

TREO[®]

ABDOMINAL STENT-GRAFT SYSTEM

Versatile by Design.
Fit for any Anatomy.*

*Per IFU.

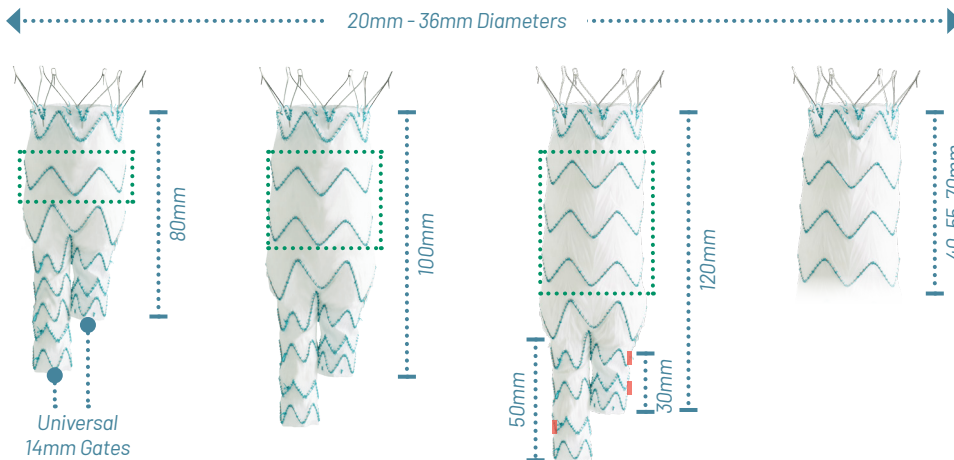


More Choices, More Possibilities

Multiple size options for planning and treatment

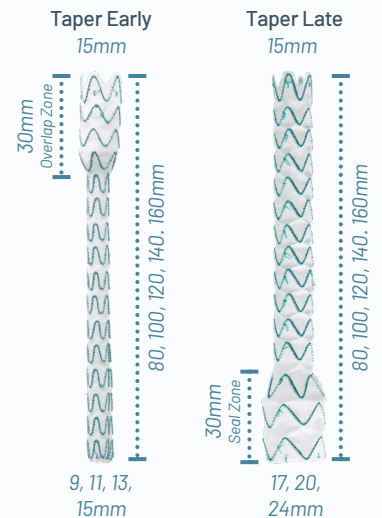
True three-piece modular design with a wide variety of sizes, lengths and tapers

TREO offers **29,400** unique treatment options



Optimized Limb Tapering Design

- ▶ Limbs taper early in smaller diameters
- ▶ Limbs taper late in larger diameters



90% of procedures utilize 3 pieces ¹

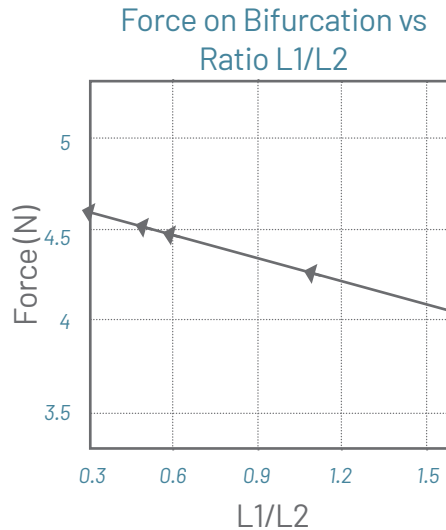
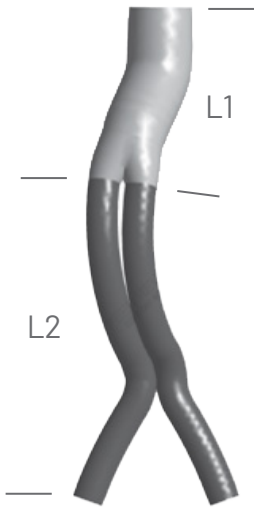
Resulting in expanded treatment options, particularly in tight/narrow aortic bifurcations.

1. TREO IFU
 2. Howell BA, Kim T, Cheer A, Dwyer H, Saloner D, Chuter TAM. Computational fluid dynamics within bifurcated abdominal aortic stent-grafts. J Endovasc Ther. 2007;14(2):138-143. doi:10.1177/152660280701400204
 3. Uberoi R, Setacci C, Lescan M, et al. Global Post-Market Clinical Follow-up of the Treovance Stent-Graft for Endovascular Aneurysm Repair: One-Year Results From the RATIONALE Registry. J Endovasc Ther. 2018;25(6):726-734. doi:10.1177/1526602818803939

Provides the ideal platform for both present and future EVAR needs

Long main bodies provide:

- ▶ Lower displacement forces and increased endograft stability during the cardiac cycle ^{2,4}
- ▶ Endograft closer to aortoiliac bifurcation makes it easier and faster to cannulate contralateral gate ³



Ease of gate cannulation with long main body

TREO's long main body's ability to sit close to aortoiliac bifurcation, along with limb lock mechanism, may reduce the risk of both proximal and distal migration. ⁴

4. Georgakarakos E, Xenakis A, Georgiadis GS, et al. Computational estimation of the influence of the main body-to-iliac limb length ratio on the displacement forces acting on an aortic endograft. Theoretical application to Bolton Treovance® Abdomina

5. Image courtesy of Dr. Heath Broussard

6. Image on file; courtesy Dr. John Rollo



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