)

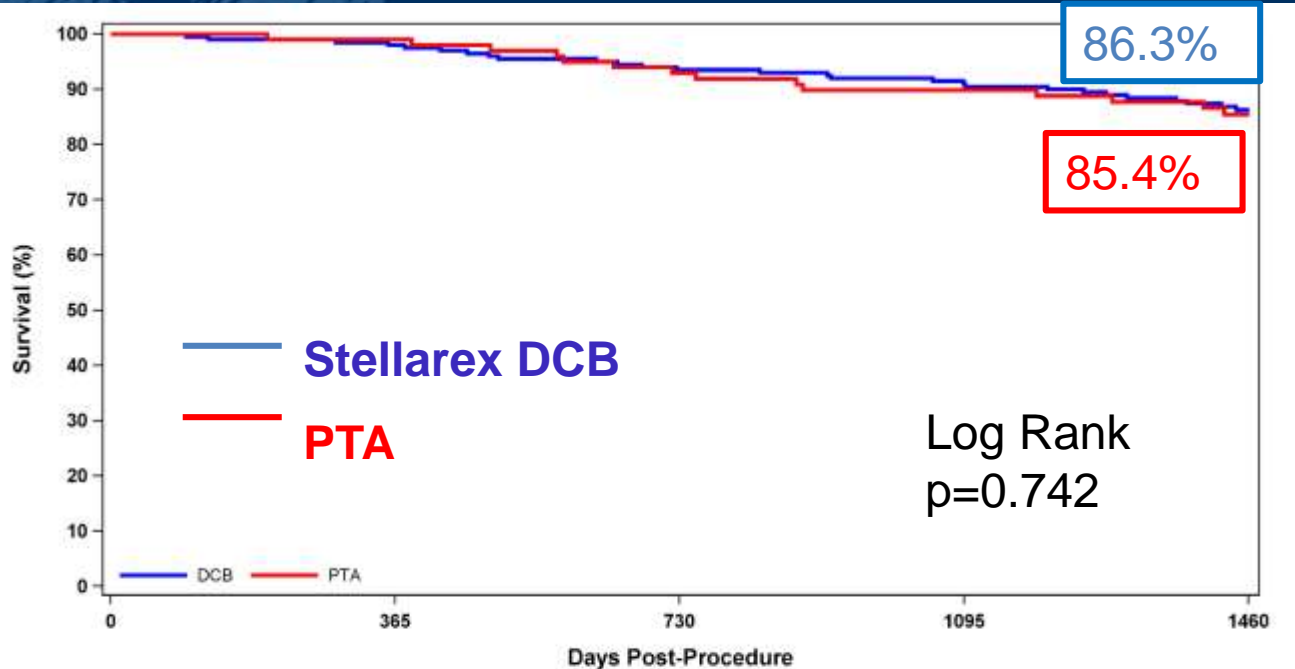
ILLUMENATE Pivotal Cumulative Mortality (Exact Rates): Post hoc analysis

All Cause Mortality	DCB	PTA	p Value
12 months	2.5% (5/200)	2.0% (2/100)	1.000
24 months	6.5% (13/200)	8.1% (8/99)	0.615
36 months	9.5% (19/199)	10.4% (10/96)	0.814
48 months	15.6% (30/192)	15.2% (14/92)	0.929

Survival through 4 years (KM Estimate)

ILLUMENATE Pivotal: Post hoc analysis

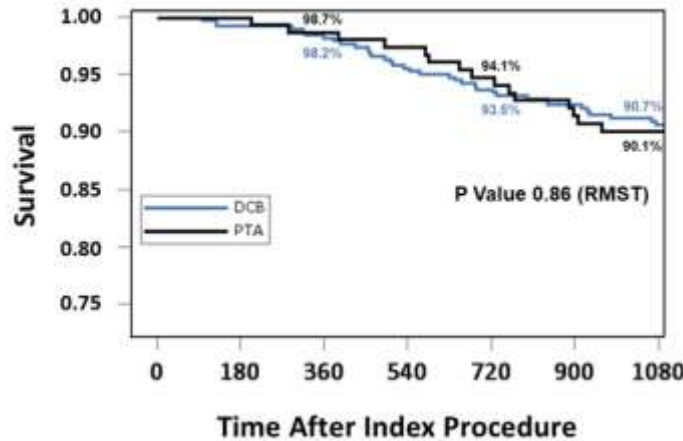
Overlapping survival curves for Stellarex DCB and PTA through 4 years (ITT)



	0	365	730	1095	1460
DCB					
At Risk	200	196	186	181	128
Event	0	4	13	18	27
Survival (%)	100.0	98.0	93.5	91.0	86.3
95% CI (%)	—	[94.8, 99.2]	[89.1, 96.2]	[86.1, 94.2]	[80.6, 90.4]
PTA					
At Risk	100	99	91	85	62
Event	0	1	7	10	14
Survival (%)	100.0	99.0	92.9	89.8	85.4
95% CI (%)	—	[93.1, 99.9]	[85.8, 96.6]	[81.9, 94.4]	[76.6, 91.1]

4 Year Survival Consistent with Pooled Stellarex 3 Year Data

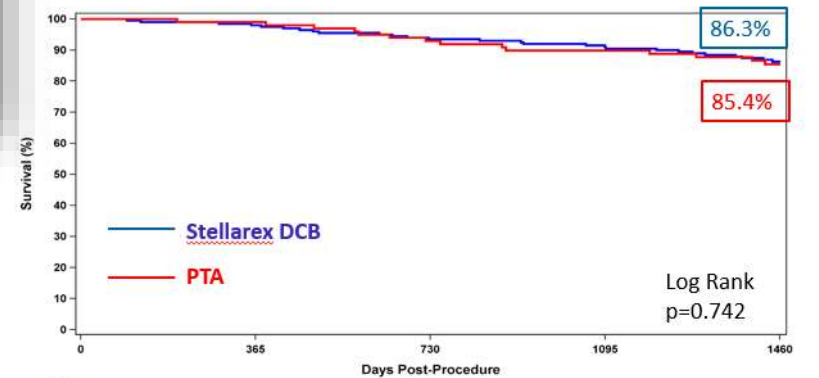
Pooled RCT's: Survival through Three Years (KM Estimate)



Gray et al 2019

Survival rates between Stellarex and control are consistently overlapping over time

Survival through 4 years (KM Estimate)

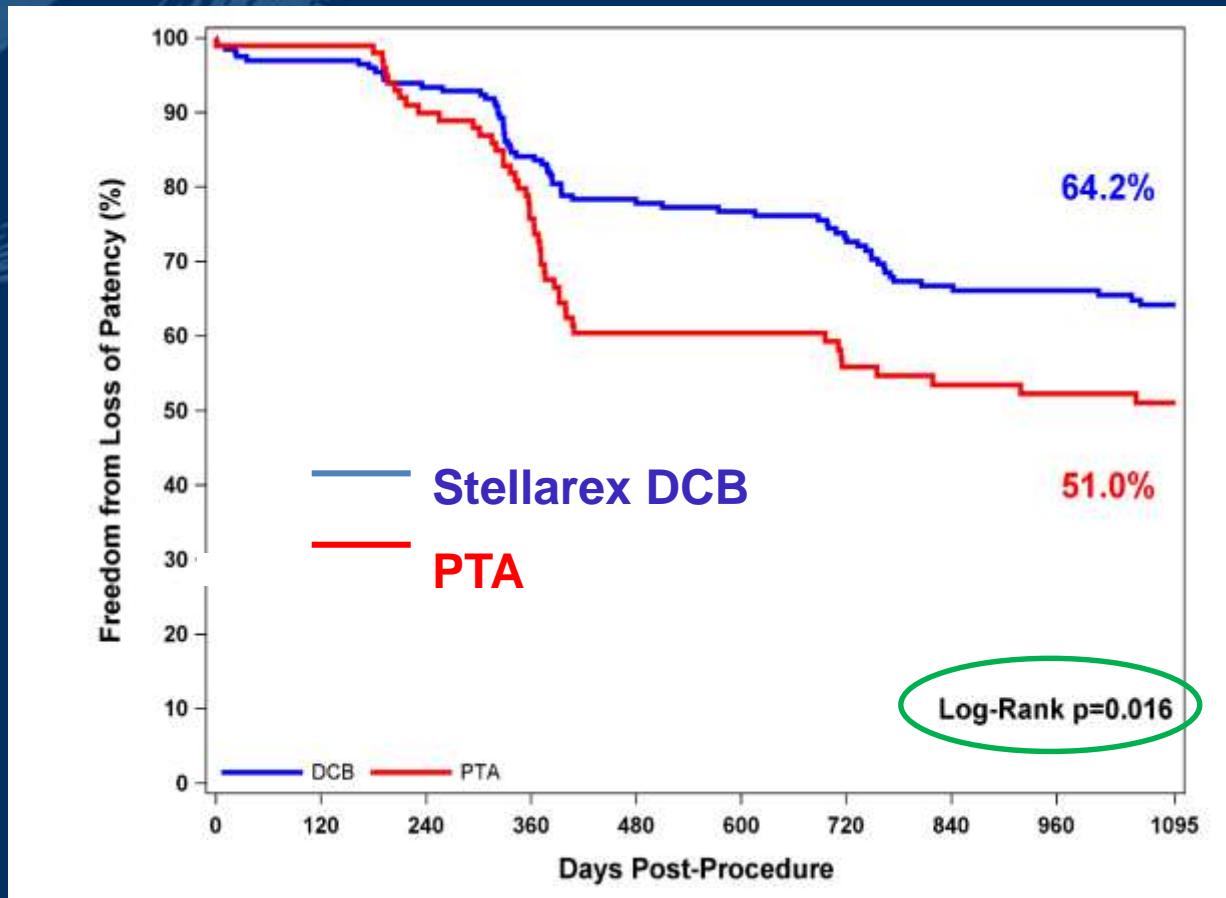


DCB				
At Risk 200	196	186	181	128
Event 0	4	13	18	27
Survival (%)@00.0	98.0	93.5	91.0	86.3
95% CI (%)	[94.8, 99.2]	[89.1, 96.2]	[86.1, 94.2]	[80.6, 90.4]
PTA				
At Risk 100	99	91	85	62
Event 0	1	7	10	14
Survival (%)@00.0	99.0	92.9	89.8	85.4
95% CI (%)	[93.1, 99.0]	[85.8, 96.6]	[81.9, 94.4]	[76.8, 91.1]

Primary Patency Through 3 Years

Significant difference in patency between *Stellarex DCB* and *PTA*

Primary patency defined as the absence of target lesion restenosis determined by DUS and freedom from CD-TLR during an office visit.



Four Year Outcomes

Key Endpoints @ 4 Years*	Stellarex	PTA	p Value
All Cause Mortality (Post Hoc Data)	15.6% (30/192)	15.2% (14/92)	0.929
Cardiovascular Mortality	5.6% (9/161)	8.3% (7/84)	0.409
Composite Safety Endpoint**	71.2% (111/156)	65.9% (54/82)	0.399
Target Limb Major Amputation	0.7% (1/153)	0.0% (0/77)	1.000
CD-TLR	28.2% (44/156)	34.1% (28/82)	0.343

* 4 Year follow up determined by phone call

** Defined as composite of freedom from device and procedure-related death through 30 days post-procedure and freedom from target limb major amputation and clinically-driven target lesion revascularization (CD-TLR) through 48 months post-procedure.

Conclusions

- Survival curves of Stellarex DCB and PTA continue to overlap through 4 years with similar all-cause mortality rates
- Stellarex DCB has high safety profile and sustained treatment effect through 4 years
- 4 year data demonstrates clinically relevant difference with lower CD-TLR rate in Stellarex DCB group compared with PTA
- Stellarex is the only low-dose DCB supported by head-to-head 4 year randomized data with favorable safety and efficacy within an extensive complex patient cohort
- ILLUMENATE Pivotal 4 year data builds on the robust, consistent long-term data of the Stellarex program

The logo for LINC (Lipid and Inflammation in Cardiovascular Disease) is located in the top left corner. It features the letters 'LINC' in a white, sans-serif font. To the right of the text is a stylized graphic consisting of two overlapping, curved shapes in red and orange, resembling a flame or a dynamic motion.

Safety & Effectiveness of the Stellarex DCB with Low Dose Paclitaxel: ILLUMENATE Pivotal Trial Four Year Results

Sean P. Lyden MD

Chairman, Vascular Surgery

Cleveland Clinic Foundation

Cleveland, Ohio

On Behalf of the P. Krishnan, MD & the Pivotal Investigators