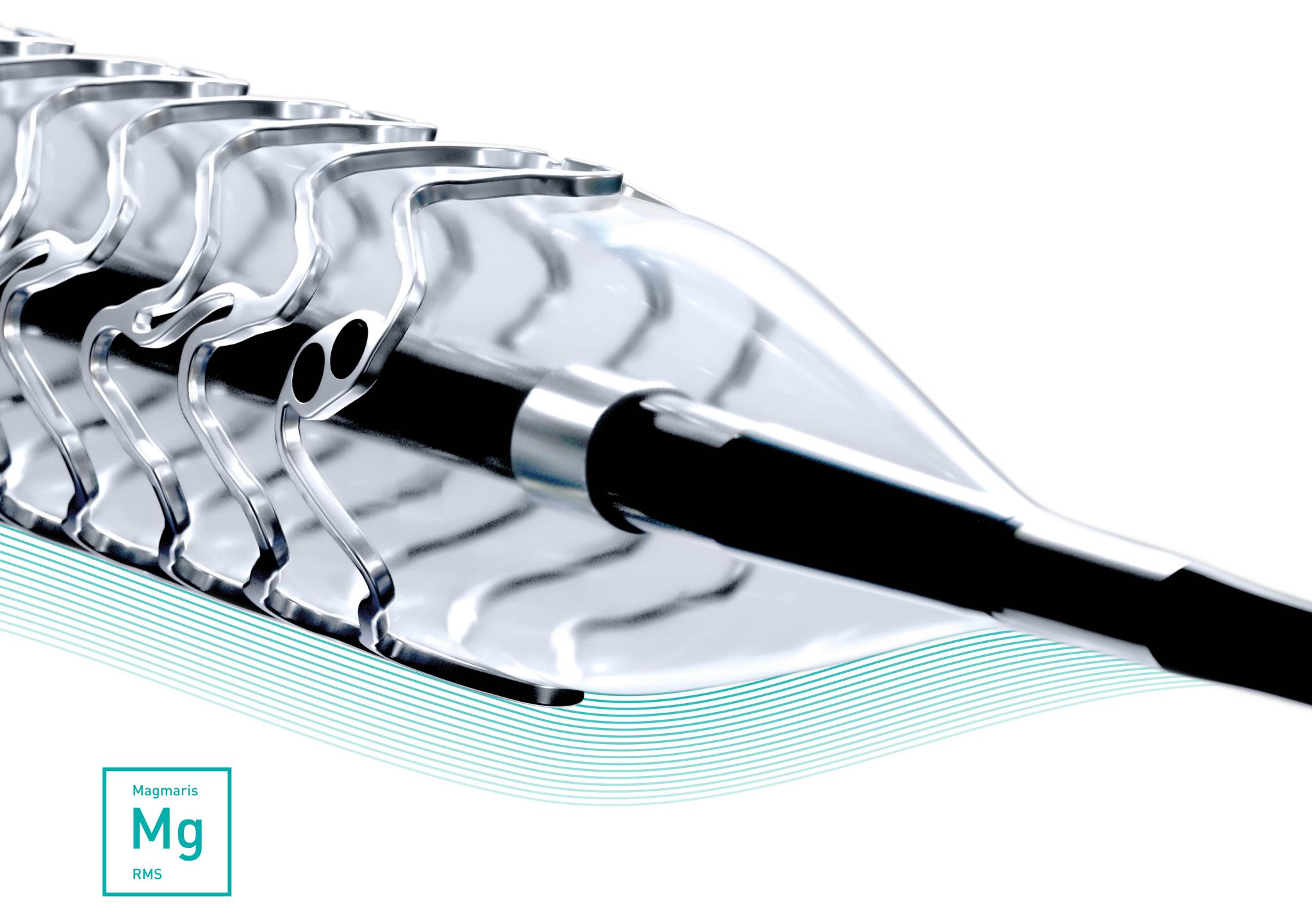


Vascular Intervention // Coronary Resorbable Magnesium Scaffold (RMS)



Magmaris®

In a class of its own.



^{*}Based on BIOSOLVE-II, -II/-III and -IV, for patient populations see study details.



Magmaris

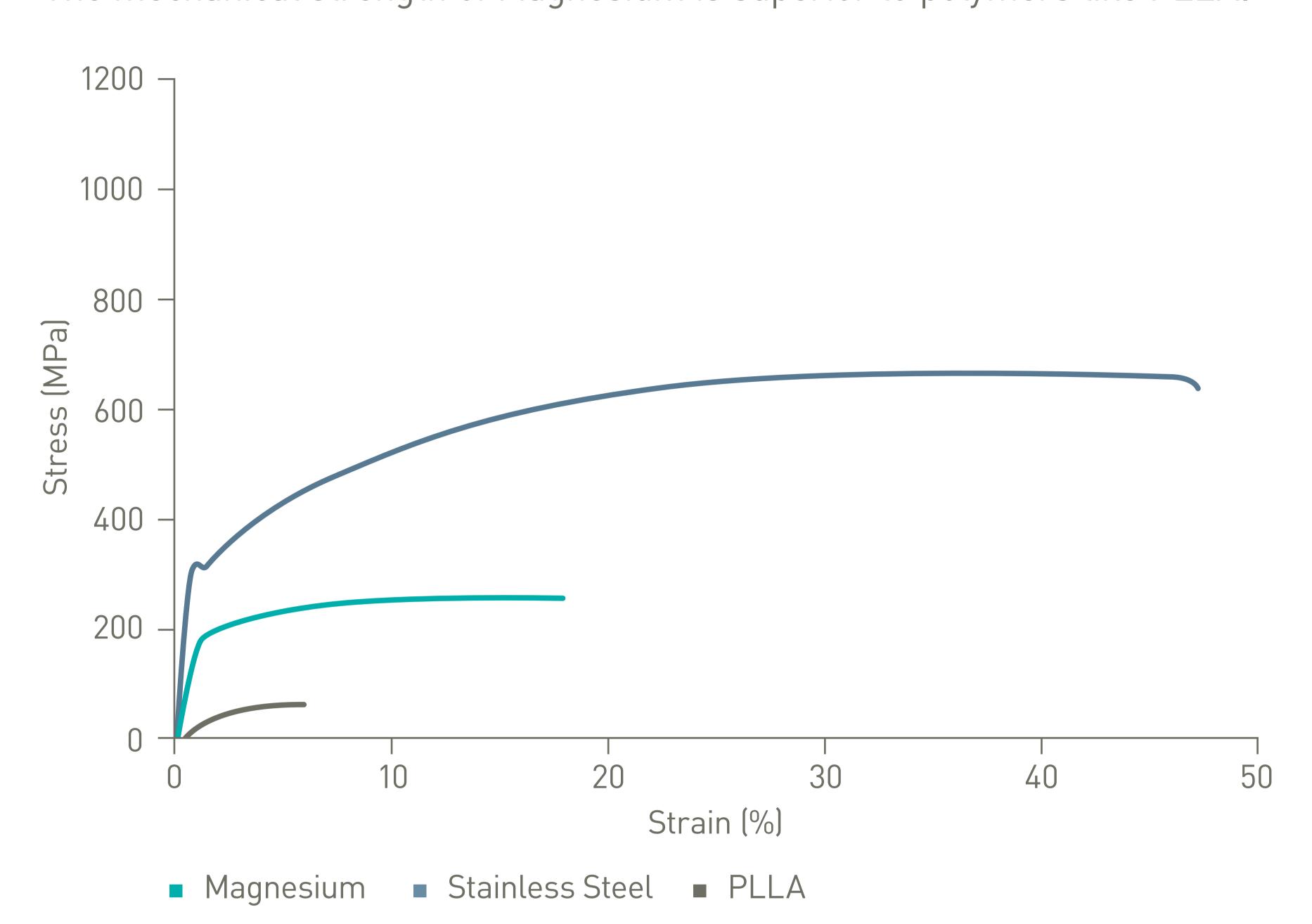
In a class of its own.

Why Magnesium?

Magnesium alloy: favorable mechanical properties of a robust Magnesium backbone

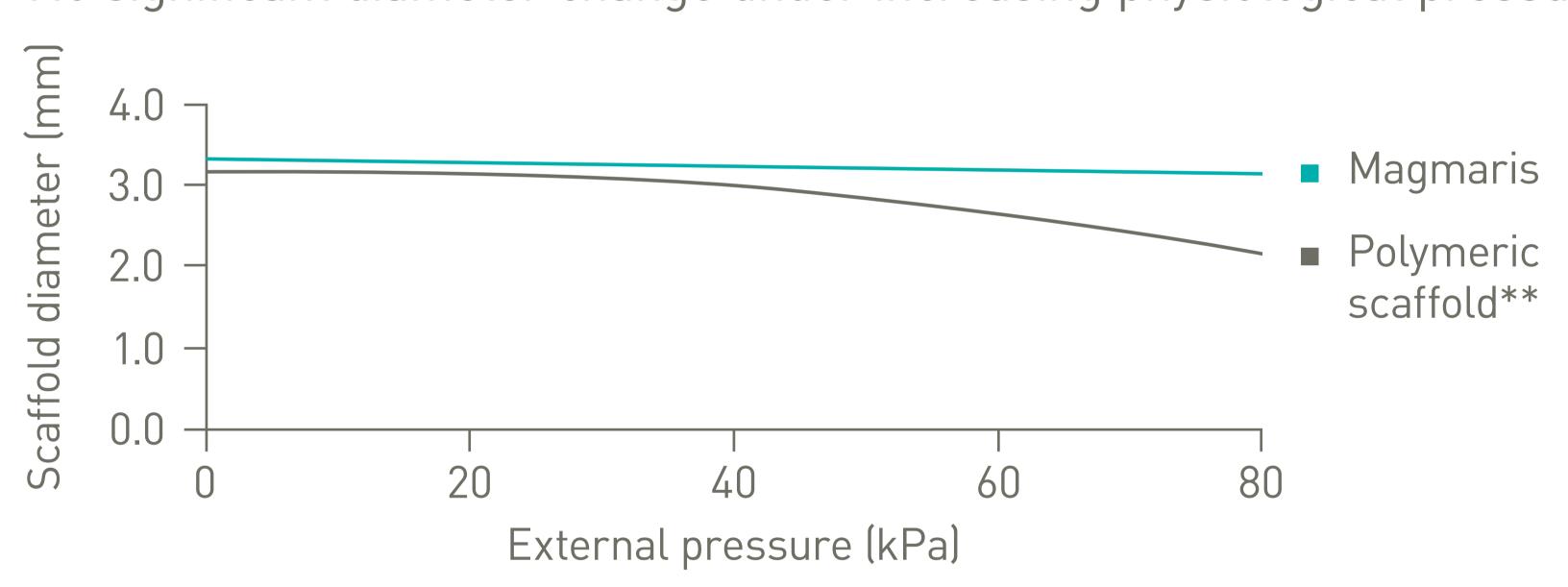
Robust Magnesium backbone

The mechanical strength of Magnesium is superior to polymers like PLLA.¹



Strong radial resistance

No significant diameter change under increasing physiological pressure.3



Stable recoil

Magmaris has a 38% lower recoil after 1 hour.²

Acute recoil

Magmaris 3.0/20

Polymeric scaffold**

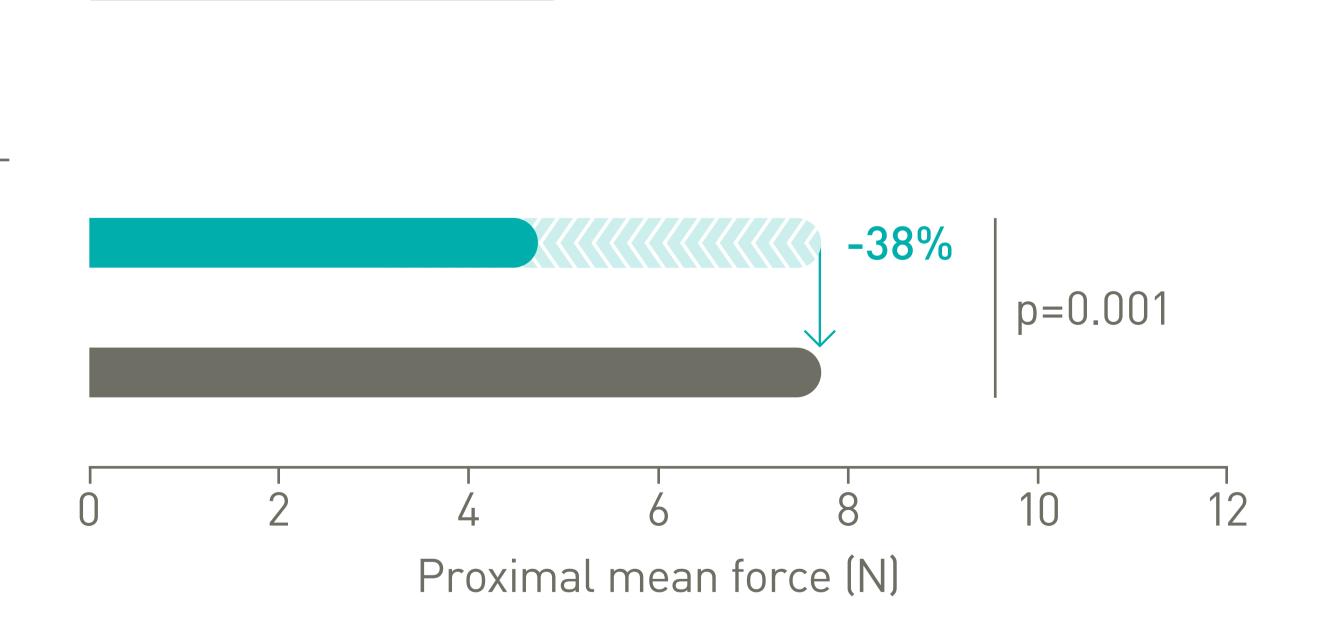
Polym 3.0/18

Recoil after 1 hour

Magmaris 3.0/20

Polymeric scaffold**

3.0/18



^{**}Absorb, Abbott

Rounded edges and smooth surface

The electropolished rounded edges and smooth surface of the Magmaris scaffold generate less resistance during delivery of the scaffold to the lesion.





Confirmed clinical safety and efficacy*

Confidence through evidence

12 months (Full cohort)

BIOSOLVE-IV4 (n=2,066)

5.0% TLF*

 $0.8\%^{\Delta}$

Definite/probable scaffold thrombosis

36 months (First cohort)

BIOSOLVE-IV⁵ (n=1,075)

8.2% TLF*

0.6%

Definite/probable scaffold thrombosis

36 months

BIOSOLVE-II/-III6(n=184)

6.3% TLF *

 $0.0^{0}/_{0}$

Definite/probable scaffold thrombosis

60 months

BIOSOLVE-II⁷ (n=123)

8.0% TLF\$

0.0%

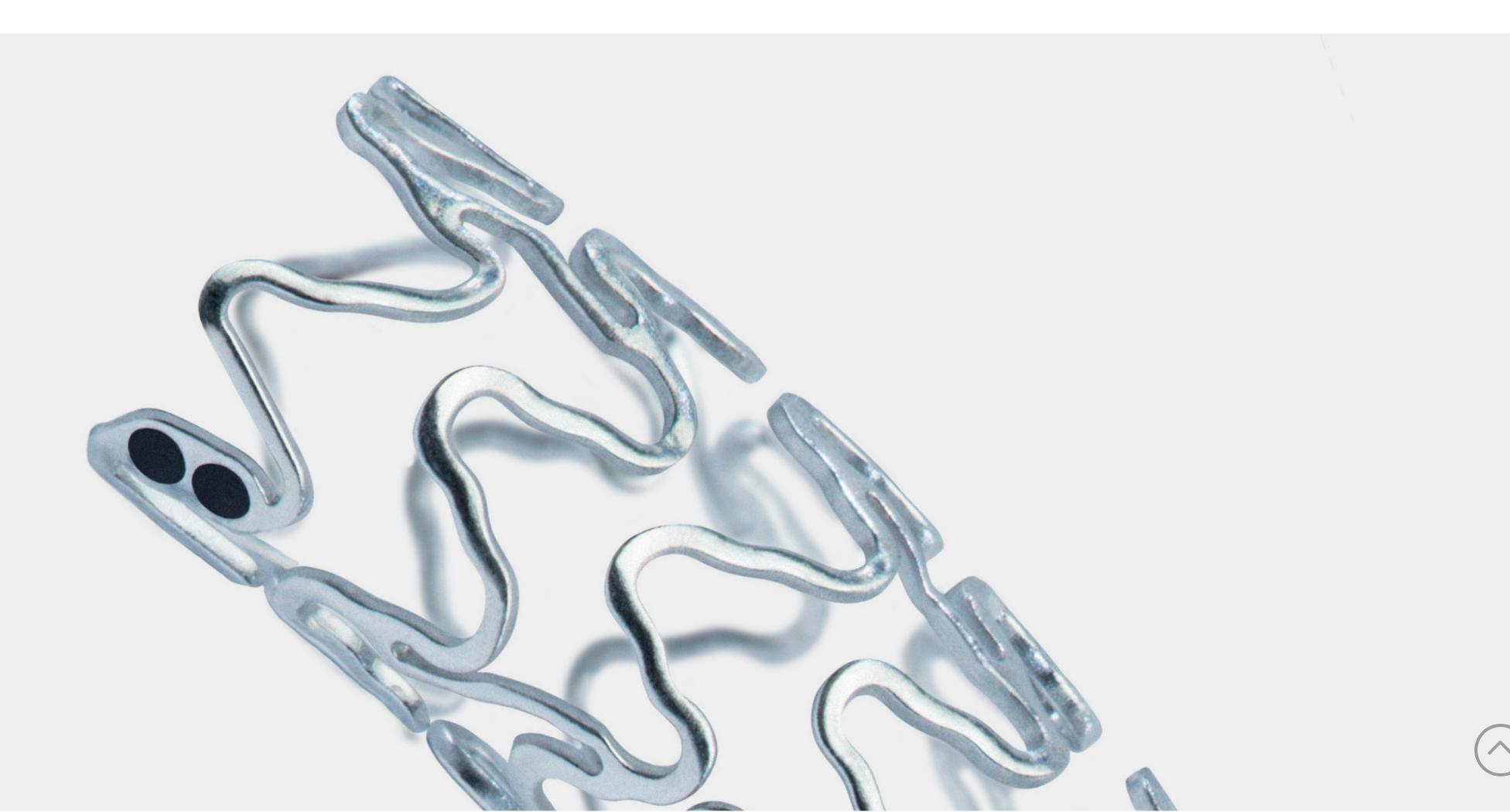
Definite/probable scaffold thrombosis

All n-values represent the actual number of patients enrolled.

* Based on BIOSOLVE-II, -II/-III and -IV, for patient populations see study details.

° 0.5% scaffold thrombosis rate excluding cases with early antiplatelet or anticoagulant interruption.

 Δ 0.4% of cases without early antiplatelet or anticoagulant interruption at post procedure.

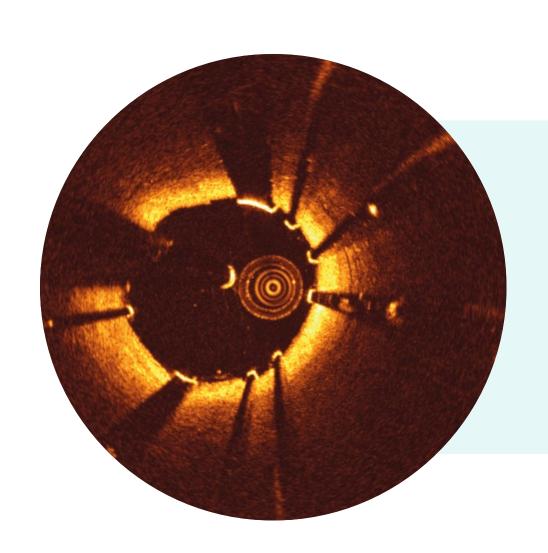


[♦] Target Lesion Failure (TLF) defined as a composite of Cardiac death, Target-Vessel Myocardial Infarction (TV-MI), emergent Coronary Artery Bypass Grafting (eCABG), and Clinically-Driven Target Lesion Revascularization (CD-TLR).

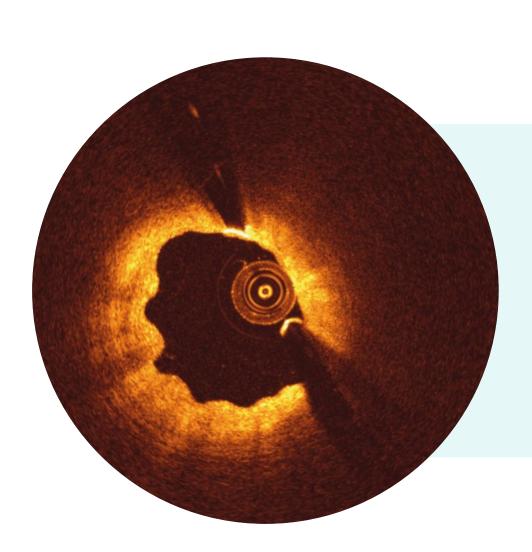


Fast resorption time

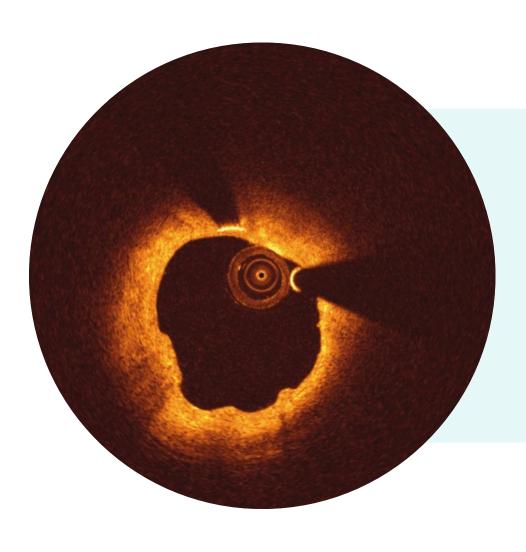
~95% of Magnesium resorbed at 12 months⁸



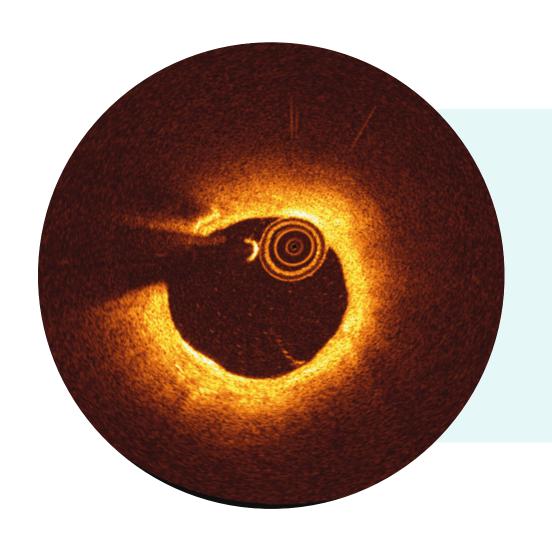
OCT post implantation⁹ Immediately after implantation, struts are well apposed to the vessel wall.



OCT at 6 months⁹
While the Magnesium resorption process continues, endothelialization progresses.



OCT at 12 months⁹
At 12 months after implantation, the Magnesium resorption is almost completed.



OCT at 36 months⁹
At 36 months the lumen is well preserved with a homogeneous surface.

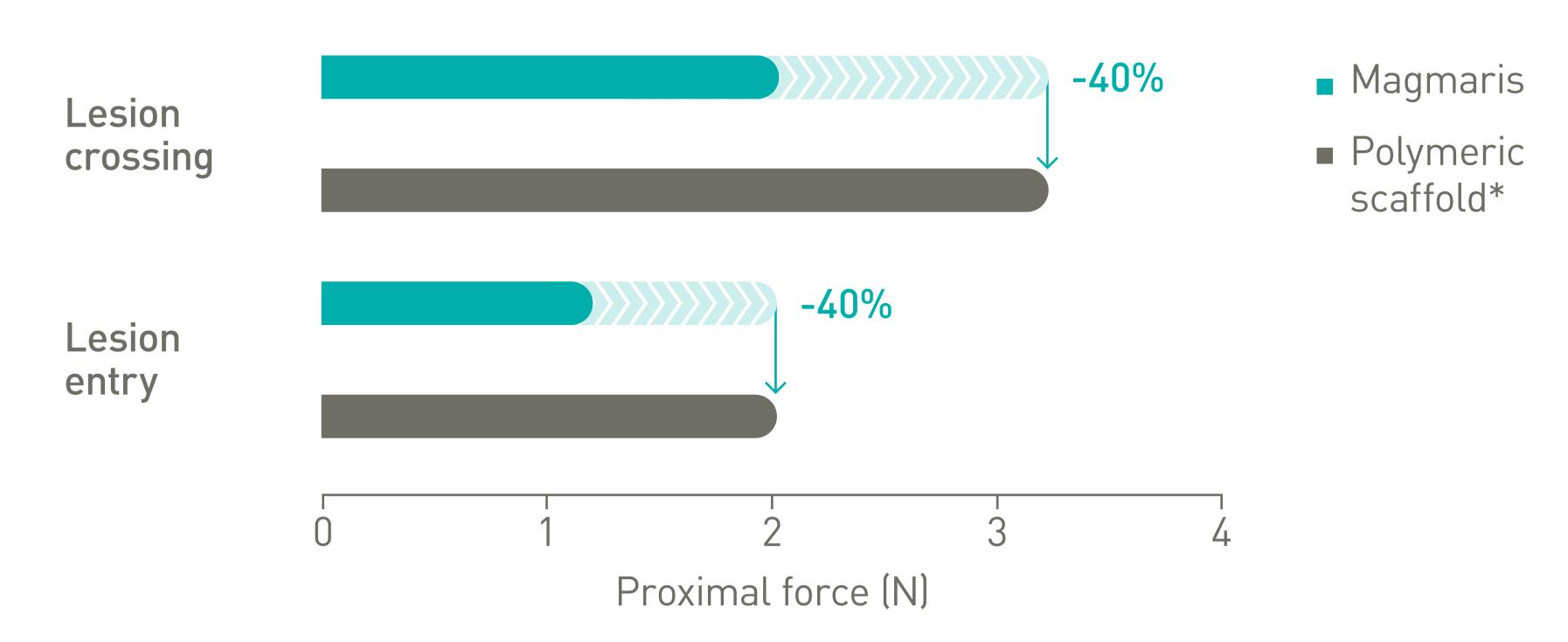


A more deliverable scaffold

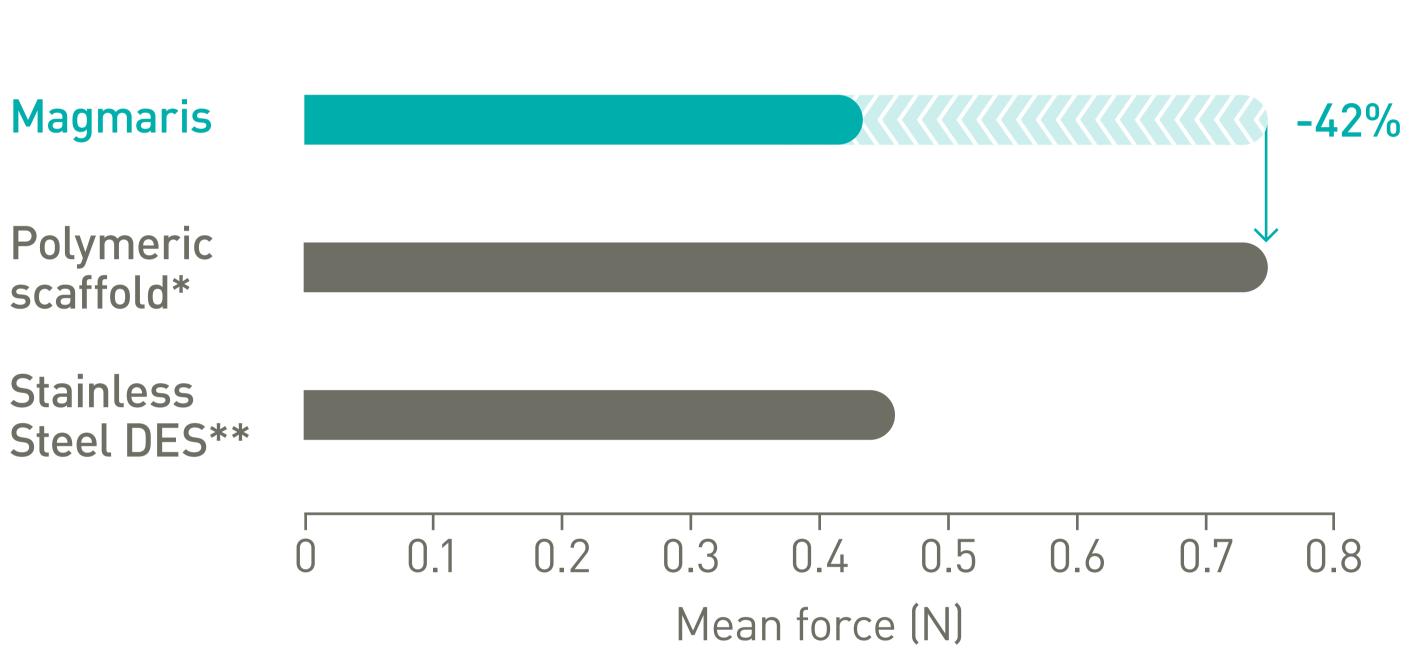
More than 70% of physicians who have used Magmaris RMS in clinical practice have rated the device to be better than a polymeric scaffold.^{10*}

Better lesion crossing

Up to 40% lower lesion entry and crossing force.¹¹



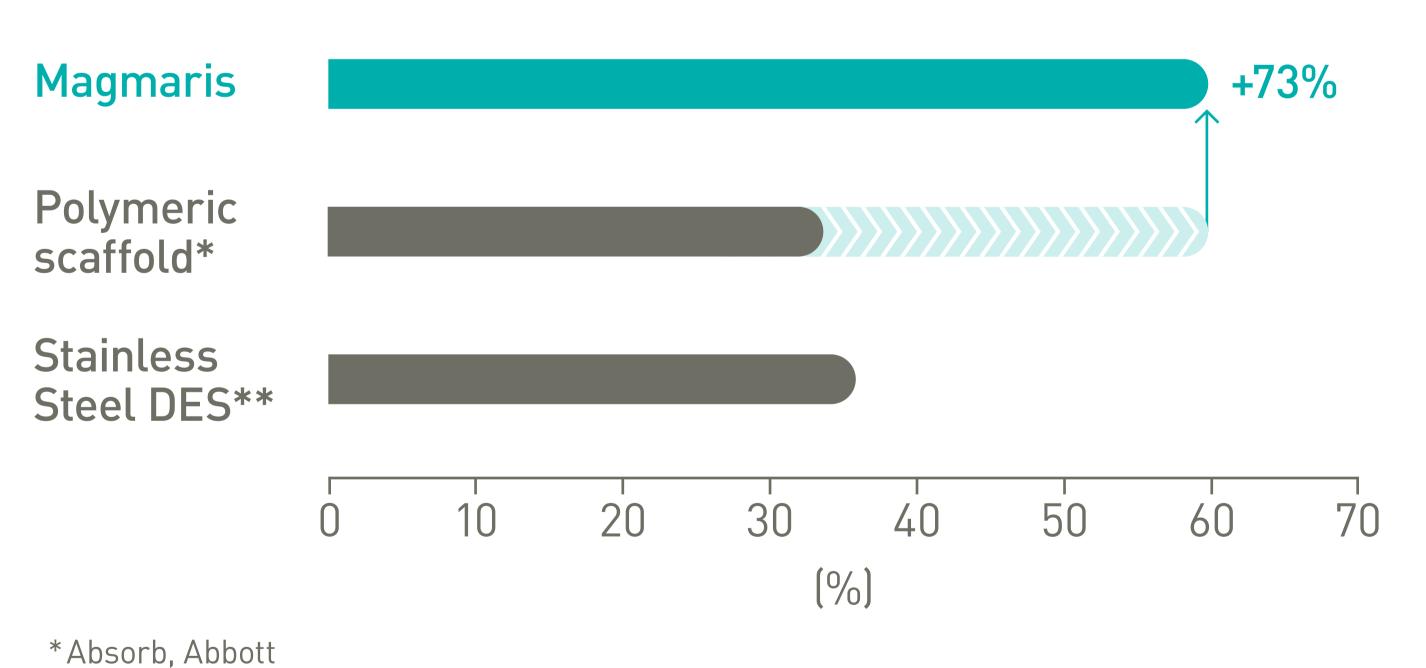
Better trackability in tortuous anatomy

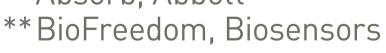


Better pushability

42% less peak force.¹²

73% more force transmitted from hub to tip.13





Stent/Scaffold strut thickness in perspective

Magmaris RMS

Magmaris RMS

150 µm

Polymeric scaffold*

150 µm

150 µm

Stainless Steel DES**

DES**

120 µm







Magmaris®

Indicated for de novo coronary artery lesions.*

Vascular Intervention Coronary



| Technical Data | Scaffold |
|----------------|----------|

| Scarrota | |
|-----------------------------|--|
| Scaffold material | Proprietary Magnesium alloy |
| Markers | Two tantalum markers at each end |
| Active coating | BIOlute (resorbable Poly-L-Lactide (PLLA) eluting a limus drug) |
| Drug dose | 1.4 μg / mm² |
| Strut thickness/width | 150 μm / 150 μm |
| Maximum expandable diameter | Nominal Diameter +0.6 mm |

Delivery system

| Catheter type | Rapid exchange |
|----------------------------|-------------------------------------|
| Recommended guide catheter | 6F (min. I.D. 0.070") |
| Crossing profile | 1.5 mm |
| Guide wire diameter | 0.014" |
| Usable catheter length | 140 cm |
| Balloon material | Semi-crystalline polymer |
| Coating (distal shaft) | Dual coated |
| Marker bands | Two swaged platinum-iridium markers |
| Proximal shaft diameter | 2.0F |
| Distal shaft diameter | 2.9F |
| Nominal pressure (NP) | 10 atm |
| Rate burst pressure (RBP) | 16 atm |

Balloon diameter (mm) **Compliance Chart**

| | | ø 3.00 | ø 3.50 |
|-------------------------------|--------|--------|--------|
| Nominal Pressure (NP) | atm** | 10 | 10 |
| | ø (mm) | 3.00 | 3.54 |
| Rated Burst Pressure (RBP) | atm** | 16 | 16 |
| | ø (mm) | 3.29 | 3.82 |

**1 atm = 1.013 bar

| Ordering Information | Scaffold ø (mm) | Scaffold length (mm) | | | |
|----------------------|--------------------|-------------------------|--------|--------|--|
| | | 15 | 20 | 25 | |
| | 3.00 | 412526 | 412527 | 412528 | |
| | 3.50 | 412529 | 412530 | 412531 | |

1-3, 10-13. BIOTRONIK data on file; 4. Bennett J. Performance and safety of the resorbable magnesium scaffold, Magmaris in a real-world setting – Primary and secondary endpoint analysis of the full cohort (2,066 subjects) of the BIOSOLVE-IV, Presented at: TCT 2021, November 2021, Orlando, USA. ClinicalTrials.gov: NCT02817802; 5. Torzewski J. Safety and performance of Magmaris at 36-months: BIOSOLVE-IV first cohort. Presented at: EuroPCR; 2022; ClinicalTrials.gov: NCT02817802; 6. Haude M, Ince H, Kische S, et al. Sustained safety and performance of the second-generation sirolimuseluting absorbable metal scaffold: Pooled outcomes of the BIOSOLVE-II and -III trials at 3 years. Cardiovascular Revascularization Medicine. 2020. doi: 10.1016/j.carrev.2020.04.006; 7. Haude M, Toelg R, Lemos P.A et al. Sustained safety and performance of a second-generation sirolimus-eluting absorbable metal scaffold: Long-term data of the BIOSOLVE-Ilfirst-in-mantrialat5years.CardiovascularRevascularizationMedicine.2021.doi:10.1016/j.carrev.2021.07.017; 8. Joner M, Ruppelt P, Zumstein P, et al. Preclinical Evaluation of Degradation Kinetics and Elemental Mapping of First and Second Generation Bioresorbable Magnesium Scaffolds. EuroIntervention. 2018 Feb 20. pii: EIJ-D-17-00708. doi: 10.4244/EIJ-D-17-00708. [Epub ahead of print]; 9. BIOSOLVE-II case, GER443-012. Courtesy of Prof. M. Haude, Rheinland Klinikum Neuss GmbH, Neuss, Germany 2015.

BIOSOLVE-II and -IV based on Kaplan-Meier failure estimate analysis including censored observations. The pooled analysis of BIOSOLVE-II and -III based on frequency analysis. The 36-month data of BIOSOLVE-II and -III analysis reflecting a period up to 1'125 days at 3 years. Magmaris and BIOlute are trademarks or registered trademarks of the BIOTRONIK Group of Companies. Absorb is a trademark or registered trademark of the Abbott Group of Companies. BioFreedom is a trademark or registered trademark of Biosensors International Group, Ltd.

Specifications are subject to modification,

revision and improvement.

*Indication as per IFU.

BIOTRONIK AG Ackerstrasse 6 8180 Bülach, Switzerland Tel +41 (0) 44 8645111 Fax +41 (0) 44 8645005 info.vi@biotronik.com www.biotronik.com

BIOTRONIK © 2022 BIOTRONIK AG – All rights reserved. excellence for life

