

***SELUTION SLR – a Sirolimus DEB:  
Use of preclinical studies in  
predicting device safety***

*Aloke Finn*

*CVPath Institute, Inc.*

*Gaithersburg, MD, USA*

# ***Disclosure***

**Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.**

**Employment in industry: No**

**Honorarium:**

Amgen; Abbott Vascular; Biosensors; Boston Scientific; Celonova; Cook Medical; CSI; Lutonix Bard; Sinomed; Terumo Corporation.

**Institutional grant/research support:**

R01 HL141425 Leducq Foundation Grant; 480 Biomedical; 4C Medical; 4Tech; Abbott; Accumedical; Amgen; Biosensors; Boston Scientific; Cardiac Implants; Celonova; Claret; Concept Medical; Cook; CSI; DuNing; Edwards; Emboline; Endotronix; Envision Scientific; Lutonix/Bard; Gateway; Lifetech; Limflo; MedAlliance; Medtronic; Mercator; Merrill; Microport; Microvention; Mitraalign; Mitraassist; NAMSA; Nanova; Neovasc; NIPRO; Novogate; Occulotech; Orbus Neich; Phenox; Profusa; Protembis; Qool; Recor; Senseonics; Shockwave; Sinomed; Spectranetics; Surmodics; Symic; Vesper; W.L. Gore; Xeltis.

**Owner of a healthcare company: No**

**Stockholder of a healthcare company: No**

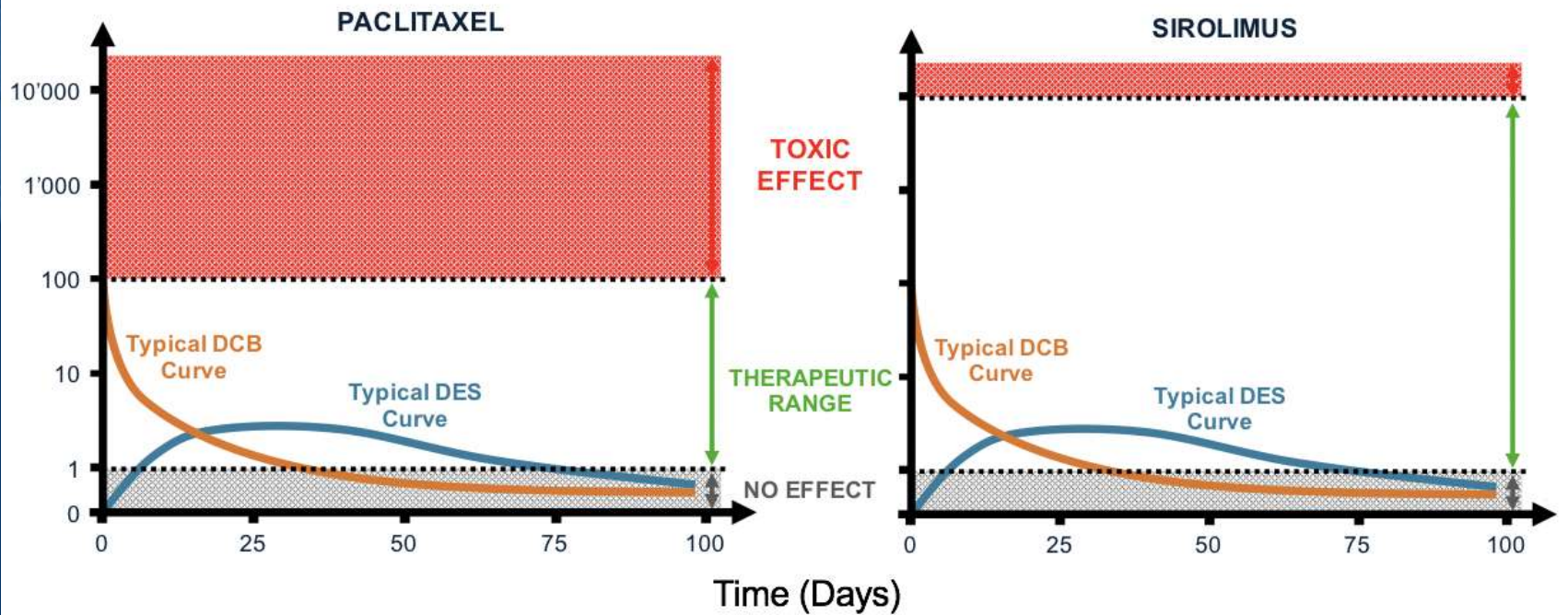
# Drug Coated Balloon Devices (Peripheral artery)

Common anti-restenotic drug for DCB is **Paclitaxel**

Product	Company	Drug	Drug dose ( $\mu\text{g}/\text{mm}^2$ )	Excipient
IN. PACT Admiral	Medtronic, Minneapolis, MN, USA	Paclitaxel	3.5	Urea
Lutonix	C.R. BARD, Murray Hill, NJ, USA	Paclitaxel	2.0	Polysorbate/Sorbitol
Ranger	Boston Scientific, Marlborough, MA, USA	Paclitaxel	2.0	Citrate ester
Stellarex	Philips, Amsterdam, The Netherlands	Paclitaxel	2.0	Polyethylene glycol
SeQuent Please	B. Braun, Melsungen, Germany	Paclitaxel	3.0	Resveratrol
Passeo-18 Lux	Biotronik, Buelach, Switzerland	Paclitaxel	3.0	Butyryl-tri-hexyl citrate
LEGFLOW	Cardionovum GmbH, Bonn, Germany	Paclitaxel	3.0	Shelloic acid
SurVeil	SurModics, Eden Prairie, MN, USA	Paclitaxel	3.2	Proprietary photolink
Lumior	iVascular, Barcelona, Spain	Paclitaxel	3.0	Water reduce ester
<b>SELUTION</b>	<b>Med Alliance, Irvine, CA, USA</b>	<b>Sirolimus</b>	<b>1.0</b>	<b>Cell adherent technology</b>
Magic Touch PTA	Concept Medical, Surat, India	Sirolimus	1.27	Nanolute technology

# Sirolimus Coated Balloon benefits

Arterial Drug Concentration (ug/g)



# Sirolimus Drug Coated Balloons

Sirolimus offers potential benefits over Paclitaxel

Attribute	Sirolimus (or Analogs)	Paclitaxel
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
<b><i>Tissue absorption</i></b>	<b><i>Slow</i></b>	<b><i>Fast</i></b>
<b><i>Tissue retention</i></b>	<b><i>Short</i></b>	<b><i>Long</i></b>

Sirolimus is *drug of choice* for coronary DES supported by solid clinical based evidence.

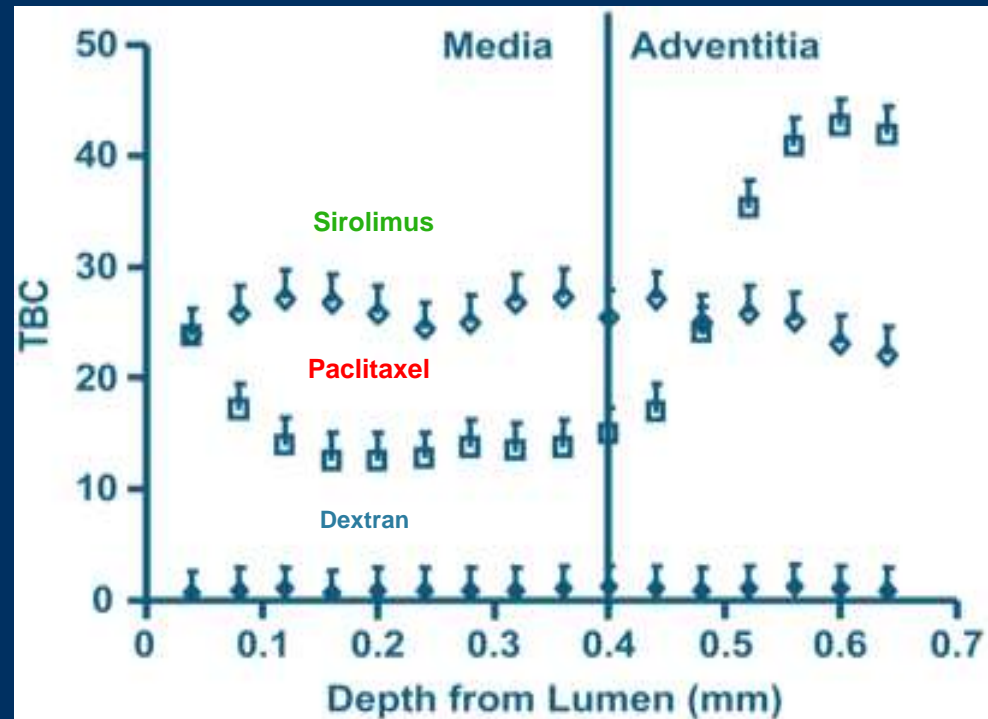
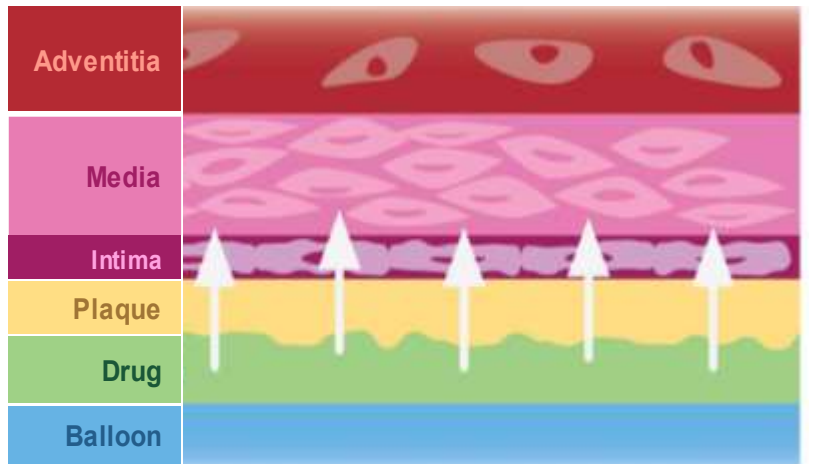
# Absorption and Retention

## Paclitaxel

- ▶ Tends to localize in sub-intimal space and **partitions** significantly in adventitia.

## Sirolimus

- ▶ Diffuses **slowly** and spreads throughout entire artery where it **dilutes down** to sub-therapeutic levels.



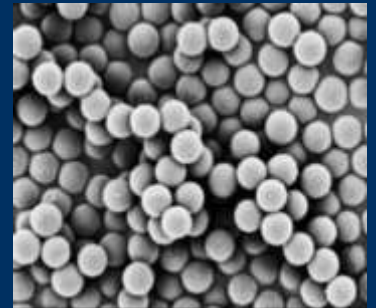
(Tissue Binding Capacity (TBC) of labeled Dextran, Paclitaxel and Sirolimus in 0.040-mm-thick bovine internal carotid tissue segments. Source: PNAS 2004)

# ***Sirolimus DEB SELUTION: MedAlliance***

- Micro-reservoirs made out of biodegradable polymer intermixed with Sirolimus:

**Controlled** and **sustained** drug release mechanism

**Maintains** therapeutic effect in tissue over long period of time



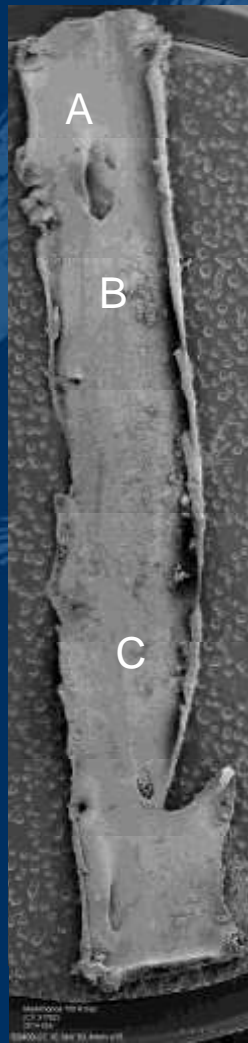
- Novel Cell Adherent Technology – CAT:

CAT transfer membrane **houses** and **protects** micro-reservoirs during balloon insertion, lesion crossing and expansion.

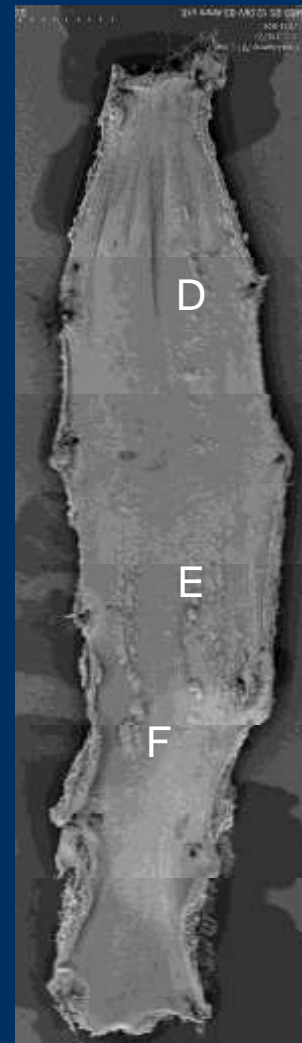
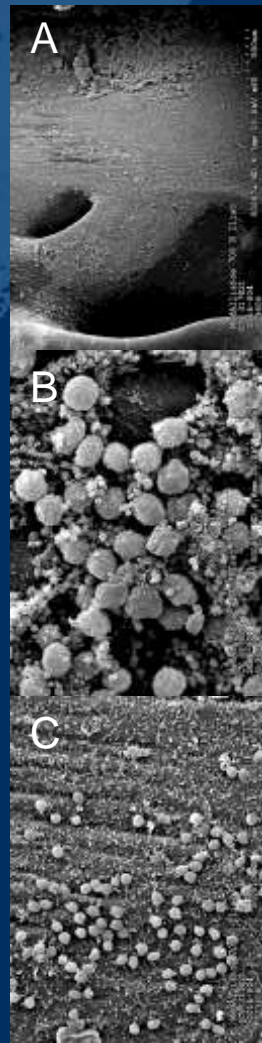
CAT transfer membrane with embedded micro-reservoirs **releases** from balloon delivery system and **adheres** to vessel lumen with short balloon Inflation.



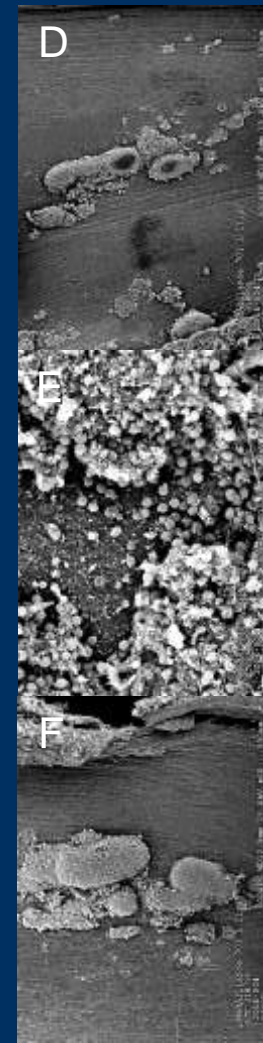
# Preclinical Study in Rabbit Iliac Artery Model



1 hour post PTA

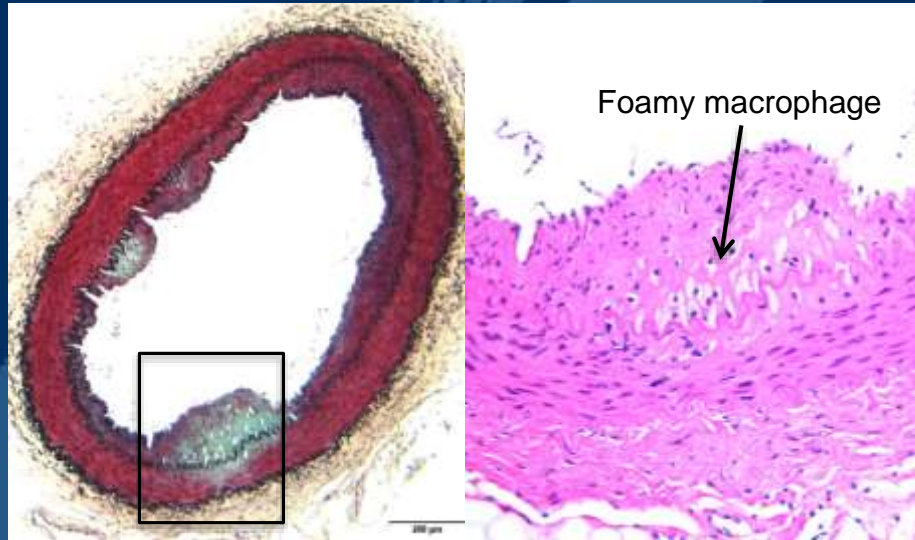


24 hours post PTA

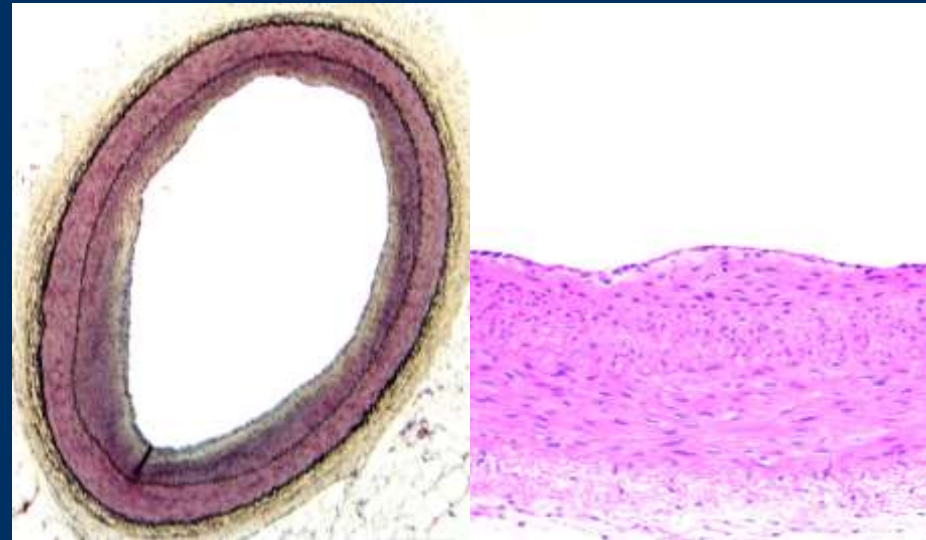




# Preclinical Study in Rabbit Iliac Artery Model

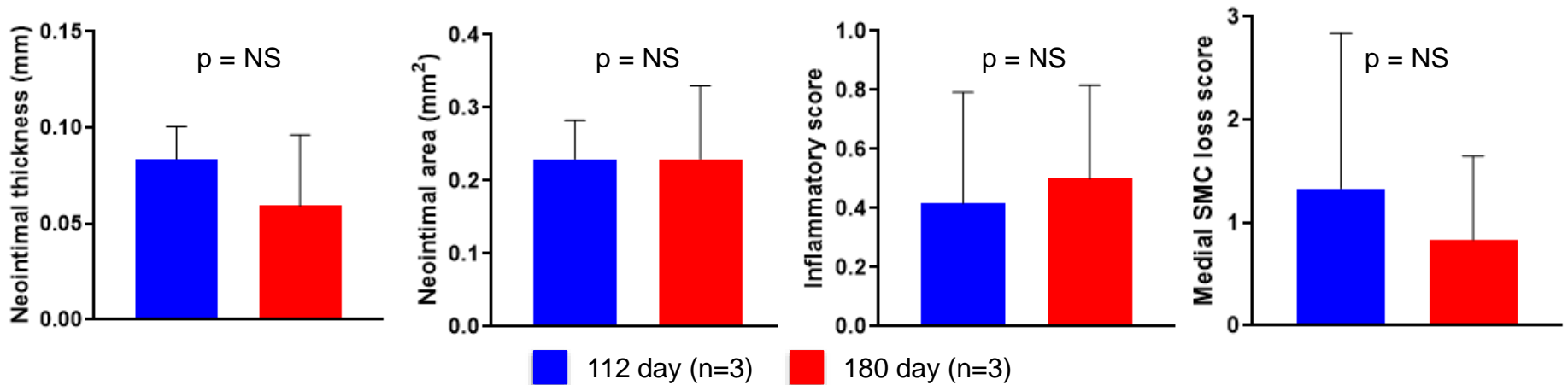


112 day



180 day

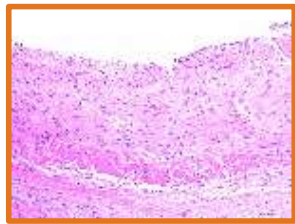
## Morphometry analysis



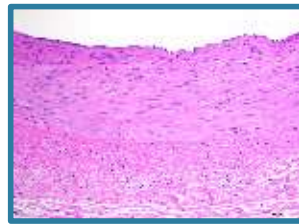
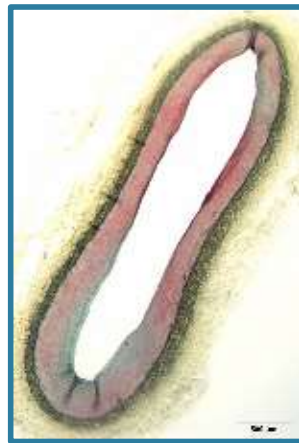
# Preclinical Study in Porcine Peripheral Artery Model

Peripheral – 28 days histopathology

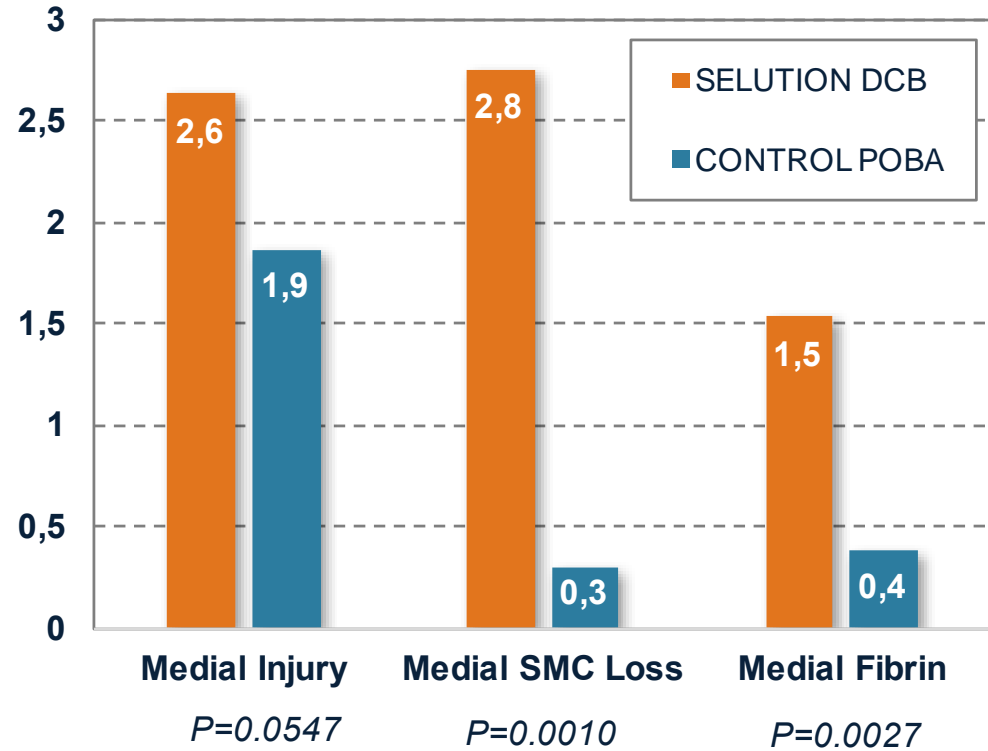
**SELUTION  
DCB**



**CONTROL  
POBA**



## Histological Comparison – Scoring



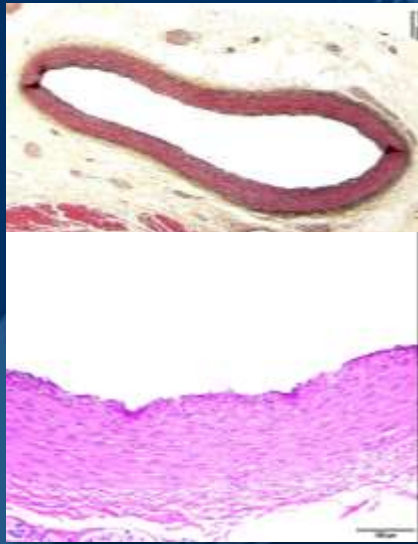
$P \leq 0.05$  Statistically Significant

Source: Med Alliance – Histo Study (MEA 439-14).

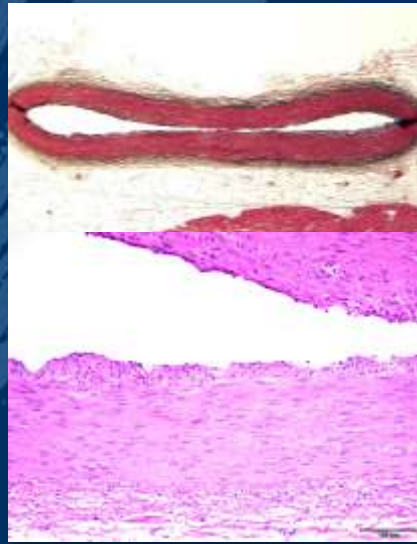
CV33054 30-138E LPFA TR E

CV33052 30-064E RSFA TR G

# Preclinical Study (Porcine Coronary Model)



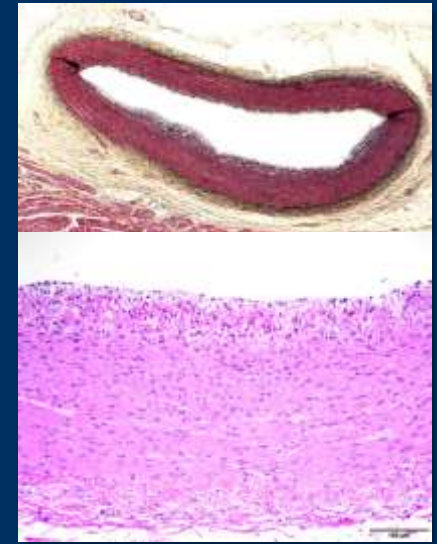
Excipient coated balloon



Non coated balloon

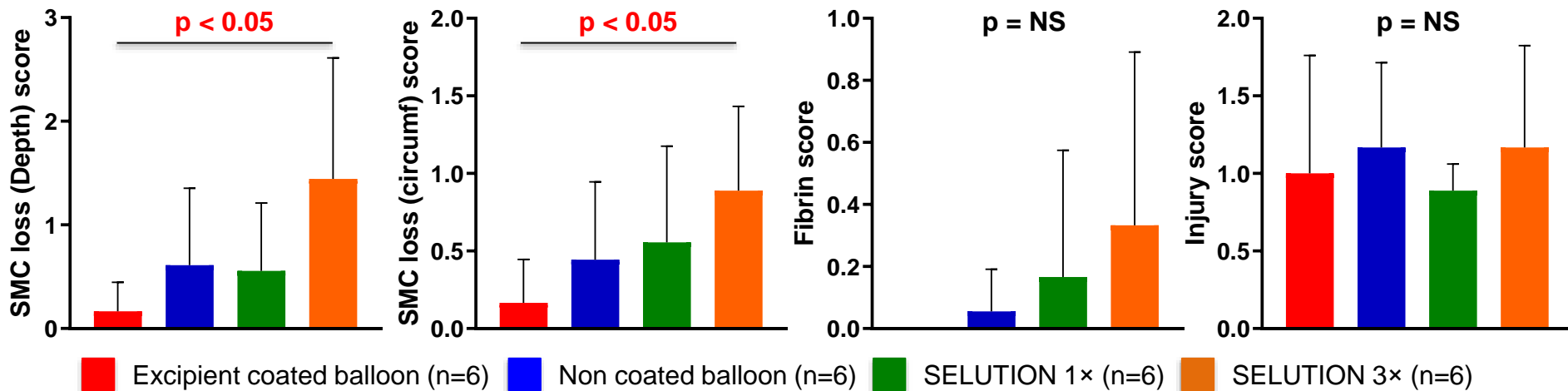


SELUTION 1x



SELUTION 3x

## Morphometry analysis



# Summary

- Sirolimus has wider therapeutic range and thus higher index as compared to paclitaxel.
- Paclitaxel has faster absorption and longer retention of tissue than sirolimus. On the other hand, sirolimus is absorbed slowly and spreads throughout entire artery.
- Medial SMC loss and fibrin scores were relatively higher in SELUTION groups, suggesting the existence of sirolimus drug effect on the vessels wall healing process and not injury alone.
- Sirolimus is drug of choice and maybe a better choice than paclitaxel for peripheral artery and coronary DCBs.

# Acknowledgments

## CVPath Institute

Masayuki Mori, MD, PhD

Atsushi Sakamoto, MD, PhD

Yu Sato, MD

Rika Kawakami, MD, PhD

Hiroyuki Jinnouchi, MD

Anne Cornelissen, MD

Liang Guo, PhD

Robert Kutyz, MS

Russ Jones

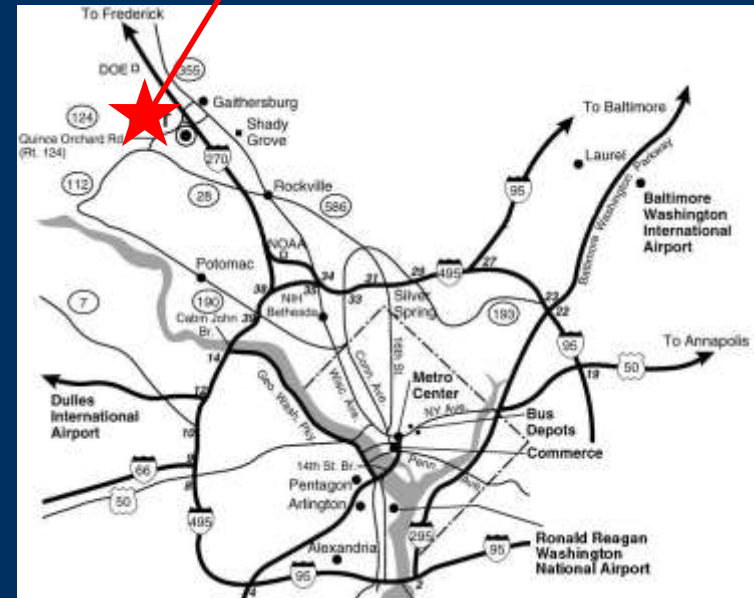
Abebe Atiso, HT

Jinky Beyer

Lila Adams, HT

Frank D Kolodgie, PhD

Renu Virmani, MD





***SELUTION SLR – a Sirolimus DEB:  
Use of preclinical studies in  
predicting device safety***

*Aloke Finn  
CVPath Institute, Inc.  
Gaithersburg, MD, USA*