CATHWORKS

TWO-YEAR CLINICAL OUTCOMES OF FFRANGIO-GUIDED TREATMENT FOR CORONARY ARTERY DISEASE

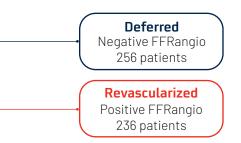
Observational study in centers who were early adopters of the CathWorks FFRangio® System

Study Design

CV death / MI / RR

Repeat revascularization

Managed per **FFRangio** Guidance 492 patients (552 lesions)



100% follow-up

5.5%

The revascularized cohort included a higher proportion of patients who suffered from diabetes, were active smokers and/or

FFR ANGIO

Baseline Characteristics

	All (n=492)	Deferred (n=256)	Revascularized (n=236)	P-value
Male	350(71.1%)	160(45.7%)	190(80.5%)	<0.01
Diabetes mellitus	202(41.1%)	89(34.9%)	113(47.6%)	<0.01
Active smoker	117(24.6%)	53(21.5%)	64(27.8%)	0.26
Acute coronary syndrome	263(53.4%)	122(47.6%)	141(59.7%)	0.02

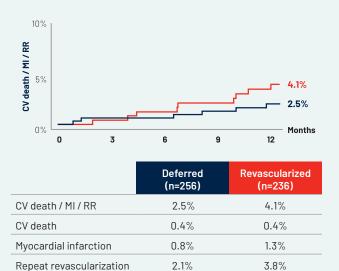
presented with acute coronary syndrome. Results 10% 7.6% 4.1% 5% 3.5% 2.5% 0% 0 12 24 Months Deferred (n=256) Revascularized (n=236) CV death / MI / RR 3.5% 7.6% CV death 0.4% 0.9% Myocardial infarction 0.8% 1.3%

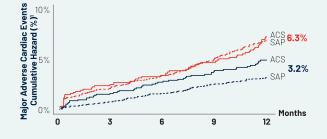
FFRangio-guided treatment yields excellent outcomes for both revascularized and deferred patients, which is consistent with current data for wire-based FFR-guided treatment.

2.8%

Results in Perspective – 1 Year

In the largest wire-based FFR pooled analysis reported to date, a similar rate of events was observed between the deferred (negative FFR) and revascularized (positive FFR) cohorts as was reported in the FFR angio study.



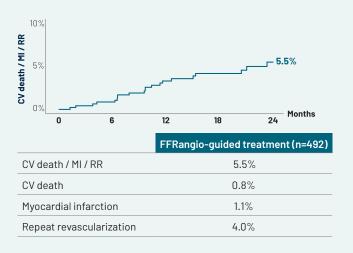


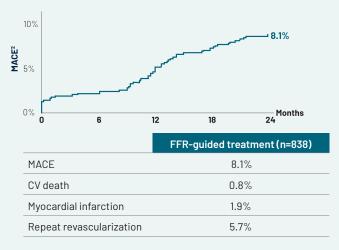
	Deferred	Revascularized	
	(n=5129)	(n=3450)	
MACE	3.2%	6.3%	
Death	0.6%	0.8%	
Myocardial infarction	0.6%	1.8%	
Unplanned revascularization	2.3%	4.5%	

Patients were safely deferred when following FFRangio guidance, demonstrated by a similar repeat revascularization rate as seen in wire-based studies.

Results in Perspective – 2 Years

The two-year real world results for patients treated based on FFRangio guidance were in line with what the FLAVOUR study investigators found in their FFR cohort. This is even more meaningful when we consider the risk profile of the FFRangio patient population which had a higher prevalence of diabetes, previous myocardial infarction, active smokers and acute coronary syndrome presentation as compared to the FFR patient population in the FLAVOUR study.





1. Cerrato E, Mejia-Renteria H, Dehbi HM et al. Revascularization deferral of nonculprit stenoses on the basis of fractional flow reserve: 1-year outcomes of 8,579 patients. JACC Cardiovasc Interv. 2020 Aug 24:13(16):1894-1903.

2. Koo b, Hu X, Kang J, et al. Fractional flow reserve or intravascular ultrasonography to guide PCI. N Engl J Med. 2022 Sep 1;387(9):779-89.

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