

Poz. 30. 33184500-8 Kobalto- chromo koronarinis stentas su įvedimo sistema dengtas erdvine/gradientine vaistus išskiriančia danga

DESIGNED BY
THE **TRANSRADIAL PIONEER**

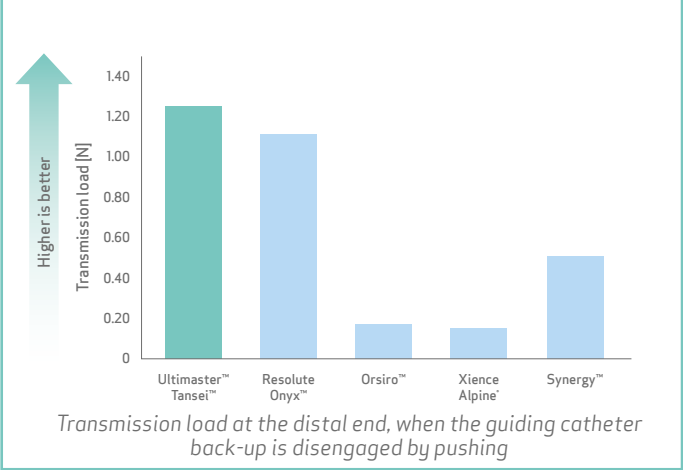
Keep ahead of the curve in complex anatomy

✓Enhanced deliverability

In practice, where **~80% of cases can be expected to be complex³**, it is more important than ever to have tools you can trust for percutaneous coronary intervention.

Ultimaster™ Tansei™ has been developed with challenging cases in mind, achieving optimal trackability and pushability⁵, which are essential for reliable delivery.

Ultimaster™ Tansei™ ensures good transmission force, even when the guiding catheter does not provide sufficient support⁵.

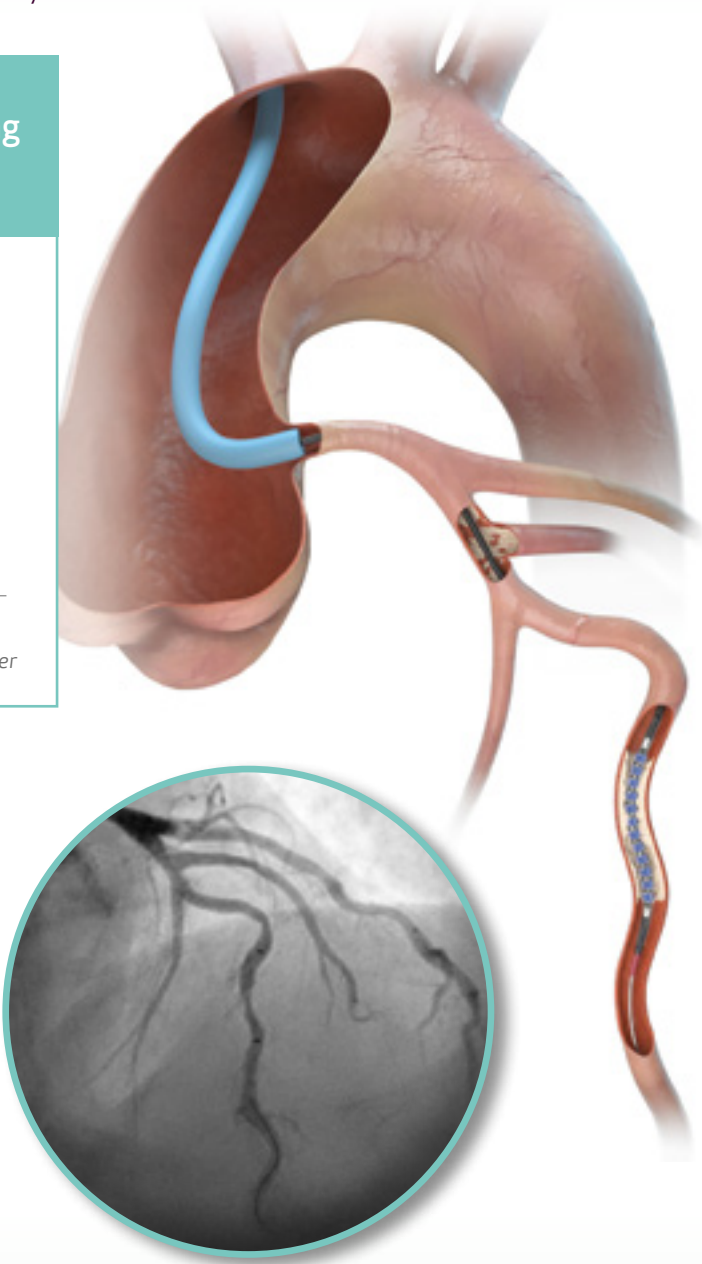


Let Terumo focus on the tools for:

- Transradial PCI
- Calcification
- Bifurcation
- Tortuosity

So you can focus on the most important thing of all:
your patient

5. Bench test ISCD-523-31-18 performed by, and on file at, Terumo Corporation. Testing performed on Ultimaster™ Tansei™ Stent System (3.0 x 38 mm) n=3, Resolute Onyx™ Stent System (3.0 x 38 mm) n=3, Orsiro™ Stent System (3.0 x 35 mm) n=3, Xience Alpine™ Stent System (3.0 x 38 mm) n=3, Synergy™ Stent System (3.0 x 38 mm) n=3.



Ultimaster™ Tansei™
Sirolimus Eluting Coronary Stent System

PRODUCT SPECIFICATIONS

Stent specifications		Delivery system specifications	
✓ Stent design	Open cell	✓ Guidewire compatibility	0.014" (0.36 mm)
✓ Stent material	Cobalt Chromium L605	✓ Low compliant balloon	Material Nylon 12
✓ Strut thickness	80 µm	✓ Nominal pressure	9 atm
✓ Cell size (for 3 mm stent)	4.57 mm²	✓ Rated burst pressure	16 atm - 2.25 to 3.0 mm 14 atm - 3.5 to 4.0 mm
✓ Drug	Sirolimus	✓ Entry profile	0.018" (0.45 mm)
✓ Drug dose	3.9 µg/mm stent length	✓ Crossing profile	0.044" (1.12 mm) for 3.0 mm
✓ Polymer	Poly (DL-lactide-co-caprolactone)	✓ Shaft	Distal - 2.7 Fr (0.89 mm) Proximal - 1.9 Fr (0.64 mm)
✓ Drug coating	Abluminal & gradient	✓ Coating	Hydrophilic - Distal shaft
✓ Polymer degradation time and drug release	3-4 months	✓ Minimum Guide catheter	5 Fr (0.056"/1.42 mm)
		✓ Usable length	144 cm

Item specifications							
LENGTH (mm)	DIAMETER (mm)	2.25	2.50	2.75	3.00	3.50	4.00
9		DE-RQ2209KSM	DE-RQ2509KSM	DE-RQ2709KSM	DE-RQ3009KSM	DE-RQ3509KSM	DE-RQ4009KSM
12		DE-RQ2212KSM	DE-RQ2512KSM	DE-RQ2712KSM	DE-RQ3012KSM	DE-RQ3512KSM	DE-RQ4012KSM
15		DE-RQ2215KSM	DE-RQ2515KSM	DE-RQ2715KSM	DE-RQ3015KSM	DE-RQ3515KSM	DE-RQ4015KSM
18		DE-RQ2218KSM	DE-RQ2518KSM	DE-RQ2718KSM	DE-RQ3018KSM	DE-RQ3518KSM	DE-RQ4018KSM
21		DE-RQ2221KSM	DE-RQ2521KSM	DE-RQ2721KSM	DE-RQ3021KSM	DE-RQ3521KSM	DE-RQ4021KSM
24		DE-RQ2224KSM	DE-RQ2524KSM	DE-RQ2724KSM	DE-RQ3024KSM	DE-RQ3524KSM	DE-RQ4024KSM
28		DE-RQ2228KSM	DE-RQ2528KSM	DE-RQ2728KSM	DE-RQ3028KSM	DE-RQ3528KSM	DE-RQ4028KSM
33		DE-RQ2233KSM	DE-RQ2533KSM	DE-RQ2733KSM	DE-RQ3033KSM	DE-RQ3533KSM	DE-RQ4033KSM
38		DE-RQ2238KSM	DE-RQ2538KSM	DE-RQ2738KSM	DE-RQ3038KSM	DE-RQ3538KSM	DE-RQ4038KSM
Post-dilation limit ¹²		4.5 mm	4.5 mm	4.5 mm	4.5 mm	5.5 mm	5.5 mm

Recommended DES in ESC/EACTS 2014 guidelines¹⁰

1 MONTH DAPT*

CE-mark approved for patients in need to stop DAPT earlier¹¹

* Patients should be maintained on clinically adequate post-procedural antiplatelet therapy according to the current guidelines. In case of need, dual antiplatelet therapy can be discontinued earlier, but not before one month.

10. Windecker S et al. 2014 ESC/EACTS Guidelines on myocardial revascularization: The Task Force on Myocardial Revascularization of the European Society of Cardiology (ESC) and the European Association for Cardio-Thoracic Surgery (EACTS) Developed with the special contribution of the European Association of Percutaneous Cardiovascular Interventions (EAPCI). Eur Heart J. 2014 Oct 1;35(37):2541-619.

11. Ultimaster IFU.

12. CE approval was received on August 2nd, 2019. The IFU will be updated to reflect the specified post dilatation limits.

Ultimaster™ Tansei™ is not available for sale in all countries. Please contact your Terumo local sales representative for more information.



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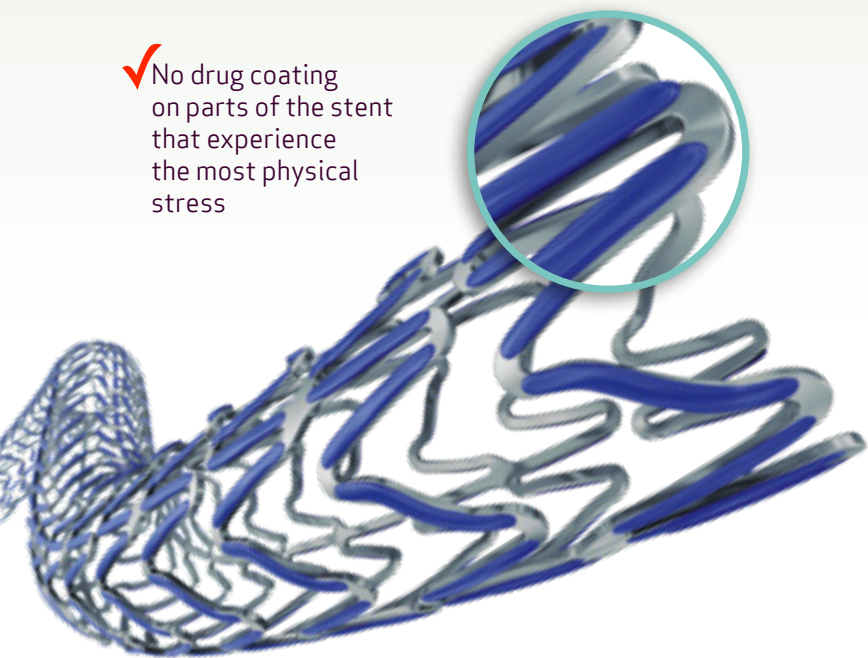
MASTERING
COMPLEXITY.
SIMPLE.



Building on the heritage of the Ultimaster™ stent

Ultimaster™ Tansei™ has all the key features of Ultimaster™ for supporting vascular repair¹

- ✓ No drug coating on parts of the stent that experience the most physical stress

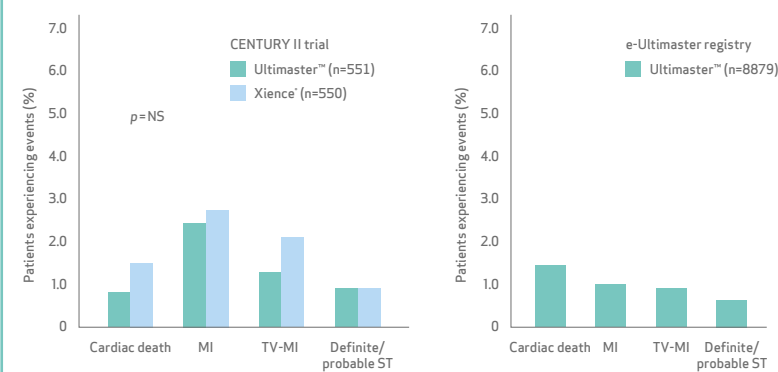


Innovative **abluminal bioresorbable coating**

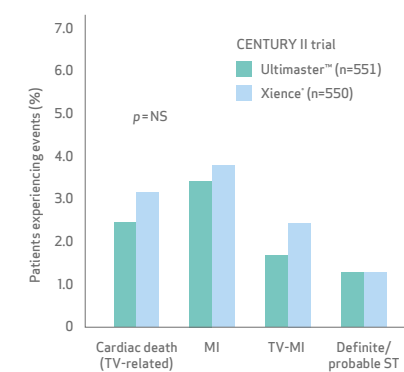
- ✓ Drug coating applied in a **gradient** to reduce the risk of polymer cracking and delamination, even when the stent is overexpanded
- ✓ **PCL added to PDLLA**, increasing the elasticity of the bioresorbable polymer coating

Simultaneous polymer resorption and drug release within 3–4 months, to match the procedure-triggered biological response

Consistent good safety* data at 1 year from controlled clinical trials² and routine clinical practice³



Sustained long-term safety from controlled clinical trials⁴



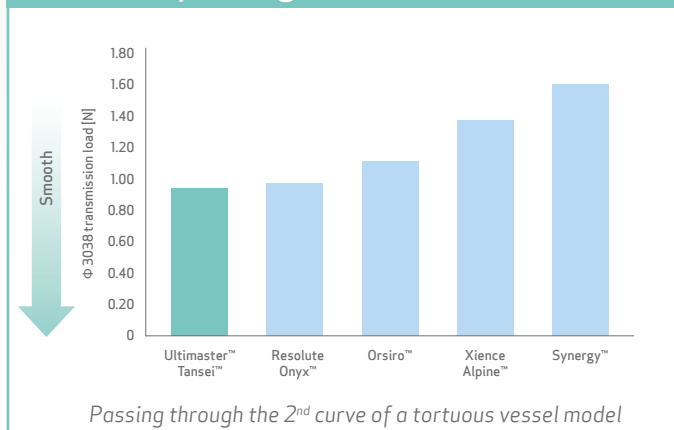
TRACK COMPLEX LESIONS WITH EASE

A tip designed to facilitate treatment of the most challenging cases

Updated design to maximize **deliverability**, even in the most challenging cases

- ✓ Flexible tip material: supports navigation through tortuous vessels
- ✓ Low passing resistance at the tip: minimizes the force required to cross challenging lesions

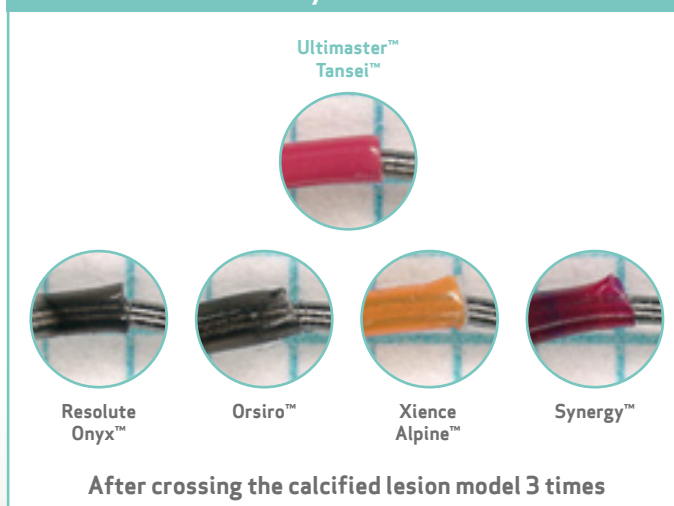
Lowered⁶ passing resistance



A tip specifically developed with the composition and shape to support **durability**

- ✓ Rounded shape: offers durability and crossability, even through areas of calcification
- ✓ Durable material: reduces the risk of tip damage when navigating challenging anatomy

Extended durability⁷



CROSS CHALLENGING ANATOMY WITH CONFIDENCE

Advanced shaft technology for outstanding acute performance

ADVANCED SHAFT TECHNOLOGY

- Good transmission force and pushability
- Excellent kink resistance

INNOVATIVE TIP

- Maximized deliverability
- Optimized durability
- Clear visibility

NOVEL
Ultimaster™ TANSEI™ Technology

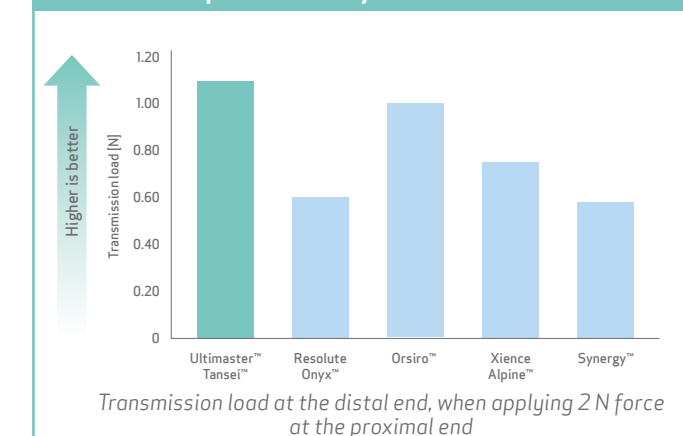
UPDATED EXIT PORT

- Smooth and balanced transition

Maximizing **transmission force**, and **kink resistance**⁸

- Shaft reinforced with a stainless steel core wire: ensures optimal pushability and transmission force
- Stronger hypotube: maximising kink resistance for effective and reliable deliverability

Enhanced pushability⁹



Ensuring a **smooth** and **balanced transition**

- A stainless steel tapered core wire at the exit port for optimal pushability across the entire delivery system

Re-colored tip for optimal **visibility**

- Brightly colored, easily visible red tip: aids guidewire loading

PDLLA-PCL: Poly (DL-lactide-co-caprolactone); CENTURY II: n is the number of patients at baseline in the per protocol analysis; e-Ultimaster: n is the number of patients with 1-year follow-up completed (interim analysis); MI, myocardial infarction; NS, not significant; TV, target vessel; ST, stent thrombosis.

1. Discovery 1 to 3: Chevalier B et al. Circ Cardiovasc Interv 2017;10.

* Based on cardiac death, MI and ST rates in the stated studies.

2. Internal report ISCD-523-37-20 - Report-CEII-1 year results

3. Internal report ISCD-523-37-19 - Report-eUM-Interim analysis

4. Saito et al. - Presented at EuroPCR2018

6. Bench test ISCD-523-31-18 performed by, and on file at, Terumo Corporation. Testing performed on Ultimaster™ Tansei™ Stent System (3.0 x 38 mm) n=3, Resolute Onyx™ Stent System (3.0 x 38 mm) n=3, Orsiro™ Stent System (3.0 x 35 mm) n=3, Xience Alpine™ Stent System (3.0 x 38 mm) n=3, Synergy™ Stent System (3.0 x 38 mm) n=3.

7. Bench test ISCD-523-31-18 performed by, and on file at, Terumo Corporation. Testing performed on Ultimaster™ Tansei™ Stent System (3.0 x 38 mm) n=1, Resolute Onyx™ Stent System (3.0 x 38 mm) n=1, Orsiro™ Stent System (3.0 x 35 mm) n=1, Xience Alpine™ Stent System (3.0 x 38 mm) n=1, Synergy™ Stent System (3.0 x 38 mm) n=1.

8. Compared with Ultimaster. Bench test ISCD-523-31-18 performed by, and on file at, Terumo Corporation.

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