Outback Re-Entry Catheter

COMPANY	LuMend, Inc
PHONE	(888) 390-5694
WEB	www.lumend.com

KEY FEATURES

- Curved 22-gauge nitinol re-entry cannula
- Fluoroscopic marking system and orientation references
- Over-the-wire delivery platform
- Torque control to facilitate device positioning toward target re-entry site
- 6-F sheath and .014-inch-guidewire–compatible catheter-based platform

In order to treat a CTO patient with minimally invasive therapy, an endovascular specialist must first successfully cross the blockage and place a guidewire in the "true" lumen of the artery beyond the occlusion. Because some CTOs are composed of hard, rock-like plaque, it can be very difficult for the physician to cross the blockage. As a result, it is not uncommon for the crossing device to be diverted outside of the true lumen and into the "false" lumen of the artery. The process of re-entering the true lumen can be arduous and extremely time consuming. The Outback Re-Entry Catheter is designed to enable rapid re-entry of a guidewire from the subintimal space back into the true lumen of a peripheral artery when crossing a CTO. Once this is achieved, the endovascular procedure can continue.

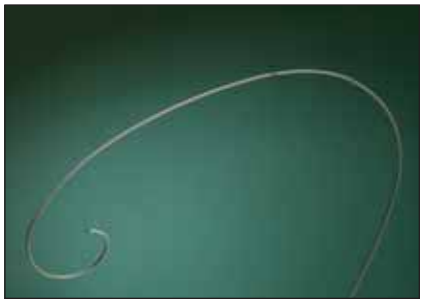
"The Outback Re-Entry Catheter has proven to be an extremely effective, simple, and safe device for predictable re-entry into the true lumen of the artery," explains Dr. Mark Mewissen, MD, Director of St. Luke's Vascular Center in Milwaukee, Wisconsin. "This advancement in technology should broaden the opportunity to successfully treat patients with peripheral occlusive disease who traditionally are not considered candidates for percutaneous, less-invasive catheter interventions."

LES3 Lunderquist Extra Stiff Wire Guide

COMPANY	Cook Incorporated
PHONE	(800) 468-1379
WEB	www.zenithstentgraft.com

KEY FEATURES

- LES3 is pre-curved to mimic aortic anatomy
- Used when extremely stiff wire guides are required
- TFE-coated stainless steel mandril with a double curved tip design
- Soft tapered distal end designed to be atraumatic



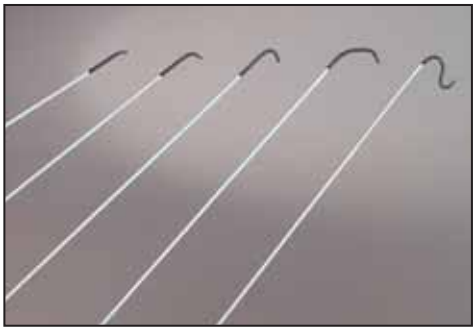
Cook Incorporated (Bloomington, IN) introduces the LES3 Lunderquist Extra Stiff Double Curved Exchange Wire Guide for use when extremely stiff wire guides are required to introduce endovascular grafts. The pre-curved distal end mimics aortic anatomy and provides increased stability during device introduction. Cook states that the shaft is nearly 20% stiffer than the nearest competitor wire, giving needed support for large French-sized introducers. The proximal end is tapered as well, providing smooth undamaged introduction for device lumens that are inserted over it.

Beacon Tip Van Schie Seeking Catheters

COMPANY	Cook Incorporated
PHONE	(800) 468-1379
WEB	www.zenithstentgraft.com

KEY FEATURES

- For catheterization of bifurcated endoluminal stent grafts
- Five tip configurations to accommodate iliac arteries of varying tortuosities
- Radiopaque Beacon Tips enhance visualization



Cook Incorporated (Bloomington, IN) has launched the Beacon Tip Van Schie Seeking Catheters. Five selective angiographic catheter shapes allow users to choose the right tool for contralateral limb cannulation of AAA devices. From simple straight iliac takeoffs (Van Schie 1) to difficult posterior iliac takeoffs (Van Schie 5), these catheters save manipulation time for the operator. Radiopaque Beacon Tips make the catheters extremely bright fluoroscopically through dense tissue. With braided 5-F shafts in 65-cm lengths, the Beacon Tip Van Schie Seeking Catheters make short work of contralateral limb cannulation, the company states.

IQ Guide Wire

COMPANY	Boston Scientific Corporation
PHONE	(508) 650-8000
WEB	www.bostonscientific.com

KEY FEATURES

- Spring tip
- Stainless steel shaping ribbon
- MP35N Alloy high-performance spring coil
- Linear elastic nitinol distal core
- IQ marker guidewire features two 5-mm markers, with 15 mm between markers
- Available in 185-cm and 300-cm lengths, in both straight and J-tip configurations

The IQ Guide Wire (Boston Scientific Corporation, Natick, MA) is designed to provide physicians exceptional control in a variety of workhorse cases. The device features two new resilient materials in the outer spring coil and the distal core to help ensure dependable performance. The outer spring coil of the IQ Guide Wire consists of MP35N Alloy—a resilient, durable, high-performance material—designed to reduce coil damage during wiring of lesions. Reducing coil damage may ease device delivery and compatibility issues. The distal core of the IQ Guide Wire consists of linear elastic nitinol, providing support in a bend, allowing for enhanced tracking and device delivery in bench testing. In addition, linear elastic nitinol provides excellent torque response.

The IQ Guide Wire complements Boston Scientific's PT2 Guide Wire, launched in June 2003, which is designed for use in more difficult cases, such as tight lesions or multivessel disease.

MP35N is a trademark of SPS Technologies, Inc.