Ultraverse 014 and 018 PTA Dilatation Catheters

COMPANY	Bard Peripheral Vascular
PHONE	(800) 321-4254
WEB	www.bardpv.com/_vascular

KEY FEATURES

- Balloon lengths up to 300 mm
- Ultra-Cross Dual Layer hydrophilic coating
- Checker Flex Points for increased flexibility
- Optimal performance in distal peripheral anatomies

Bard Peripheral Vascular (Tempe, AZ) announced the launch of 300-mm balloon lengths for the Ultraverse 014 and Ultraverse 018 PTA dilatation catheters. The 300-mm balloon length is the longest length available on the market and allows for the treatment of long lesions in the lower limbs. The launch also includes additional balloon lengths of 20, 100, 150, and 220 mm in balloon diameters ranging from 2 to 5 mm for the Ultraverse 014 PTA dilatation catheter, and a new 150-cm catheter length for the Ultraverse 018 PTA dilatation catheter. The 150-cm catheter length will offer balloon sizes in diameters of 2 to 5 mm and balloon lengths of 20 to 300 mm.

The Ultraverse 014 and Ultraverse 018 PTA dilatation catheters feature advanced technologies, including the proprietary Ultra-Cross Dual Layer hydrophilic coating and Checker Flex Points for excellent trackability in distal anatomies, according to the company. The innovative, reinforced inner lumen promotes excellent pushability for crossing tight lesions.

PriorityOne AC Aspiration Catheter

COMPANY	Terumo Interventional Systems
PHONE	(800) 862-4143
WEB	www.terumois.com/products/aspiration/priorityone.aspx

KEY FEATURES

- Rounded, short-tip design preserves crossability
- Fully braided, stainless steel body
- Guidewire-style stylet minimizes kinking
- Excellent pushability and trackability for thrombus removal from coronary or peripheral arteries

Terumo Interventional Systems (Somerset, NJ) recently launched the PriorityOne AC aspiration catheter. The PriorityOne AC's rounded, short-tip design preserves crossability and reduces vessel wall adhesion. The catheter's design makes it possible to apply the additional force needed in challenging anatomy to guide the catheter to the blockage and restore blood flow to the occluded artery.

The fully braided, stainless steel body and guidewire-style stylet minimizes kinking while maintaining pushability and trackability for thrombus removal from the coronary or peripheral arteries.

"Aspiration, or thrombectomy, catheters are excellent tools for helping to clear blocked arteries, but kinking can be a problem as the device is advanced," said Michael Martinelli, MD, Chief of Cardiology at St. Peter's Hospital in Albany, New York. "The PriorityOne AC offers impressive features, such as full-length stainless steel braiding and pre-loaded guidewire type of stylet, which increase deliverability and kink resistance ensuring optimal crossability even in difficult scenarios."

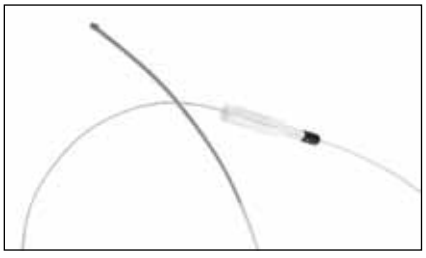
Viance Crossing Catheter and Enteer Re-Entry System

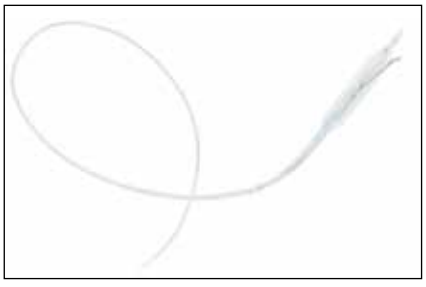
COMPANY	Covidien
PHONE	(800) 716-6700
WEB	www.covidien.com/cto

KEY FEATURES

Viance crossing catheter
- Fast-spin torque handle enables tactile transfer of torque without capital equipment
- Atraumatic tip helps device remain in a tissue plane and leverage microchannels
- Multiwire coiled shaft provides 1:1 torque

Enteer re-entry system
- Flat-shaped balloon self-orients for consistent true lumen targeting
- Offset exit ports on each side allow for accurate guidewire placement





The Viance crossing catheter and Enteer re-entry system (Covidien, Mansfield, MA) offer a unique approach to the treatment of chronic total occlusions (CTOs) in peripheral arteries. These tools leverage finesse rather than the use of force, and physician skill rather than capital equipment.

"CTOs in the peripheral space are particularly challenging because of the pathologic nature of the lesions, often rendering them very difficult to cross and treat," said Antonis Pratsos, MD, Director of the Cardiac Catheterization Laboratory, Bryn Mawr Hospital, in Bryn Mawr, Pennsylvania. "Operators using traditional crossing approaches, while frequently effective in short lesions, struggle to cross longer, more challenging CTOs."

The low-profile Viance crossing catheter, with its fast-spin torque device, enables the physician to find small microchannels in a lesion. The distinctive shape of the Enteer re-entry balloon enables it to self-orient within a vessel, helping provide more reliable true lumen targeting without complete reliance on visualization.

"The Viance catheter may be a 'game changer' in the treatment of long total occlusions. In the appropriate lesion, I have had great success in the ability to cross CTOs with significant decrease in crossing time," said Jaafer Golzar, MD, FACC, FSCAI, of the MidAmerica Cardiovascular Consultants in Chicago, Illinois. "The Enteer re-entry device is a novel new technology. It requires no capital purchase and is available in two sizes, which allows re-entry in most vessel sizes including the distal tibial and pedal arteries." ■

Gore Hybrid Vascular Graft

COMPANY	W. L. Gore & Associates, Inc.
PHONE	(800) 528-8763
WEB	www.goremedical.com/eu/hybrid

KEY FEATURES

- Extended reach with endoluminal anastomosis maximizes access sites
- Designed to reduce intimal hyperplasia through improved hemodynamics
- Thromboresistant Carmeda BioActive Surface with stable, end-point covalently bonded heparin
- Durable nitinol-reinforced section, partially constrained for easy vessel insertion
- Kink-resistant and flexible at curves for optimal handling

W. L. Gore & Associates, Inc. (Flagstaff, AZ) has won the European Union's CE Mark for its Gore Hybrid Vascular Graft, a vascular prosthesis for replacement or bypass of diseased vessels impacted by aortic aneurysmal, peripheral vascular, and end stage renal disease.

The graft, which gained the US Food and Drug Administration's approval in March 2010, has been used to create new access sites in anatomical locations that would have otherwise been abandoned, preserving the amount of access sites available throughout the patient's long-term therapy.

Since commercialization, there have been more than 2,500 successful implants.

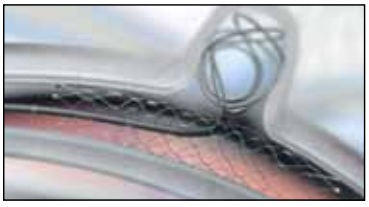
"The Gore Hybrid Vascular Graft bridges the gap between traditional vascular and endovascular surgery. It is the first significant innovation in vascular grafts in years, providing tremendous versatility," said Jean Bismuth, MD, Assistant Professor at the Methodist DeBakey Heart and Vascular Center in Houston. "The Gore Hybrid Vascular Graft allows the surgeon to create a sutureless anastomosis and displays significant potential for improving hemodynamics."

Acandis Acclino 1.9-F Stent System

COMPANY	Acandis
PHONE	+49 7231 155 00 0
WEB	www.acandis.com

KEY FEATURES

- Sizes compatible for vessel diameters of 2 to 4 mm
- Laser-cut nitinol stent is suitable for all cerebral main vessels
- Low-profile microcatheter has a 0.0165-inch inner lumen
- Radiopaque transport wire markers for positioning; gold markers at stent ends for visualization of the stent



Acandis GmbH & Co. KG (Pforzheim, Germany) recently announced the CE Mark approval of the company's Acclino 1.9-F stent system for use in the interventional neurovascular field as an adjunctive product in treating intracranial aneurysms with coils. Coils can be delivered by navigating the low profile microcatheter through the stent struts into the aneurysm, eliminating the need for catheter exchange.

The system offers sizes compatible for vessel diameters of 2 to 4 mm, making the stent suitable for all cerebral main vessels. The laser cut nitinol stent acts as a scaffold for the coils, and the closed cell design provides conformability even incurved segments, providing true vessel reconstruction at the neck of the aneurysm. The system is recapturable and repositionable for up to 90% of its deployed length. Accurate deployment is supported by radiopaque transport wire markers for positioning and gold markers at the stent ends for visualization of the stent.

"I appreciate how easily the new 1.9-F microcatheter tracked through tortuous anatomy," said Prof. Dr. René Chapot, Head of Neuroradiology Department, Alfried Krupp Hospital in Essen, Germany. "This system makes it very straightforward to position the stent accurately as there is very low friction during delivery and minimal stent foreshortening. In addition the stent opening and wall apposition due to the optimal radial force is really convincing." ■