

CE LABEL UPDATE
XIENCE™ 1-MONTH DAPT¹

Xiience™

PROTECTING PATIENTS
WITH SHORT DAPT NEEDS

XIENCE™ Stent is supported by the largest body of DAPT patient evidence and has a proven anti-thrombotic fluoropolymer^{2,3}


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BALANCING THE RISK

OF THROMBOTIC EVENTS AND BLEEDING EVENTS FOR PCI PATIENTS CAN BE A TOUGH CHOICE



**LONGER
DAPT**
LOWER
THROMBOTIC
RISK



**SHORTER
DAPT**
LOWER
BLEEDING
RISK

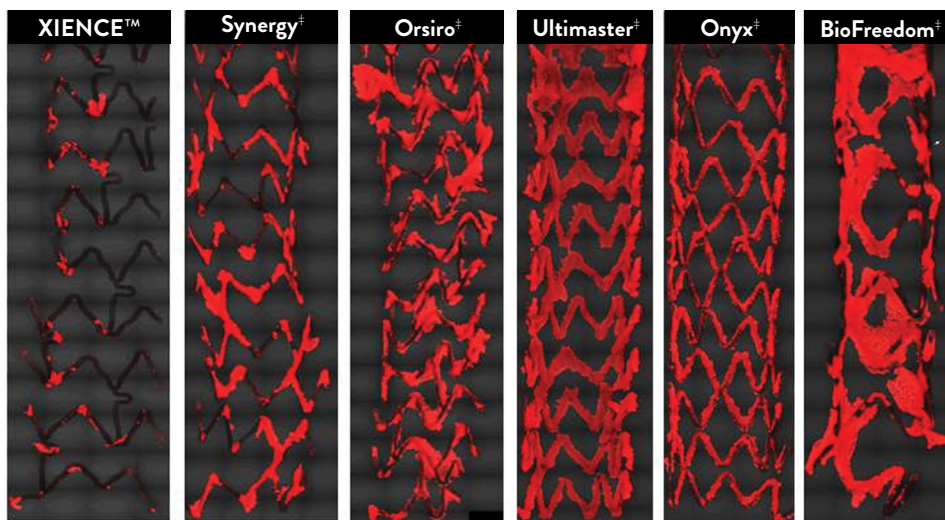


BLEEDING EVENTS AFFECTING PATIENTS CAN INCLUDE:
bruising, gastrointestinal or intracranial bleeding

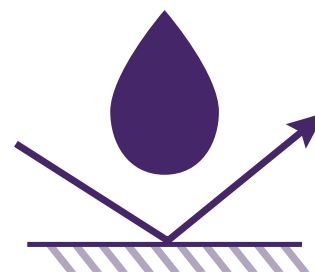
PROTECTING PATIENTS WITH SHORT DAPT NEEDS

FOR PATIENTS WITH SHORT DAPT NEEDS,
NOT ALL DES ARE THE SAME.


Important differences exist amongst DES. XIENCE™ Stent is significantly more anti-thrombotic than other DES³



**XIENCE™ Stent
Difference**



**ANTI-THROMBOTIC
FLUOROPOLYMER**

 Blood Platelet Adhesion to Stent Surface. Pre-Clinical aspirin only setting. Platelet adhesion to stent surface is involved in stent thrombosis.

XIENCE™ STENT'S ANTI-THROMBOTIC
FLUOROPOLYMER OFFERS **SIGNIFICANTLY
MORE THROMBORESISTANT PROTECTION
FOR PCI PATIENTS**

**XIENCE™
Stent shows
significantly
($p < 0.01$) less
platelet adhesion
vs. other DES³**

PROTECTING PATIENTS WITH SHORT DAPT NEEDS

DID YOU KNOW?

XIENCE™ STENT HAS THE LARGEST BODY OF DAPT PATIENT EVIDENCE²



ANTI-PLATELET OPTIONS

20K PATIENTS ANALYSED²

1, 3, 6, or 12 months DAPT; Aspirin or P2Y12 monotherapy

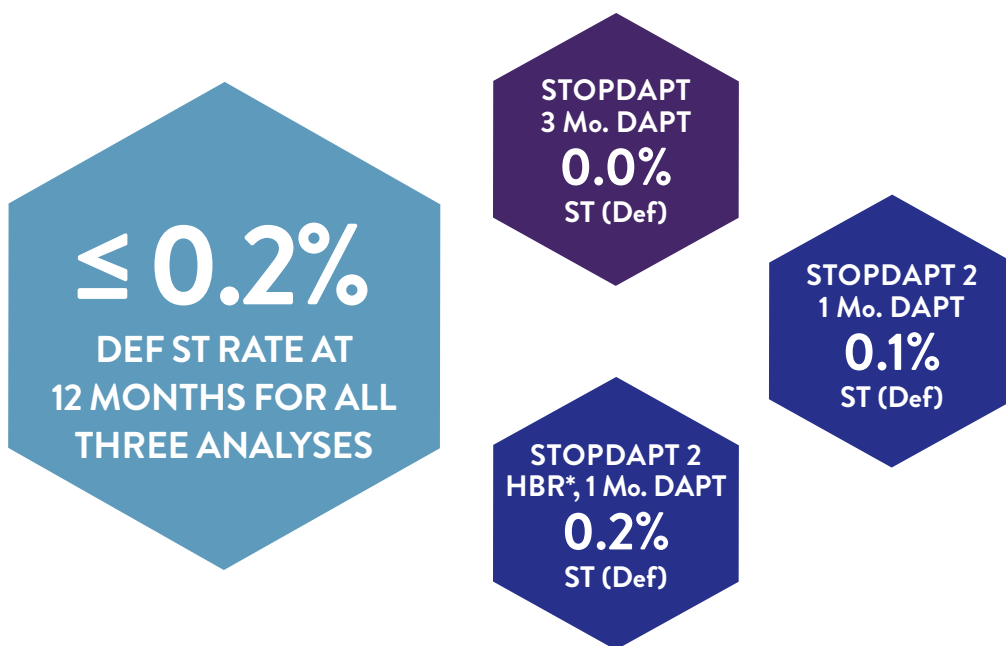
XIENCE™ STENT IS THE ONLY DES WITH 1-MONTH AND 3-MONTH SHORT DAPT DATA STUDIED WITH BOTH ASPIRIN AND/OR P2Y12 MONOTHERAPY⁴

DES	SHORT DAPT ASPIRIN MONOTHERAPY		SHORT DAPT P2Y12 MONOTHERAPY		HBR PATIENTS
	1 mo.	3 mo.	1 mo.	3 mo.	
XIENCE™	●	●	●	●	●
Synergy [†]	●	●	-	●	●
Resolute Onyx [†]	●	●	●	-	●
BioFreedom [†]	●	-	●	-	●
Ultimaster [†]	-	-	-	-	-
Orsiro [†]	-	-	-	●	-

XIENCE™ STENT HAS SHOWN CONSISTENTLY LOW COMPLICATION RATES (ST) WHEN USING SHORT DAPT^{5,6,7}

0.2% DEF. ST OR LOWER WITH 1-MONTH DAPT

Consistently low complication rates^{5,6,7}



XIENCE™ 28^{8,9}, XIENCE 90¹⁰ AND STOPDAPT 2 ACS¹¹

Ongoing patient studies



■ DAPT followed by Aspirin Monotherapy

■ DAPT followed by P2Y12 Monotherapy

SCIENTIFIC REFERENCES

1. XIENCE Sierra IFU – 2019.
2. Généreux P, et al. *Circ Cardiovasc Interv.* 2015;8(5):1-16; Natsuaki et al., *Cardiovasc Interv and Ther.* 2016. 31:196–209; Watanabe H, et al. *JAMA.* 2019;321(24):2414-2427; Hahn J, et al. ACC 2019 – SMART CHOICE; Valgimigli M, et al. *Circulation.* 2012;125:2015-2026; Gilard M, et al. *J Am Coll Cardiol* 2015;65:777-786; Hong SJ, et al. *J Am Coll Cardiol Interv.* 2016;9:1438–1446. Gwon HC, et al. ACC 2011 - EXCELLENT.
3. Jinnouchi H, et al. TCT 2019. Comparison of thromboresistance between everolimus-eluting fluoropolymer stent and other drug-eluting stents in an ex vivo swine shunt model under single (i.e. ASA) anti-platelet therapy. Confocal photomicrographs (CD42b/CD61 - red color). XIENCE vs. other DES. P < 0.01 based on mean percentage of platelet immunofluorescence relative to total scanned surface area (mm). Data on file at Abbott.
4. Généreux P, et al. *Circ Cardiovasc Interv.* 2015;8(5):1-16; Natsuaki et al., *Cardiovasc Interv and Ther.* 2016. 31:196–209 - STOPDAPT; Watanabe H, et al. *JAMA.* 2019;321(24):2414-2427 – STOPDAPT 2; Hahn J, et al. ACC 2019 – SMART CHOICE; Watanabe H, et al. TCT 2019 – STOPDAPT 2 – HBR SubAnalysis; Varenne O, et al. 2018. *Lancet.* 391:41-50 – SENIOR; Kirtane A, et al. TCT 2019 – EVOLVE Short DAPT. Windecker S, et al. TCT 2019 – OnyxOne; Postma W, et al. 2019. *Cather Cardiovasc Inter.* 1-5 – DAPT STEMI.
5. Natsuaki et al., *Cardiovasc Interv and Ther.* 2016. 31:196–209 – STOPDAPT.
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7. Watanabe H, et al. TCT 2019 – STOPDAPT 2 – HBR SubAnalysis. 1,154 patient sub-analysis – patients taken from STOPDAPT 2 patient population using latest ARC HBR criteria.
8. XIENCE 28 Global Study, clinicaltrials.gov identifier NCT0335574.
9. XIENCE 28 USA Study, clinicaltrials.gov identifier NCT03815175.
10. XIENCE 90: A Safety Evaluation of 3-month DAPT After XIENCE Implantation for HBR Patients. clinicaltrials.gov identifier NCT03218787.
11. ShorT and OPTimal Duration of Dual AntiPlatelet Therapy-2 Study for the Patients With ACS (STOPDAPT-2 ACS), clinicaltrials.gov identifier NCT03462498.

CAUTION: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use, inside the product carton (when available) or at efu.abbottvascular.com or at medical.abbott/manuals for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

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