

XTOSI First in man study on the clinical use and safety of the Magic Touch PTA Sirolimus coated balloon for SFA and BTK lesions: Interim Analyses

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Disclosure

Speaker name:

Edward Choke

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

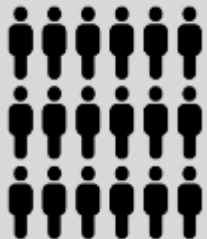
XTOSI First in man clinical trial:

Clinical efficacy and safety of the Magic Touch PTA Sirolimus coated balloon for SFA and BTK lesions



Design: Prospective, premarket, non-randomized, all comers single-arm trial

XTOSI



Target
N=50



PRIMARY ENDPOINT

Primary patency at 6 months

Duplex PSVR <2.4

Blinded assessment

PI: Edward Choke

Single centre study
4 investigators
Singapore
Sengkang General Hospital



First patient
enrolled
Nov 2018

Final patient
enrolled Nov
2019

Full 6 month
data in April
2020

Key inclusion criteria



Age \geq 21 years

Rutherford 0 to 6

Any lesion(s) in the SFA or popliteal artery and proximal 200mm of tibial arteries

Inflow free from lesions

Good outflow

Key exclusion criteria



Life expectancy \leq 1 year

Failure to successfully cross the target lesion

Unsuccessful treatment with conventional balloon

**Screened
patients**

N = 55

Failed
screening

N = 5

Enrolled

N = 50

30 day data

N = 50

6 month
follow up data

N = 40

Screened patients

N = 55

Failed screening

N = 5

Enrolled

N = 50

30 day data

N = 50

6 month follow up data

N = 40

Screened patients

N = 55

Failed screening

N = 5

Enrolled

N = 50

30 day data

N = 50

6 month follow up data

N = 40

Sirolimus coated balloon not used

(n=2)

Unable to obtain residual stenosis <30%

(n=1)

Flow limiting dissection below the knee artery

(n=2)

Screened patients

N = 55

Failed screening

N = 5

Enrolled

N = 50

30 day data

N = 50

6 month follow up data

N = 40

Demographics

N=50

Age

67 (41-89)

Male

31 (62%)

Diabetes

45 (90%)

Hypertension

41 (82%)

High cholesterol

43 (86%)

Dialysis

11 (22%)

Coronary artery disease

18 (36%)

Previous Myocardial Infarct

13 (26%)

ASA

2

10 (20%)

3

39 (78%)

4

1 (2%)

Screened patients

N = 55

Failed screening

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High risk cohort

Edward Choke

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Previous Myocardial Infarct

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ASA

2

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3

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1 (2%)

High risk cohort

High ASA score

Screened patients

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N = 50

30 day data

N = 50

6 month follow up data

N = 40

Demographics

N=50

Rutherford scores

0	1 (2%)
3	2 (4%)
4	1 (2%)
5	38 (76%)
6	8 (16%)

Patients with ulcers/gangrene

N=46

WIFI	
1 to 3	22 (48%)
4 to 8	24 (52%)

Vast majority performed for limb salvage

Screened patients

N = 55

Failed screening

N = 5

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Rutherford scores

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Patients with ulcers/gangrene

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WIFI	
1 to 3	22 (48%)
4 to 8	24 (52%)

Vast majority performed for limb salvage

Majority had poor prognosis for limb salvage according to WIFI scores

Screened patients

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Failed screening

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Enrolled

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30 day data

N = 50

6 month follow up data

N = 40

Lesion characteristics

N=50

Target lesion location

Femoropopliteal (SFA) 19 (38%)

Tibial arteries (BTK) 31 (62%)

Total length Sirolimus coated balloon used

Femoropopliteal (SFA) 276.3mm

Tibial arteries (BTK) 193.5mm

Stenosis

33 (66%)

In stent restenosis

1 (2%)

Stented

5 (10%)

Retrograde access required

18 (36%)

Majority had long BTK revascularisation

Screened patients

N = 55

Failed screening

N = 5

Enrolled

N = 50

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N = 50

6 month follow up data

N = 40

Lesion characteristics

N=50

Target lesion location

Femoropopliteal

19 (38%)

Significant had occlusions which required retrograde approach

Total length Sirolimus coated balloon used

Femoropopliteal

276.3mm

Tibial arteries (BTK)

193.5mm

Stenosis

33 (66%)

Occlusion

16 (32%)

In stent restenosis

1 (2%)

Stented

5 (10%)

Retrograde access required

18 (36%)

Screened patients

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30 day data

N = 50

6 month follow up data

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30 day outcomes

N=50

30 day Death

1 (2%)

30 day Major limb amputation

1 (2%)

Device success

100%

Technical success

100%

Screened patients

N = 55

Failed screening

N = 5

Enrolled

N = 50

30 day data

N = 50

Withdrawn (n=1, fractured leg)

Missed visit (n=1)

Not yet reached 6 month follow up (n=8)

6 month follow up data

N = 40

Completed duplex (n=35)

Reached endpoint of death or amputation (n=5)

Screened patients

N = 55

6 month outcomes

N=35

Primary patency

All (N=35) 28 (80.0%)

SFA (N=16) 14 (87.5%)

BTK (N=19) 14 (73.7%)

Freedom from Target Lesion
Revascularisation

All (N=35) 31 (88.5%)

SFA (N=16) 1 (93.8%)

BTK (N=19) 3 (84.2%)

Failed screening

N = 5

Enrolled

N = 50

30 day data

N = 50

6 month follow up data

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*Singapacli BTK RCT Paclitaxel 40%

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6 month follow up data

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Completed duplex (n=35)
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Screened patients

N = 55

6 month outcomes

N=40

Safety endpoint achieved

85.0%

Failed screening

N = 5

Absence of:

30 day mortality

N=1

30 day limb amputation

N=1

6 month target lesion revascularisation

N=4

Enrolled

N = 50

Death

4 (10.0%)

Ischemic heart disease

3

Not known

1

30 day data

N = 50

Amputation Free Survival

35 (87.5%)

Limb salvage

97.5%

6 month follow up data

N = 40

Completed duplex (n=35)

Reached endpoint of death or amputation (n=5)

Screened patients

N = 55

6 month outcomes

N=40

Safety endpoint achieved

85.0%

Failed screening

N = 5

Absence of:

30 day mortality N=1

30 day limb amputation N=1

6 month target lesion revascularisation N=4

Enrolled

N = 50

Death

4 (10.0%)

Ischemic heart disease 3

Not known 1

30 day data

N = 50

Amputation Free Survival

35 (87.5%)

Limb salvage

97.5%

6 month follow up data

N = 40

Completed duplex (n=35)

Reached endpoint of death or amputation (n=5)

Screened patients

N = 55

6 month outcomes

N=40

Safety endpoint achieved

85.0%

Failed screening

N = 5

Absence of:

30 day mortality

N=1

30 day limb amputation

N=1

6 month target lesion revascularisation

N=4

Enrolled

N = 50

Death

4 (10.0%)

Ischemic heart disease

3

Not known

1

30 day data

N = 50

Amputation Free Survival

35 (87.5%)

Limb salvage

97.5%

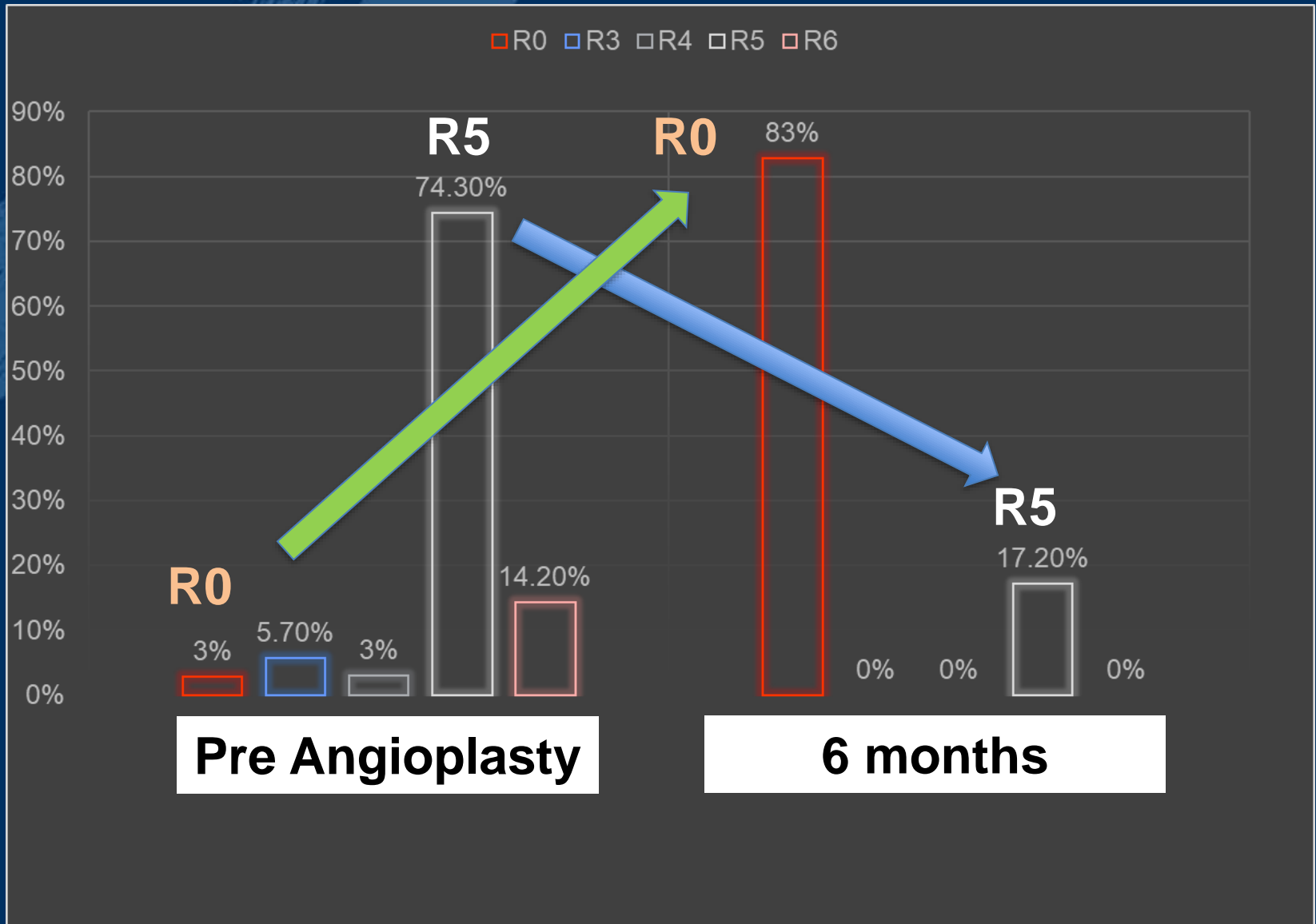
6 month follow up data

N = 40

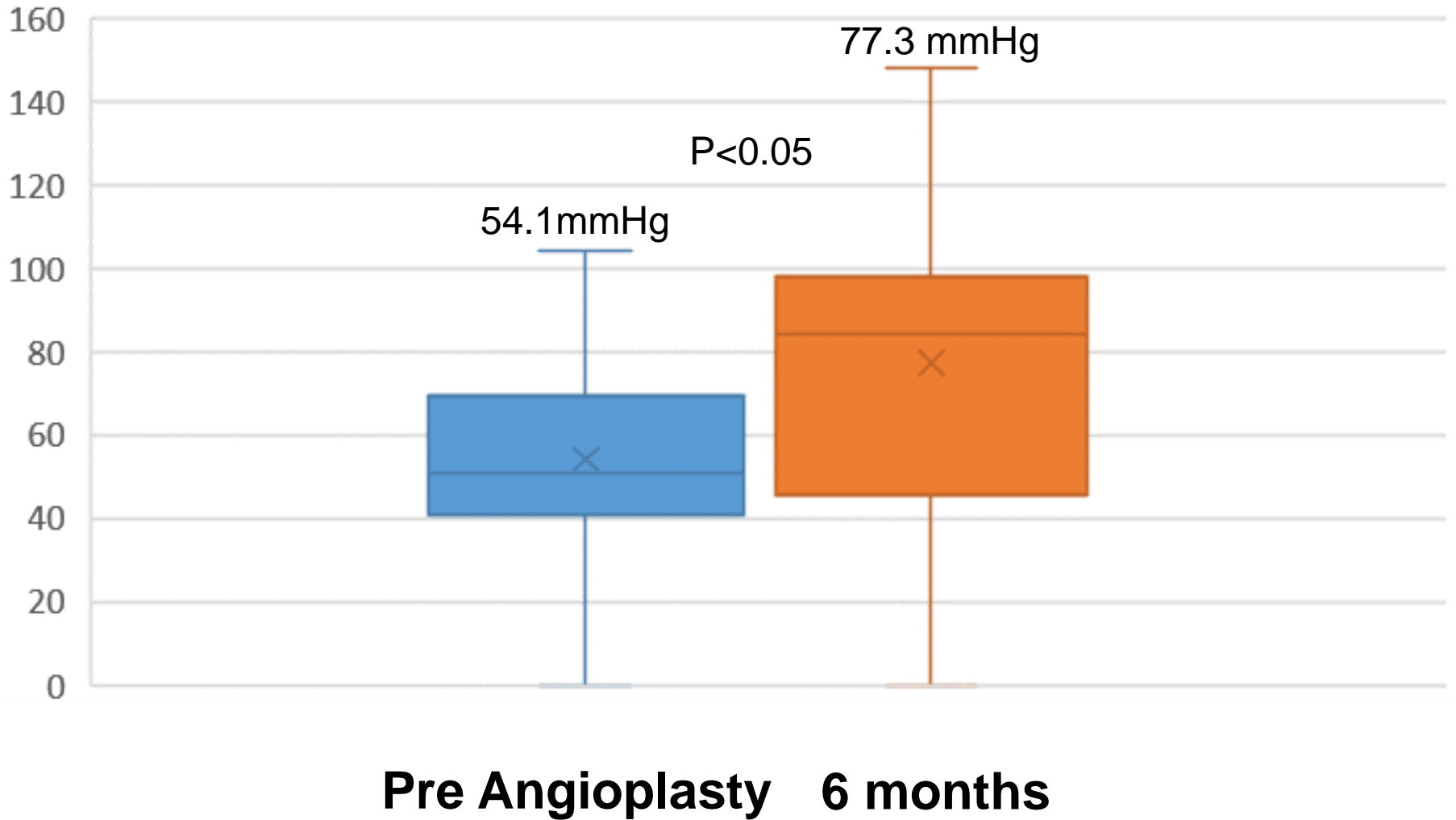
Completed duplex (n=35)

Reached endpoint of death or amputation (n=5)

6 month Clinical improvement in Rutherford scores



6 months toe pressure



XTOSI



Summary

XTOSI interim analyses showed Magic Touch sirolimus coated balloon to have promising efficacy for both SFA and BTK
First demonstration of efficacy for BTK lesions

29624

Short term safety is also promising

Multicentre double blinded randomised controlled trials (SFA and BTK) of sirolimus DCB versus standard PTA

FUTURE SFA

FUTURE BTK

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