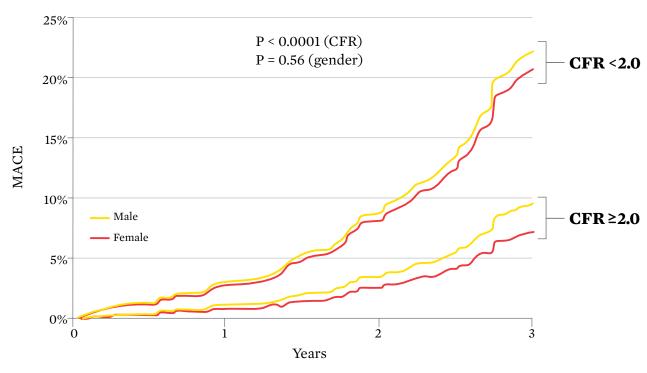


PressureWire[™] X Guidewire with the CoroFlow[‡] Cardiovascular System is the **only solution in the catherization laboratory (cath lab)** able to detect both epicardial disease and microvascular dysfunction with Index of Microcirculatory Resistance (IMR) and Coronary Flow Reserve (CFR).^{1,2}

CORONARY FLOW RESERVE ASSOCIATED WITH MACE RISKS³



CMD is defined by cardiac positron emission tomography/computed tomography CF < 2 in patients without overt obstructive coronary artery disease. MACE= Major adverse cardiovascular events Image adapted from Taqueti et al, $JAm\ Coll\ Cardiol\ 2018^3$

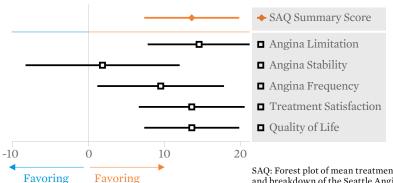
Ford TJ, et al. 1-year outcomes of angina management guided by invasive coronary function testing (CorMicA). JACC Intv. 2020; 13:33-45.
 Taqueti VR, et al. Coronary microvascular disease pathogenic mechanisms and therapeutic options: JACC state-of-the-art review. J Am Coll Cardiol. 2018;72:2625-2641. doi:10.1016/j.jacc.2018.09.042.



 $^{1.\} Pressure Wire \ ^{\scriptscriptstyle{\top}} X\ Guidewire\ Instructions\ for\ Use\ (IFU)\ \&\ CoroFlow \ ^{\scriptscriptstyle{\dagger}}\ Cardiovascular\ System\ IFU.\ Refer\ to\ IFU\ for\ additional\ information.$

IMPROVING QUALITY OF LIFE FOR CMD PATIENTS

In the CorMicA trial, diagnosing and treating CMD with stratified medical therapy led to sustained angina improvement and better quality of life.¹



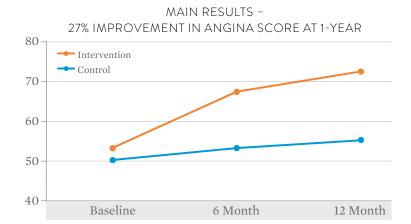
control

intervention

Comprehensive physiology assessment of epicardial arteries (with Fractional Flow Reserve: FFR) and the microvasculature (with IMR and CFR) and treatment with medical therapy was compared to angio-only assessment.

SAQ: Forest plot of mean treatment in angina summary score (95% CI) and breakdown of the Seattle Angina Questionnaire (SAQ) score domains. The angina summary score is the mean of 3 angina domains (limitation, frequency, and overall quality of life).

The CorMicA trial provides a hypothesis-generating diagnostic and treatment approach that improved quality of life for patients with INOCA at 1 year following invasive coronary angiography.¹



TREATMENTS PRESCRIBED IN CORMICA:

- Guideline directed therapy for microvascular angina e.g., beta-blocker & lifestyle
- Guideline directed therapy for vasospastic angina
 e.g., calcium-channel blocker & lifestyle
- Cease antianginal therapy for non-cardiac chest pain +/- non-cardiac Ix

In the cath lab, IMR is more reproducible and specific for assessing the microvasculature than CFR and may be more predictive of outcomes.²

- 1. Ford TJ, et al. 1-year outcomes of angina management guided by invasive coronary function testing (CorMicA). JACC Intv. 2020; 13:33-45.
- 2. Fearon WF, et al. Prognostic value of the Index of Microcirculatory Resistance measured after primary percutaneous coronary intervention. *Circulation*. 2013;127(24):2436-2441. doi:10.1161/CIRCULATIONAHA.112.000298

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Document Number: MAT-2205616

Document Name: CMD Focus Piece - OUS

Version: 1.0

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Description:Reviewers: Doc owner/marketing, RA A&P, Marcom, R&D, Clinical,

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Geography: Country Specific

Country: Australia New Zealand

Business Unit: Vascular

Product: CMD FFR PressureWire X

Type: Material

Dissemination: Digital Print

Audience: Healthcare Professional / Physician OUS Distributors

Status: Approved for Distribution

Approved for Distribution Date: 5/22/2022

Expiration Date: 5/22/2025

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