

| SFA STENTING STUDIES | | | | | | | | |
|--|--|------------------------------------|--------------------------|---|-----------------|--|----------|---|
| Study | Sponsor | Sample Size | Device | Study Design | Lesions | Results | Core Lab | Status |
| ABSOLUTE | Medical University of Vienna | N=104 | Dynalink and/or Absolute | Prospective, single-center, randomized study of 6-mm stents in SFA lesions. | Approx. 13 cm | Freedom from restenosis in the stent arm (54.3%) statistically significantly better than PTA (30.8%) at 24 months. Stent fracture rate: 2% at 1 year. | No | 2-year results published in <i>Circulation</i> . |
| DURABILITY I (OUS) | ev3 | N=150 | Protégé EverFlex | Prospective, multicenter, nonrandomized registry of single stents in SFA and proximal popliteal lesions. | <14 cm | Not available. | Yes | Currently enrolling. |
| DURABILITY II (US) | ev3 | Confidential | Protégé EverFlex | Prospective, multicenter, single-arm study of single stents in long SFA/proximal popliteal lesions. | 7 cm to 16 cm | Not available. | Yes | Not yet begun enrolling. |
| FAST | Bard Peripheral Vascular | N=244 | Luminexx | Randomized, prospective, multicenter study of PTA vs stenting in proximal SFA lesions. Primary endpoint of ultrasound-assessed binary restenosis at 12-month with fracture follow-up. | ≤10 cm | No statistically significant difference between treatment groups at 12 months. Properly powered trials in individual subgroups appears warranted. | Yes | Results presented; paper accepted for publication. |
| RESILIENT | Edwards Lifesciences | N=246 | LifeStent | Randomized, prospective, multicenter trial of PTA vs PTA plus stenting in SFA and proximal popliteal. | ≤15 cm | 6-month primary patency: 94.6% (stent) vs 50.1% (PTA). Freedom from reintervention: 95.3% (stent) vs 54.1% (PTA). Stent fracture rate: 1.2%. | Yes | Enrollment complete; PMA submitted to FDA. |
| SIROCCO I | Cordis Endovascular (Division of Cordis Corporation) | N=36; 6 sites in Europe and Canada | Smart | Randomized, prospective, multicenter study of slower-eluting Smart nitinol self-expanding DES and fast-eluting model vs bare Smart stent control. | 7 cm to 20 cm | 24-month total restenosis: 40% (slower-eluting) vs 44.4% (fast-eluting) vs 47.1% control. TLR: 0% vs 11.1% vs 5.8%, respectively. 24% overall fracture rate. | Yes | Results presented at TCT 9/03. |
| SIROCCO II | Cordis Endovascular (Division of Cordis Corporation) | N=57; 6 sites in Europe and Canada | Smart | Randomized, prospective, multicenter study of slower-eluting Smart nitinol self-expanding DES vs bare Smart stent control. | 7 cm to 14.5 cm | 6-month in-stent angiography: 0% restenosis in study group; 7.7% control. Late loss: .38±.64 vs .68±.97. TVR: 3.4% vs 10.7%. 0 TLRs. 0 thromboses. 6% fracture rate. | Yes | Results presented at TCT 9/03. |
| VIABAHN | Gore & Associates | N=244 | Viabahn | Randomized, prospective multicenter trial of PTA vs Viabahn. Efficacy endpoint: primary patency of the target vessel at 1 year, treatment success, technical success, clinical success. | ≤13 cm | When compared to PTA, Viabahn resulted in higher rates of treatment success, technical success, and 12-month patency as defined by current clinical standards. | Yes | PMA approved 6/05. |
| VIBRANT | Gore & Associates | N=150 | Viabahn | Randomized, prospective, multicenter trial of Viabahn vs nitinol stent of choice. Efficacy endpoint: primary patency at 3 years defined by CDUS PSVR <2 for target lesion. | ≥8 cm | Initial 63 randomized subjects enrolled (mean lesion length, 19 cm). MAE at 30 days: 0% thrombosis, 0% amputation, 1.6% TLR. | Yes | Currently enrolling. Interim results presented at ISET 2007. |
| ZILVER PTX (US phase 1) | Cook Medical | N=60 | Zilver with PTX | Randomized, prospective multicenter trial of PTA with provisional stenting vs DES stenting in SFA and proximal popliteal. Efficacy endpoint: 12-month TLR/TVR determined by duplex. | ≤7 cm | Primary patency at 9 months: PTA=52%, DES=90%. 0% fracture rate for 41 lesions at 6 months and 18 lesions at 1 year. Event-free survival: PTA=91%, DES=89%. | Yes | Enrolling completed. Interim 9-month trial data presented at ISET 2007. |
| ZILVER PTX (US phase 2) | Cook Medical | Confidential | Zilver with PTX | Randomized, prospective multicenter trial of PTA with provisional stenting vs DES stenting in SFA and proximal popliteal. Efficacy endpoint: 12-month TLR/TVR determined by duplex. | ≤14 cm | Not available. | Yes | Currently enrolling. |
| ZILVER PTX (OUS) | Cook Medical | Confidential; 50 sites OUS | Zilver with PTX | Prospective, multicenter registry. Primary DES stenting in SFA and proximal popliteal. Efficacy endpoint: 12-month TLR/TVR determined by duplex. | ≤28 cm | Not available. | Yes | Trial began 5/05. |
| All data provided by industry with the exception of ABSOLUTE and ZILVER PTX. | | | | | | | | |