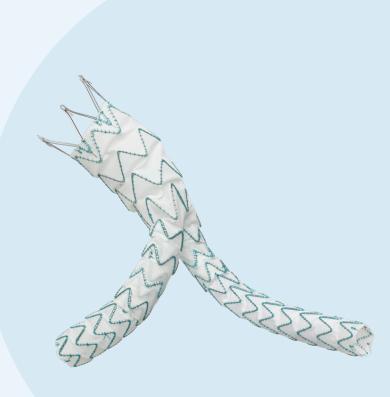






Versatile by Design. Fit for any Anatomy.*

*Per IFU.











Inspiring Confidence with Next-Generation Abdominal Device Technology



Fabric

Woven Polyester with an optimised weave pattern

- Low profile
- ▶ High strength
- Low permeability



Stents

Electropolished Nitinol:

- Super-elastic properties
- Proven fatique endurance
- Suprarenal stent is laser-cut for durability



Suture

5-0 braided polyester surgical suture impregnated with PTFE

- ▶ High wear resistance
- High tensile strength



Radiopaque Markers

- ▶ Platinum Iridium (90%-10%)
 - > Radiopaque material for enhanced visibility
 - > Low profile
 - > Galvanic corrosion resistance
- Positioned to aid device placement and easier contralateral gate cannulation

Type III/IV Endoleak through 3 years 1 (0/150)

O%
Migration through
3 years 1
(0/150)

Rupture through 3 years 1 (0/150)



TREO Key Features

Graft features

- Multiple size options
- Flexible graft design
- Dual active fixation
- Optimised proximal seal
- Lock stent technology



Delivery system features

- Low profile delivery system
- Controlled, precise graft delivery
- Leave behind sheath
- Protective proximal clasp

^{1.} Eagleton, M.J et al. "Safety and effectiveness of the TREO stent graft for the endovascular treatment of abdominal aortic aneurysms." Journal of Vascular Surgery vol. 74, 1 (2021): pp.114-123. E3. doi.org/10.1016/j.jvs.2020.10.083

Eagleton M, Stoner, M. TREO US IDE 5-year Data Presentation VEITH 2023

^{3.} Marone et al. "Five-Year Outcomes of Endovascular Aortic Repair With the TREO Abdominal Endograft." Journal of Endovascular Therapy vol. 0, 0 (2023). doi:10.1177/15266028231170161

I. Terumo Aortic TREO Annual Report 100200 2019 data on file.





Sac Regression:

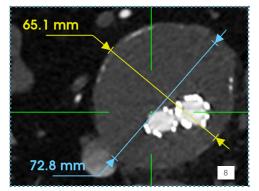
The Ultimate Indicator of EVAR Success

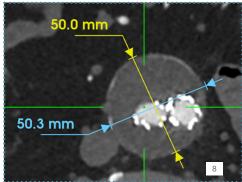
Not only sac expansion, but any failure for the sac to regress is associated with higher long-term mortality. ⁷

73% of patients with hostile neck anatomy.³ (27/37)

TREO consistently shows durable high sac regression and low sac expansion rates across multiple studies

		•				
TREO Aneurysm sac changes @ 1 year and 5 years	IDE ¹ (1&5 years)	MARONE, et al ³ (5 years)	Feasibility Study ⁴ (1&5 years)	RATIONALE ⁵ (1 year)	US PAS ⁶ (1 year)*	EVAR VQI Multi Manuf. ⁷ (TREO not incl)(1 year)
	n=136	n=31	n=28	n=202	n=226	n=14,817
Decrease	46%	71%	54%	54%	46%	40%
Stable	54%	29%	46%	43%	50%	35%
Increase	0%	0%	0%	3%	4%	25%
Decrease @5 Years	61% ² n=70	71%	81% n=21			





*TREO US PAS is an all-comers study, follow-up on-going

EVAR Success: Sac Regression

- 32% aneurysm size reduction (23mm) at 1 Year
- Without usage of adjunctive devices

Long main body optimises sac regression

•• The proximity of the distal end of the stent graft to the iliac bifurcation might promote sac regression, provide greater resistance to migration, and counter endograft shortening resulting from aortoiliac tortuosity. •• 1

^{5.} Uberoi et al. "Global Post-Market Clinical Follow-up of the Treovance Stent-Graft for Endovascular Aneurysm Repair: One-Year Results From the RATIONALE Registry." Journal of Endovascular Therapy vol. 25, 6 (2018): pp. 726-734. doi:10.1177/1526602818803939

^{6.} Terumo Aortic TREO US Post Approval Study Report P190015 2023 data on file.

O'Donnell, T et al. "Aneurysm sac failure to regress after endovascular aneurysm repair is associated with lower long-term survival." zv.Journal of Vascular Surgery (2019): pp. 414-422. doi: 10.1016/j.jvs.2018.04.050.

^{8.} Case images courtesy of Dr. Jonathon Rollo.





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▶ VuMedi



