

The logo for LINC (Lancaster Interdisciplinary Network for Clinical Research) is located in the top left corner. It features the letters 'LINC' in a white, sans-serif font. To the left of the text is a stylized graphic consisting of three overlapping, curved lines in shades of red, orange, and yellow, set against a dark blue background.

LINC

# SELUTION SLR™ in Clinical Practice: Angio Case Examples

Ulrich Beschorner

# Disclosure

Speaker name:

Ulrich Beschorner

I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)
  
- I do not have any potential conflict of interest

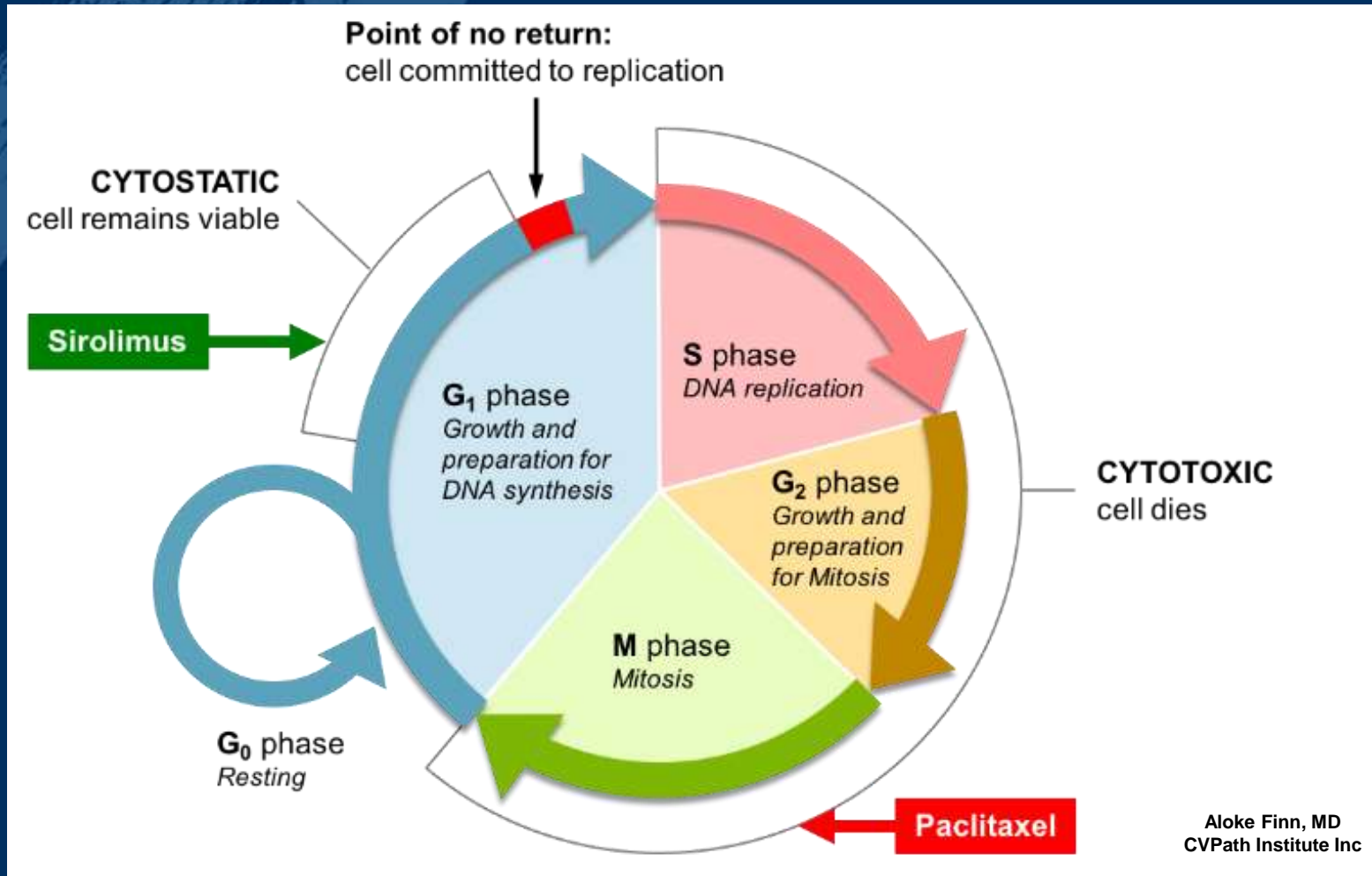
# Vascular Remodeling after PTA

	POBA	ATHERECTOMY	PACLITAXEL COATED BALLOON	LIMUS COATED BALLOON
RESTENOSIS	+	++	+/-	??
LATE LUMEN LOSS	+	++	+/-	??
PATTERN OF RESTENOSIS	focal and diffuse	diffuse	focal	??
DILATATION / ANEURYSMS	-	+/-	+	??

# Vascular Remodeling after PTA

	POBA	ATHERECTOMY	PACLITAXEL COATED BALLOON	LIMUS COATED BALLOON
RESTENOSIS	+	++	+/-	+/--
LATE LUMEN LOSS	+	++	+/-	+/--
PATTERN OF RESTENOSIS	diffuse	diffuse	focal	focal
DILATATION / ANEURYSMS	-	+/-	+	-

# Why do we expect a morphological difference to Paclitaxel-PTA after Sirolimus-PTA?



# Why do we expect a morphological difference to Paclitaxel-PTA after Sirolimus-PTA?

ATTRIBUTE	SIROLIMUS (OR ANALOGS)	PACLITAXEL (PTX)
MODE OF ACTION	CYTOSTATIC	CYTOTOXIC
MARGIN OF SAFETY	10'000 FOLD	100 FOLD
THERAPEUTIC RANGE	WIDE	NARROW
ANTI-RESTENOTIC	YES Lower Late Lumen Loss	YES
ANTI-INFLAMMATORY	YES	NO
TISSUE ABSORPTION	SLOW	FAST
TISSUE RETENTION	SHORT	LONG

# Typical Example of Vascular Remodeling after PTX-DCB

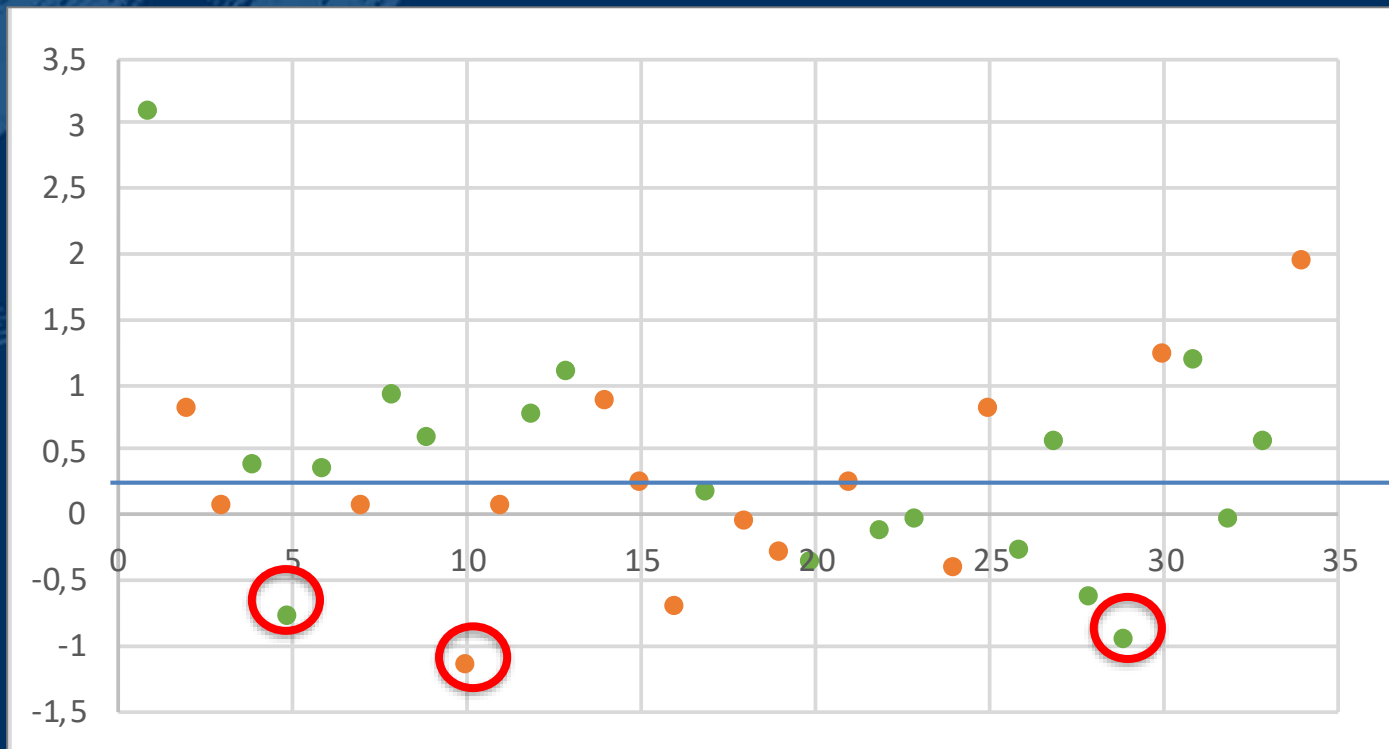
SFA-CTO recanalization with PTX-DCB (Inpact) 2011  
still patent 2016

Focal dilatation



# SELUTION SFA Primary Endpoint

LLL at 6M (N=34)



● Calcified Target Lesion (CoreLab assessed by 360 score)

\*Late Lumen Loss presented as median value

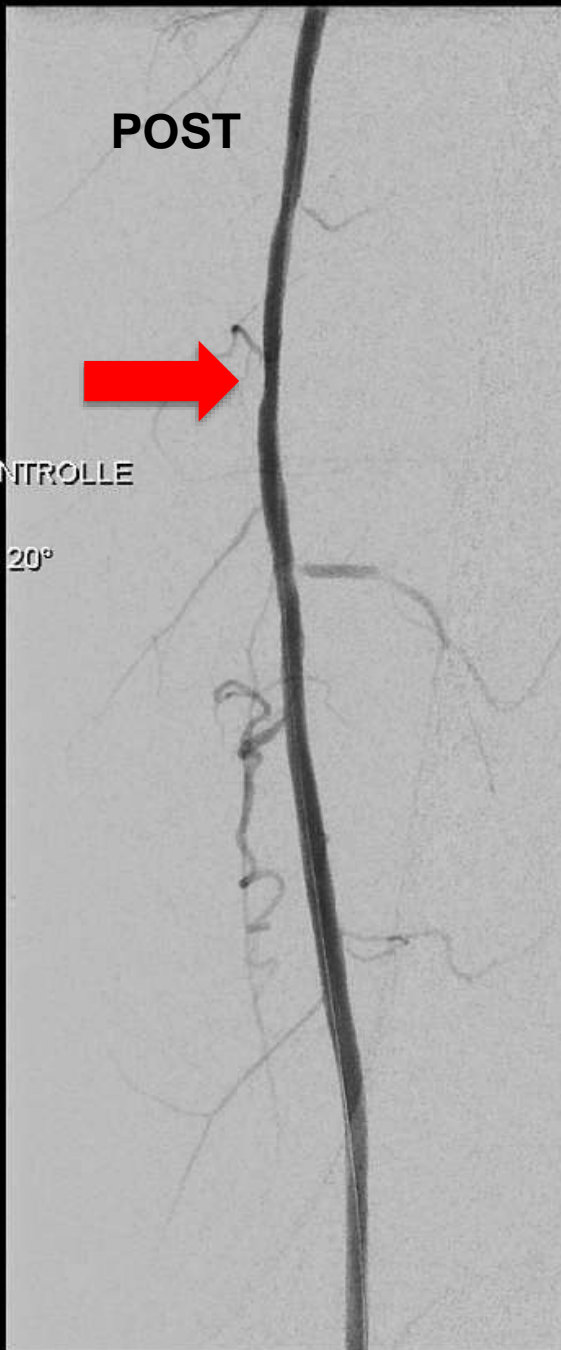


POST

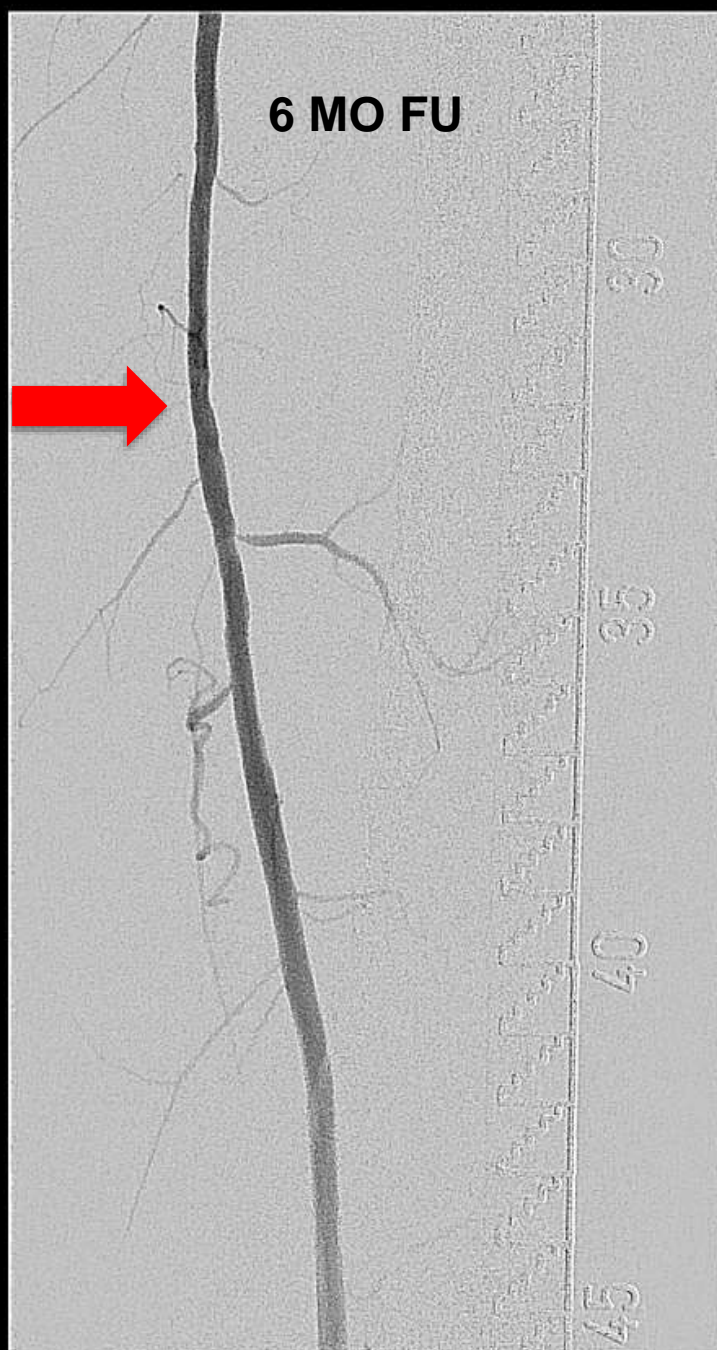


ABSCHLUSSKONTROLLE

LINKS RAO 20°

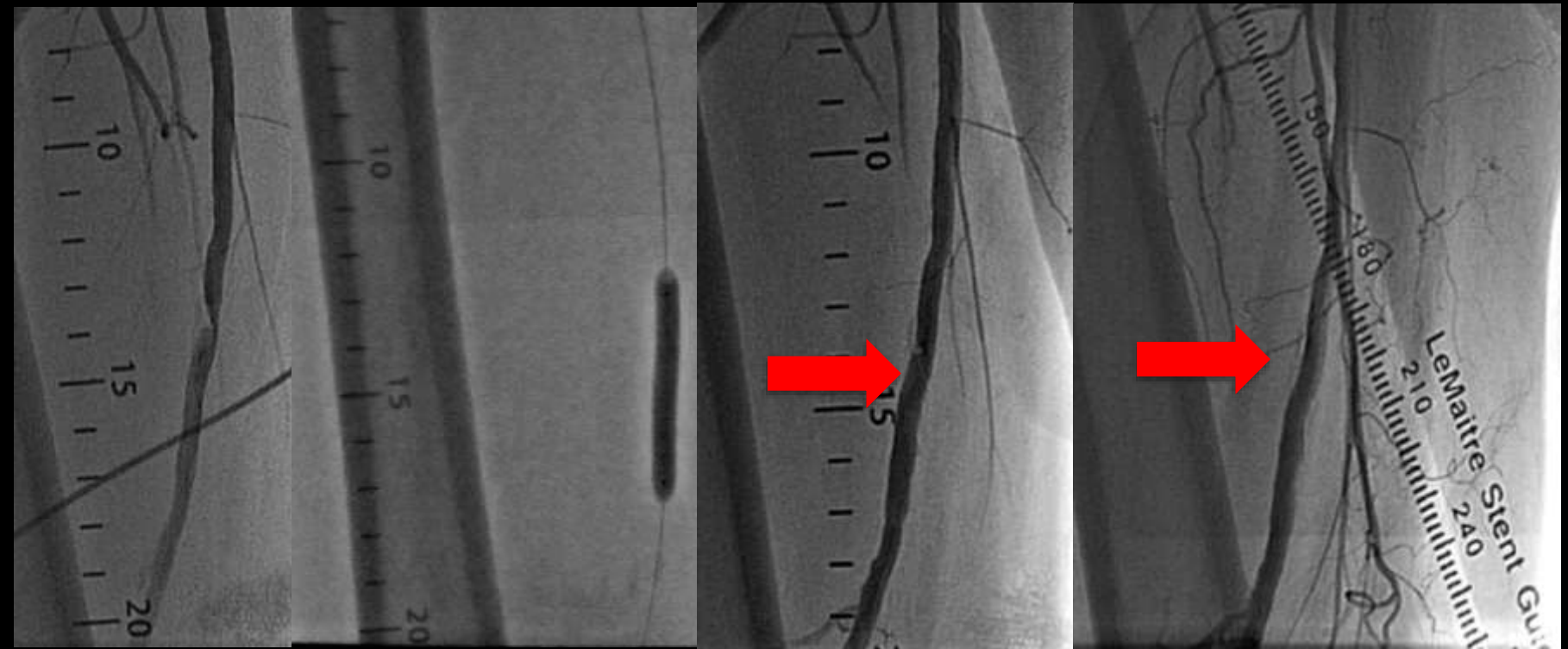


6 MO FU



LINKS RAO 20°  
6 mo FU

# Positive Remodeling



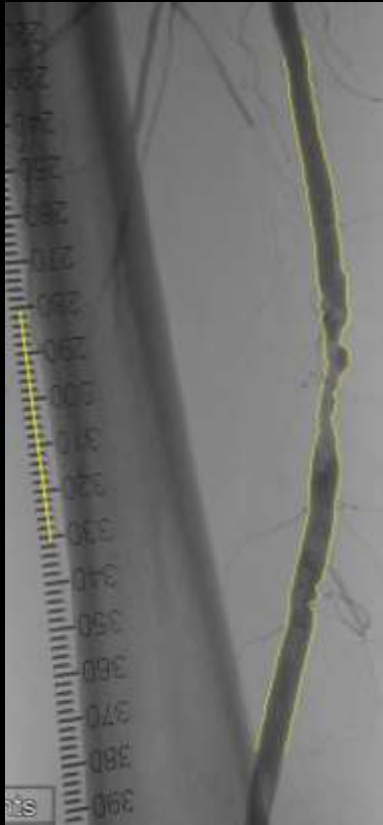
PRE

Solution  
PTA

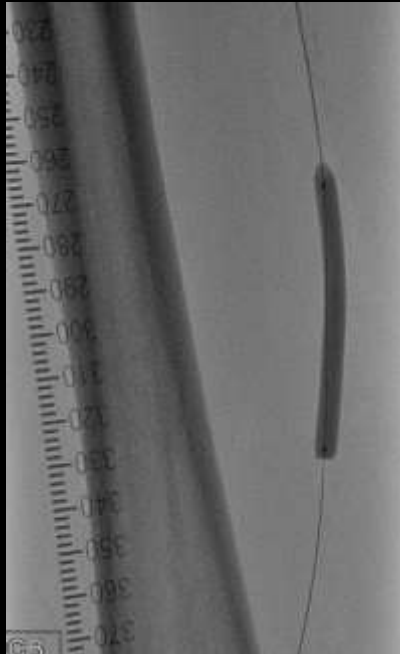
POST

6 MO

# Positive Remodeling



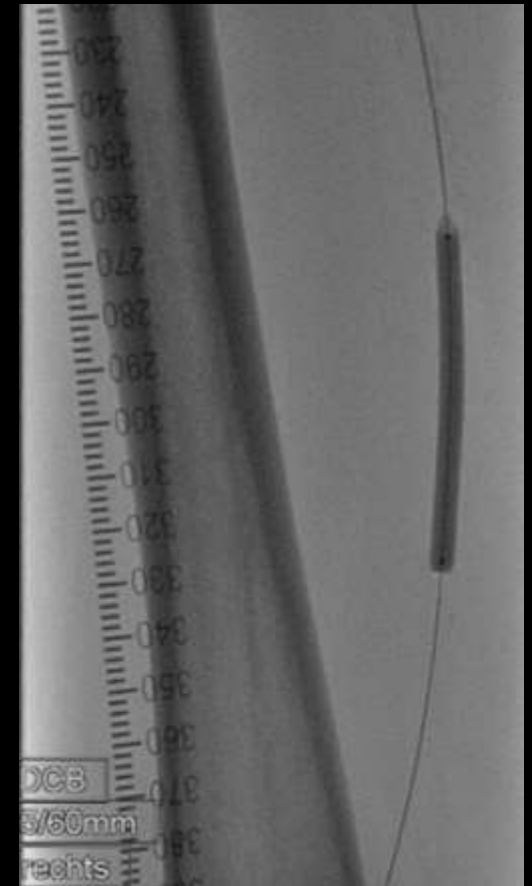
PRE



Solution  
PTA 1



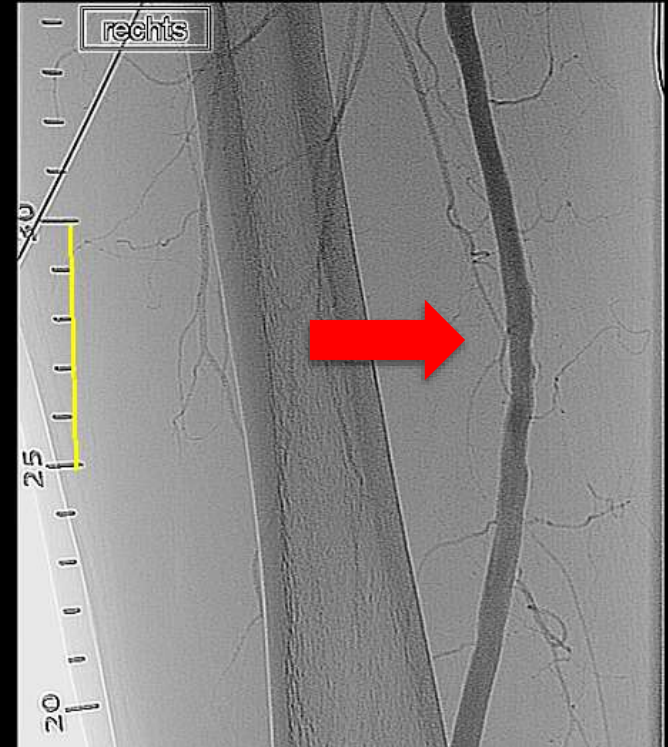
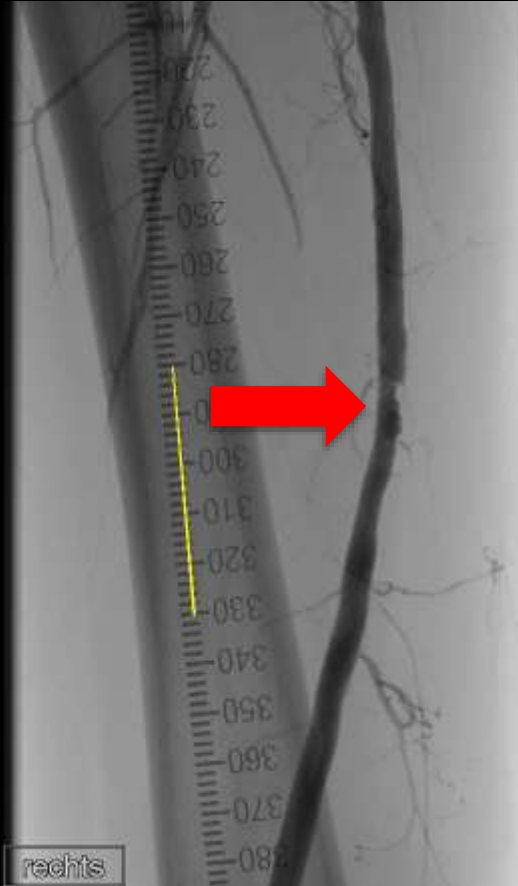
POST  
FIRST  
PTA



Solution  
PTA 2

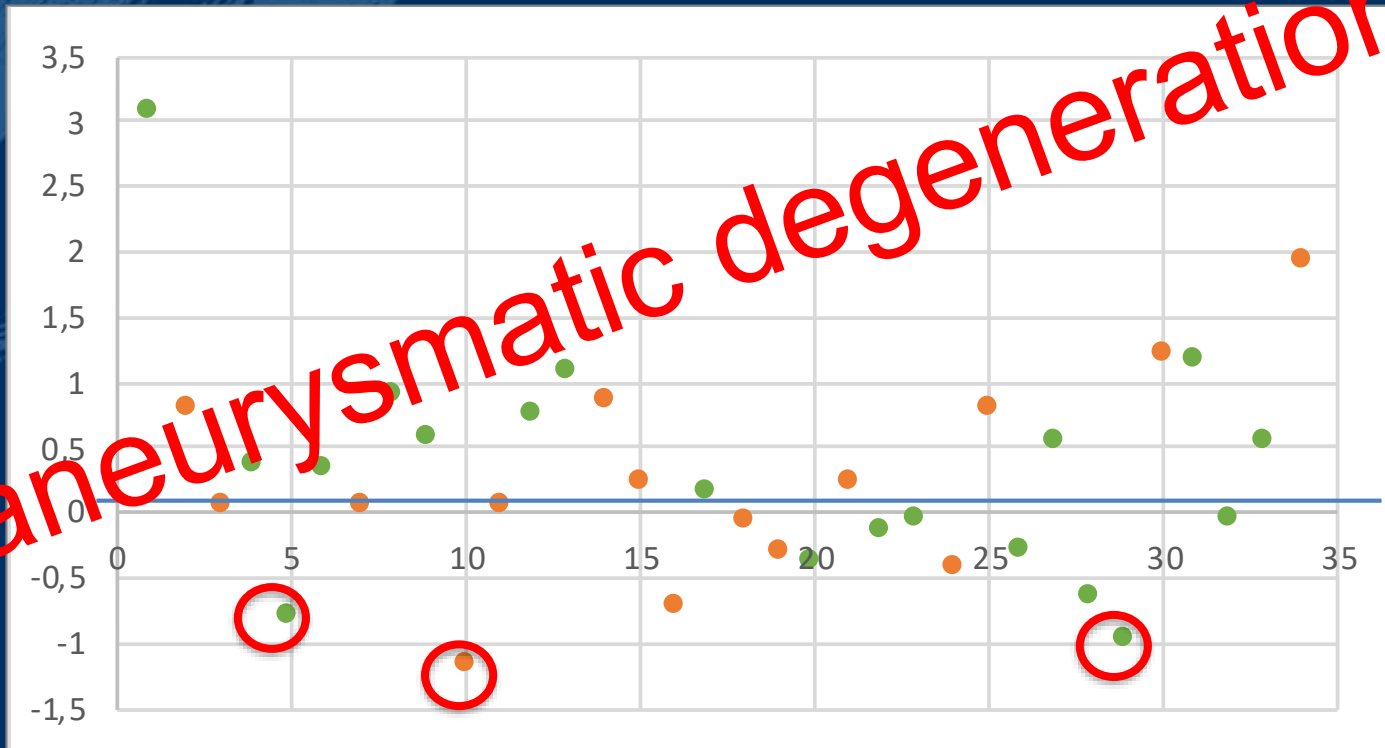
# Positive Remodeling

03-007 right Solution  
13.10.2017  
09:44:22  
RAO 25°  
KAUD 0°  
FD 31 cm



# SELUCTION SFA Primary Endpoint

LLL at 6M (N=34)



No aneurysmatic degeneration!

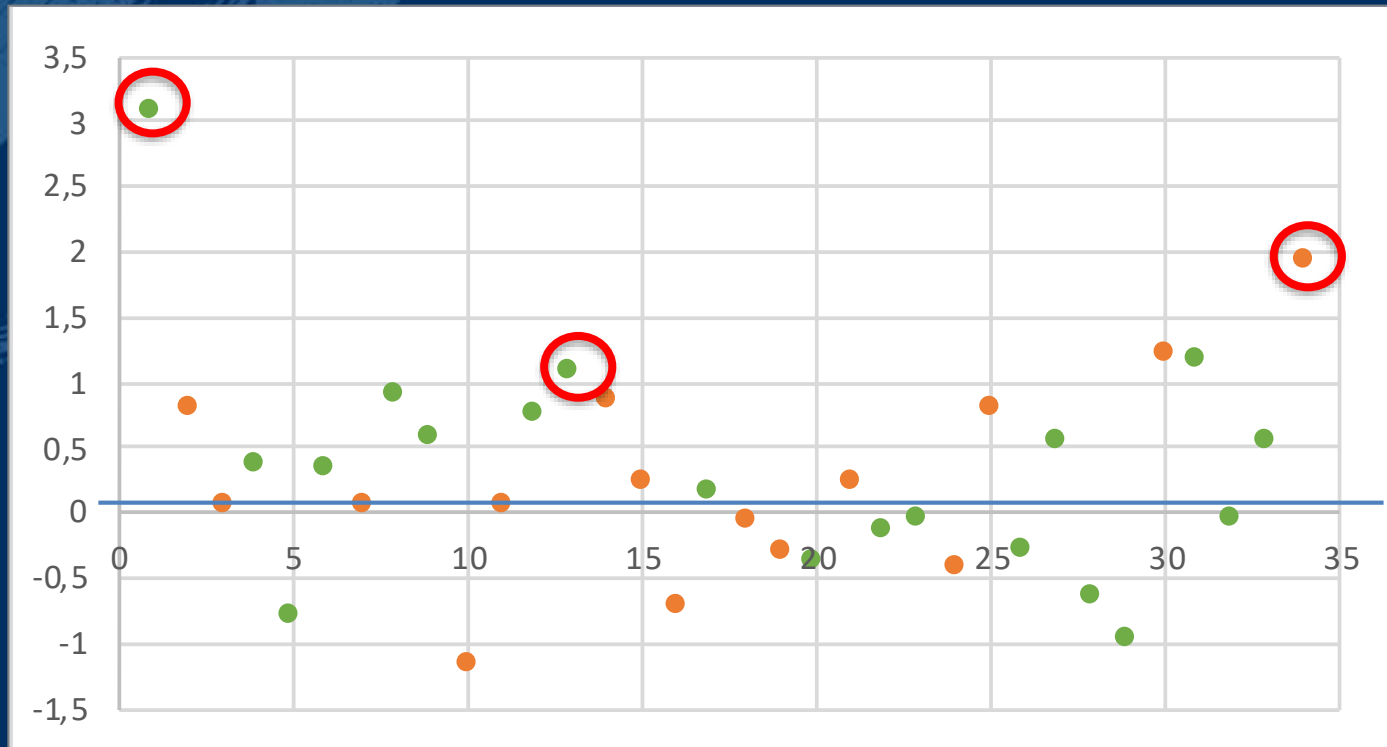
0.19 mm\*

• Calcified Target Lesion (CoreLab assessed by 360 score)

\*Late Lumen Loss presented as median value

# SELUTION SFA Primary Endpoint

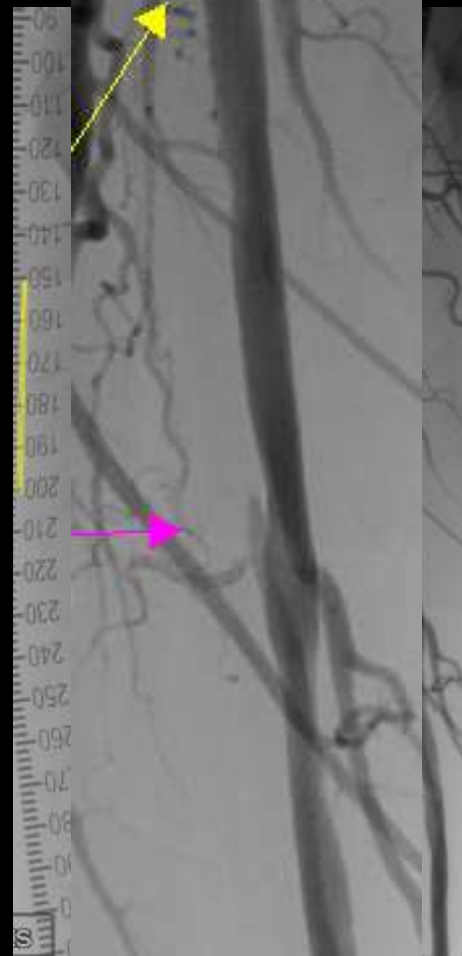
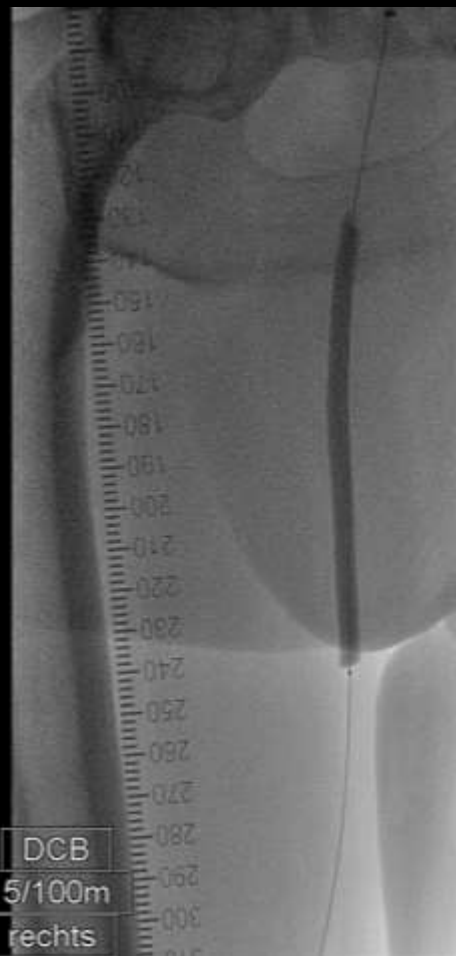
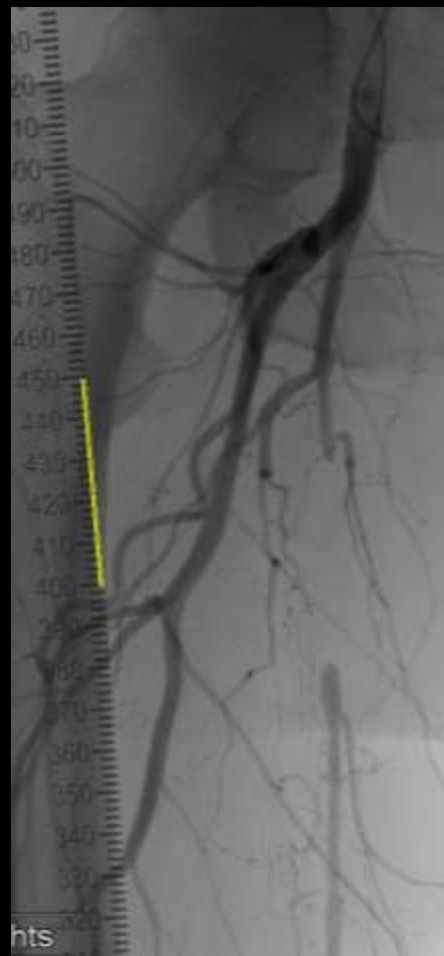
LLL at 6M (N=34)



● Calcified Target Lesion (CoreLab assessed by 360 score)

\*Late Lumen Loss presented as median value

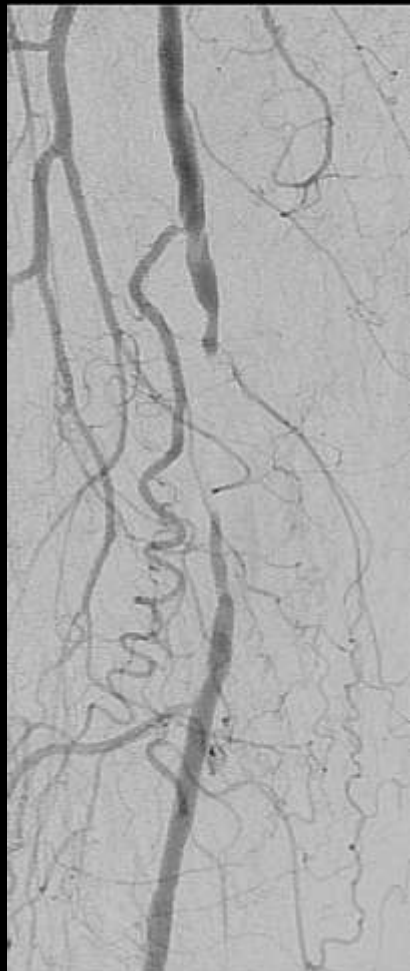
# Restenc



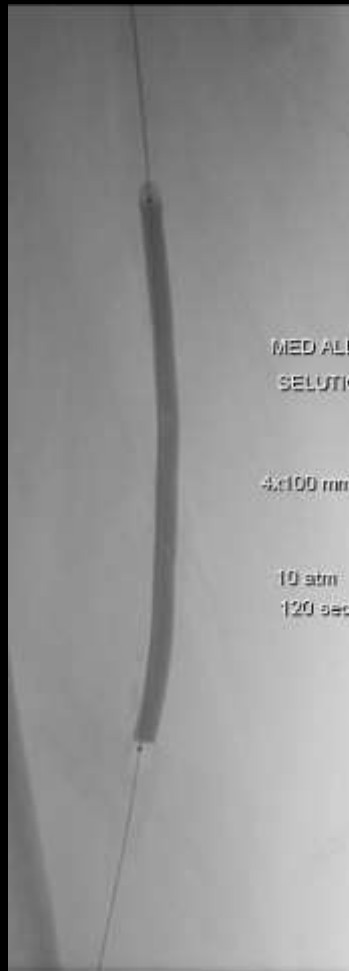
PRE

Selution  
PTA

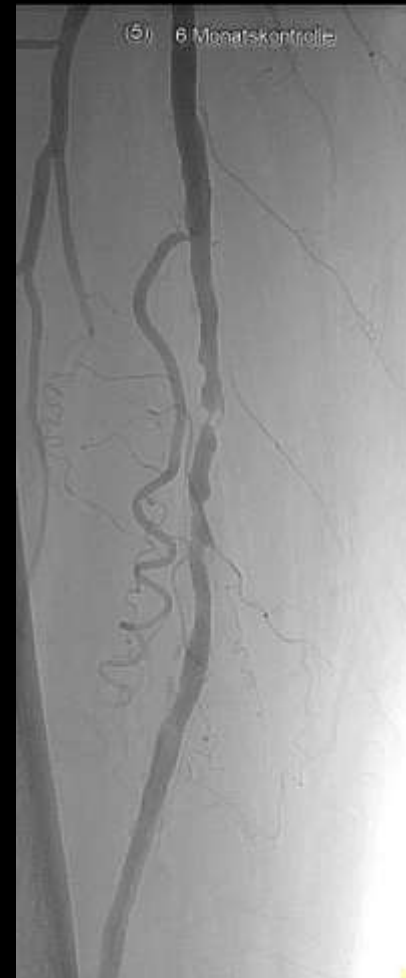
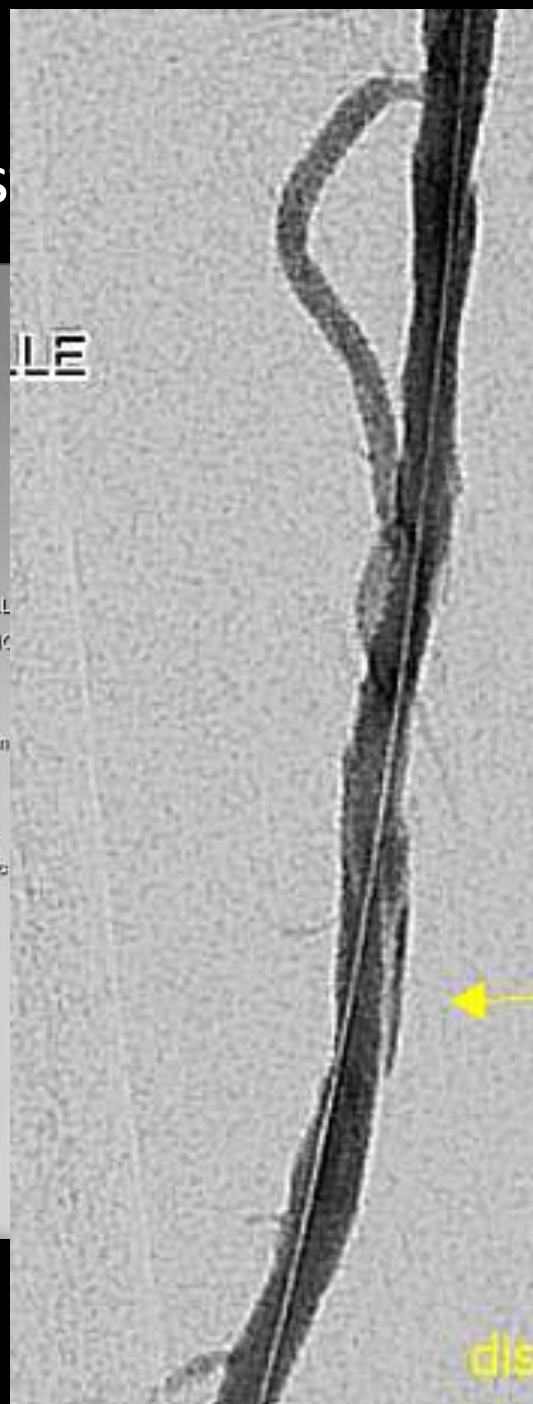
Res



PRE



Solution  
PTA



6 MO



# Restenosis



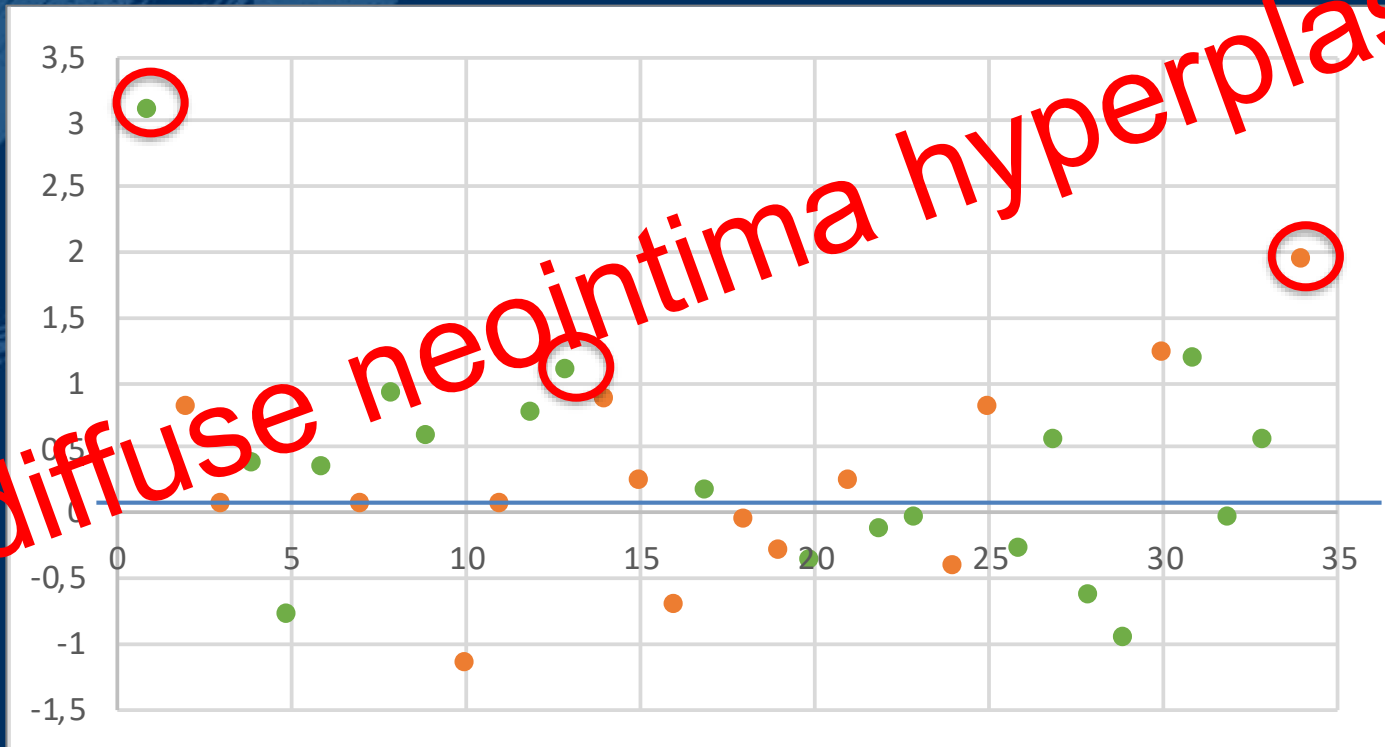
PRE

POST  
 BAILOUT  
 STENT

6 MO,  
 focal ISR

# SELECTION SFA Primary Endpoint

LLL at 6M (N=34)



● Calcified Target Lesion (CoreLab assessed by 360 score)

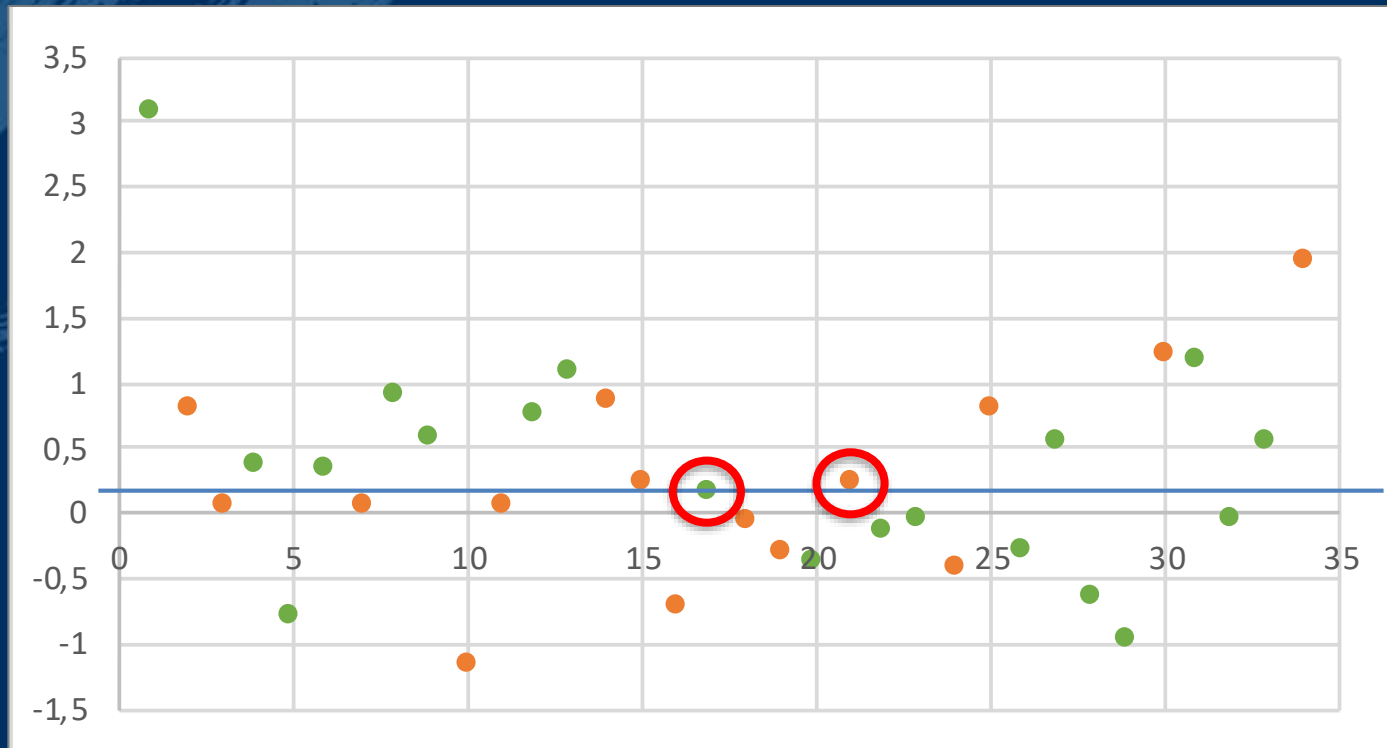
\*Late Lumen Loss presented as median value

0.19 mm\*

No diffuse neointima hyperplasia!

# SELUCTION SFA Primary Endpoint

LLL at 6M (N=34)



0.19 mm\*

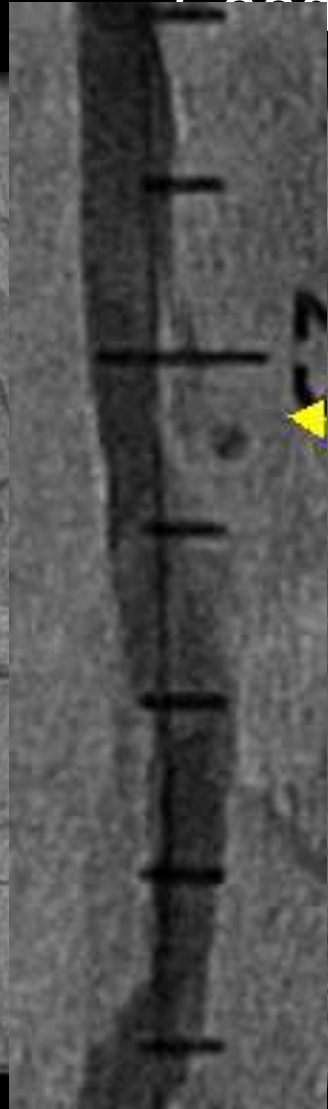
● Calcified Target Lesion (CoreLab assessed by 360 score)

\*Late Lumen Loss presented as median value

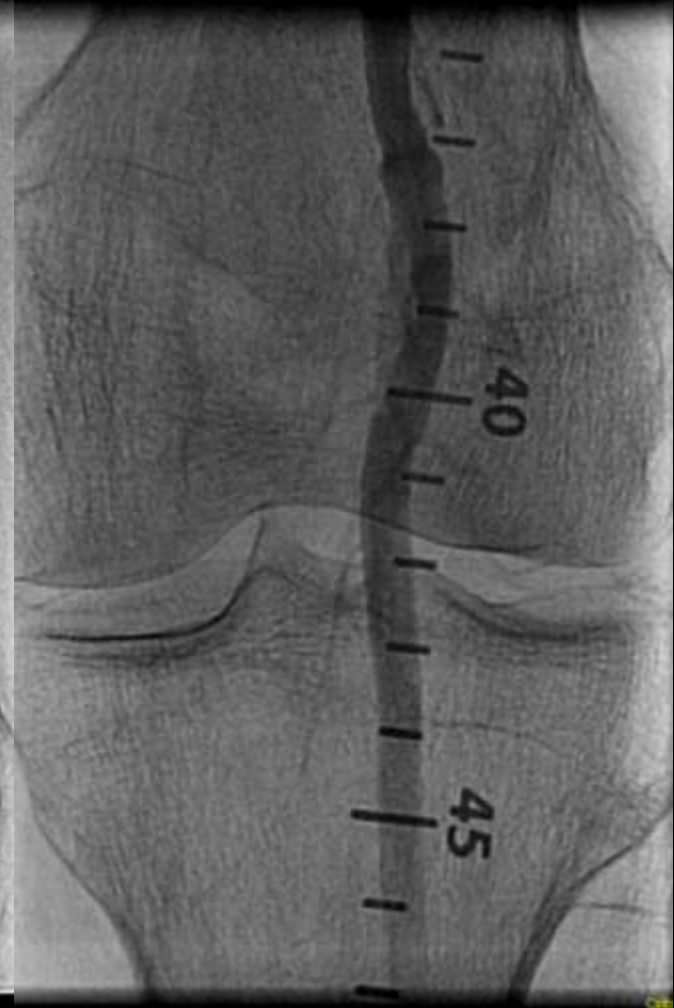
Good result



PRE

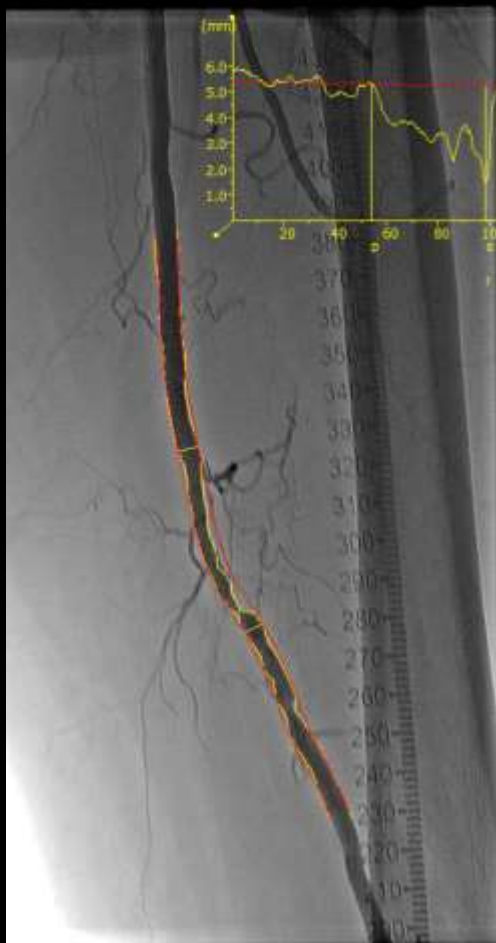


POST

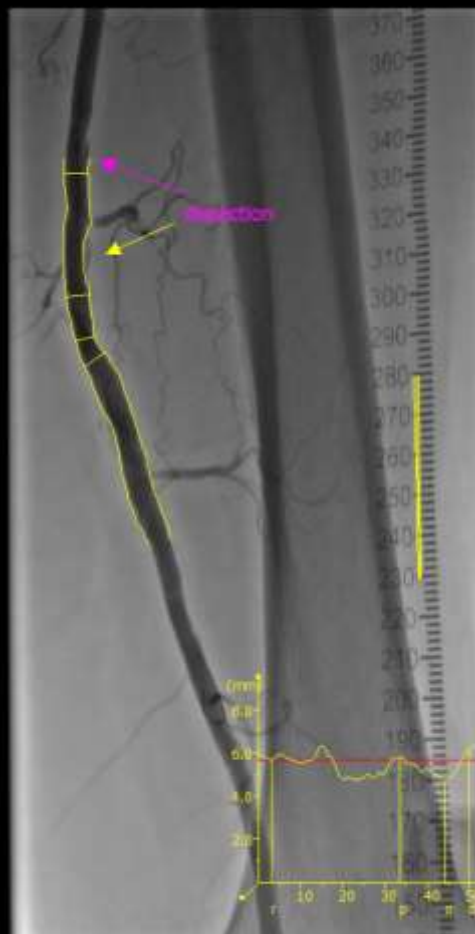


6 MO

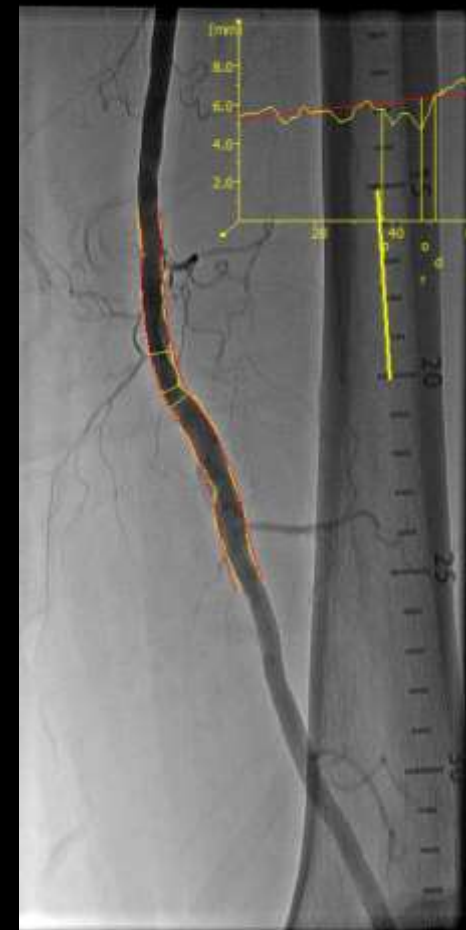
# Good result



PRE



POST



6 MO

# Case Review SELUTION SLR™

## Conclusion

- No evidence of toxic vessel wall damage
- No aneurysmatic vessel degeneration
- No diffuse neointima hyperplasia
- Restenosis as expected in severely dissected segments
- Some cases of ISR
- Overall promising patency, also in rather challenging lesions

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