

# Trellis-8 Peripheral Infusion System

<b>COMPANY</b>	Bacchus Vascular, Inc.
<b>PHONE</b>	(877) 622-5082
<b>WEB</b>	www.bacchusvascular.com
<b>KEY FEATURES</b> <ul style="list-style-type: none"> <li>• Designed for single-setting thrombolysis</li> <li>• Isolated thrombolysis catheter enables targeted drug delivery</li> <li>• Large 5 mm to 16 mm diameter occlusion balloons</li> <li>• Long treatment area lengths of 15 cm and 30 cm</li> <li>• No large capital equipment required</li> </ul>	

Bacchus Vascular (Santa Clara, CA) has introduced the Trellis-8 Peripheral Infusion System. The Trellis-8, the company says, is designed for single-setting treatment of deep vein thrombosis and arterial occlusions. The Trellis-8 is an advanced drug-infusion catheter with two occluding balloons, drug-infusion holes between the balloons, and mechanical drug-dispersion capabilities. According to the company, this pharmacomechanical combination enables isolated thrombolysis, or targeted delivery, and increased penetration of drugs into thrombus. The occlusion balloons are for a vessel diameter range of 5 mm to 16 mm, enabling treatment of large venous anatomy. The system is fully disposable with no large capital equipment required. The Trellis-8 is indicated for controlled and selective infusion of physician-specified fluids, including thrombolytics, into the peripheral vasculature.



# X-Site Suture-Mediated Vascular Closure Device

<b>COMPANY</b>	Datascope Interventional, Datascope, Inc.
<b>PHONE</b>	(201) 995-8832
<b>WEB</b>	www.datascope.com
<b>KEY FEATURES</b> <ul style="list-style-type: none"> <li>• Secure, safe arterial closure, post-percutaneous catheterization</li> <li>• Provides definitive closure without potentially harmful mechanical feet or anchors</li> <li>• Low-profile design and unique suture-delivery system for immediate confirmation of suture placement</li> <li>• Proven safe and effective with highly anticoagulated interventional patients</li> </ul>	

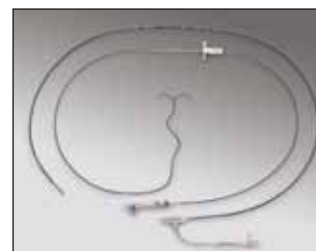
Datascope Interventional (Datascope Inc., Montvale, NJ) has launched the X-Site suture-mediated vascular closure device. The X-Site delivers secure and safe arterial closure following percutaneous catheterization procedures. The company says that the X-Site was proven safe and effective in a randomized, prospective multicenter clinical trial, which included highly anticoagulated interventional patients on GPIIb/IIIa inhibitors. The device provides definitive closure without mechanical feet or anchors that can cause intra-arterial trauma and patient discomfort. The X-Site's low-profile design and unique suture delivery system, the company notes, allow for immediate confirmation of suture placement prior to device removal.



# Benephit Delta Infusion System

<b>COMPANY</b>	FlowMedica, Inc.
<b>PHONE</b>	(510) 252-9500
<b>WEB</b>	<a href="http://www.flowmedica.com">www.flowmedica.com</a>
<b>KEY FEATURES</b> <ul style="list-style-type: none"> <li>• Provides targeted renal therapy (TRT) for patients with kidney dysfunction due to CHF and other conditions</li> <li>• Simultaneous administration of TRT into both renal arteries, using a single bifurcated infusion catheter</li> <li>• Introducer sheath enables the introduction of two different catheters through a single vessel access site in the femoral artery</li> <li>• Reduced profile, increased flexibility, and longer lengths allow for access through arterial sites</li> <li>• Allows greater patient mobility and ease in providing therapy to patients who have left the interventional laboratory</li> </ul>	

FlowMedica, Inc. (Fremont, CA) has received 510(k) clearance for its Benephit Delta Infusion System for the administration of physician-specified medications and other therapeutic agents directly to the renal arteries. The company says that the device is designed for patients with kidney dysfunction who may benefit from targeted renal therapy, including those with congestive heart failure as an alternative to the standard delivery method of systemic intravenous infusion of medication. The Benephit Delta system consists of two components: the bifurcated infusion catheter and an introducer sheath. The bifurcated infusion catheter features two identical branches designed to allow the infusion of therapeutic agents into both renal arteries at once. These branches can be placed into the arteries easily and rapidly, the company says, with minimal use of contrast media and without the use of guidewires. The introducer sheath enables the introduction of two different catheters through a single vessel access site in the femoral artery, allowing for concurrent diagnostic and interventional procedures while infusing the renal arteries.



# Gore TAG Thoracic Endoprosthesis

<b>COMPANY</b>	W. L. Gore & Associates, Inc.
<b>PHONE</b>	(800) 437-8181
<b>WEB</b>	<a href="http://www.goremedical.com">www.goremedical.com</a>
<b>KEY FEATURES</b> <ul style="list-style-type: none"> <li>• Wide treatment range: Lengths from 10 to 20 cm; diameters from 26 to 40 mm</li> <li>• Low permeability design with increased abrasion resistant properties</li> <li>• Conformable and kink resistant; readily conforms to the contours of the aorta without kinking</li> </ul>	

As the only approved device in the US that provides a minimally invasive alternative to open surgery, the Gore TAG Thoracic Endoprosthesis (W. L. Gore & Associates, Inc., Flagstaff, AZ) is anticipated to have a profound impact on the lives of patients with a descending thoracic aortic aneurysm. Observed rates from the Gore TAG Device Pivotal Study demonstrated the Gore TAG Device group had lower operative paraplegia/paraparesis (3% vs 14%), lower operative mortality (1% vs 6%), and significantly less average procedural blood loss (472 mL vs 2,402 mL) as compared to the open surgical control group. Hospital stays were shortened on average from 10 to 3 days. The Gore TAG Device group experienced a 66% reduction in aneurysm-related death and had no aneurysm ruptures through 2 years. Patients who received the Gore TAG Device were able to return to normal activity in less time than those undergoing open surgery (30 days vs 78 days). ■

