New Drug Coated Balloons in Femoro-Popliteal Disease in Korea

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Martin-Luther-Krankenhaus Ein Unternehmen der Paul Gerhardt Diakonie



Drug-coated balloons offer physicians an attractive value proposition for the treatment of lower limb disease

- Encouraging results have been seen in de novo, restenotic lesions, instent restenosis and in A-V access stenosis
- Some logical indications might include:
- "no-stent" zones e.g. CFA lesions
- segments prone to restenosis e.g. long AK lesions

Benefits

- Anti-proliferative therapy while leaving nothing behind
- Broad anatomical applicability
- Easily repeatable
- Avoid stent fracture and ISR burden
- Preserve future options
- Matches patient's quality of life expectations (improvement in walking
- capacity, Rutherford class)

Limitations

- Not proven in highly calcified lesions
- When provisional stent is required = higher procedural cost







IN.PACT[™] DEB with FreePac[™] Coating Technology



IN.PACT[™]

 Medtronic-Invatec DEB balloon line

FreePac[™]

- Proprietary hydrophilic coating formulation
 - Urea separates Paclitaxel molecules
 - Increased drug solubility and optimal diffusion into vessel wall
 - Urea facilitates Paclitaxel absorption into the vessel wall

Paclitaxel blocks the cell cycle directly

Mode of action for Paclitaxel and Limus drugs



- Paclitaxel inhibits the cell cycle directly vs. limus drugs which act indirectly
- DCBs aim for a high-dose effect of paclitaxel, causing cell's mitotic arrest
- A low-dose effect is expected to sustain antiproliferation long term

DEB Drug Transfer



Paclitaxel's hydrophobicity along with the increased solubility conferred by the excipient allows for rapid drug transfer across the vessel wall.

Device Description

CE

EU market release March 2009

IN.PACT ADMIRAL Catheter designOver the wire (OTW)Diameters4, 5, 6, 7 mmLengths40, 60, 80, 120 mmMax recommended Guide wire0.035"Usable shaft length80 & 130 cmBalloon materialFLEXITEC™ XtremeCoatingFreePac™Shaft diameter5FIntroducer sheath compatibility5F - 6FNominal pressure8 bar

RBP up to 18 bar

		Balloon	Balloon	Recom.	
REF No.	REF No.	Diameter	Length	Introducer	
(shaft length 80 cm)	(shaft length 130 cm)	(mm)	(mm)	sheath (F)	RBP
SBI 040 040 08P	SBI 040 040 13P	4	40	5	18
SBI 040 060 08P	SBI 040 060 13P	4	60	5	18
SBI 040 080 08P	SBI 040 080 13P	4	80	5	18
SBI 040 120 08P	SBI 040 120 13P	4	120	5	18
SBI 050 040 08P	SBI 050 040 13P	5	40	6	17
SBI 050 060 08P	SBI 050 060 13P	5	60	6	17
SBI 050 080 08P	SBI 050 080 13P	5	80	6	15
SBI 050 120 08P	SBI 050 120 13P	5	120	6	15
SBI 060 040 08P	SBI 060 040 13P	6	40	6	17
SBI 060 060 08P	SBI 060 060 13P	6	60	6	17
SBI 060 080 08P	SBI 060 080 13P	6	80	6	15
SBI 060 120 08P	SBI 060 120 13P	6	120	6	15
SBI 070 040 08P	SBI 070 040 13P	7	40	6	16
SBI 070 060 08P	SBI 070 060 13P	7	60	6	14
SBI 070 080 08P	SBI 070 080 13P	7	80	6	14

EVALUATE NOTA STEP AHEAD IN SFA TREATMENT





LUTONIX[®] 035 Formulation

LUTONIX[®] 035 has an optimized formulation designed to maximize efficacy without compromising safety

LUTONIX[®] 035's effective 2 µg/mm² dose of paclitaxel reduces exposure of the drug, but provides a therapeutic effect to achieve patency of the target vessel





Drug + Carrier = Coating

Drug

LUTONIX® 035 drug dose of Paclitaxel is 2µg/mm²

Carrier

Polysorbate and Sorbitol

Coating

Facilitates therapeutic drug retention and release of drug at the treatment site

LUTONIX[®] 035 Design: Coating Integrity Sheath/Tuohy Passage Test



Limit drug flaking during balloon preparation and handling Potentially minimizing unnecessary drug exposure to staff and patients*

LUTONIX[®] 035 has a durable coating, with ≤0.08% drug dose lost within the introducer sheath during insertion.*



<u>Durability</u> of coating preserved through sheath value or tuohy insertion

Coating Uniformity Coating Variability Analysis		
TRIABILIT	Coating Uniform Analysis*	nity
	Segment-to-Segment Variability	± 4.0%
	Longitudinal Segment Variability	± 2.7%

LUTONIX[®] 035 is uniformly coated while inflated allowing for 360° paclitaxel coverage to the target vessel.*

"Bench test and pre-clinical animal study data on file. Bench results and pre-clinical data may not be indicative of clinical performance. Different test methods may yield different results.

Durability Matters: Drug Loss During Dry Inflate Shake Test







LUTONIX® 035 balance of 2.0 µg/mm² of paclitaxel and carriers polysorbate and sorbitol, minimizes unwanted drug loss

"Dry Inflate/Shake Bench Test data on file, Berd Peripheral Vascular, Tempe, AZ. Dry Inflate/Shake test measured the average drug content lost after balloon was inflated, and after lightly knocking each device egainst the sides of the centrifuge tube, left and right, five times. n=5 for both devices tested. Bench test results may not be indicative of clinical performance. Different test methods may yield different results.

DCB Tissue Concentration

LUTONIX

Drug Coated Balloon

Rapid Uptake with Sustained Therapeutic Dose of Paclitaxel Arterial Tissue Concentration







- 035 Guidewire Compatible, Nylon, Semi-compliant Balloon
- Over the wire, Co-axial shaft
- 2 Radiopaque platinum: 1mm markers delineate balloon length
- Balloon protector sleeve and stylet in place

Dia. (mm)		Ва	alloon Le	Nomina I (atm)	RBP (atm)	Sheath Profile			
4	40	60	80	100	120	150	6	12	5 Fr
5	40	60	80	100	120	150	6	12	5 Fr
6	40	60	80	100	120	150	7	12	6 Fr

Pre-Dilatation

- Adequately pre-dilate to at least 1 mm of the reference vessel diameter
 - After pre-dilation, LUTONIX[®]
 035 should extend approximately 5 mm proximally and distally beyond the pre-dilatation injury segment
 - Use of a radiopaque ruler or vascular tape is recommended to ensure appropriate placement of the LUTONIX[®] 035





ON Treatment with LUTONIX® 035

Procedure Summary

Key Procedure Goals

- 1. Complete dilation of the diseased segment to reference vessel diameter
- 2. Complete coverage of treatment area with drug (DCB)



Passeo-18 Lux



Passeo-18 Lux – Device Specifications

Catheter type	OTW
Recommended guide wire	0.018"
Тір	Short, tapered
Balloon markers	2 swaged markers (zero profile)
Shaft	3.8F, hydrophobic coated
Usable length	90 and 130 (150*) cm
Introducer size	4F (ø 2.0, 2.5, 3.0, 4.0 mm); 5F (ø 5.0, 6.0, 7.0 mm)
Nominal Pressure (NP) Rated Burst Pressure (RBP)	6 atm 15 atm (ø 2.0, 2.5, 3.0, 4.0, 5.0 mm); 12 atm (ø 6.0, 7.0 mm)
Drug	Paclitaxel
Drug dose Delivery matrix	3.0 μg/mm ² Paclitaxel and butyryl-tri-hexyl citrate (BTHC)
Coated area	Cylindrical section of the balloon, exceeding the proximal and distal balloon markers

Balloon Catheter

Coating

Passeo-18 Lux – Ordering Information

Compliance and Compatibility charts

	Balloon Diameter x Length [mm]										
		2 x 40-120	2.5 x 40-120	3 x 40-120	4 x 40-120	5 x 40-120	6 x 40-120	7 x 40-120			
	NP (atm)	6	6	6	6	6	6	6			
	Ø[mm] 2.0		2.5	3.0	4.0	5.0	6.0	7.0			
	RBP (atm)	15	15	15	15	15	12	12			
	Ø [mm]	2.1	2.6	3.3	4.3	5.2	6.3	7.2			
	Catheter Length [cm]	Ballo Diam	on eter [mm]	Balloc Length	n 1 [cm]						
					40	80		120			
	90		2.0	379860		379861		379862			
	90		2.5		379866	379867		379868			
41	90		3.0		370843	370848		370853			
	90		4.0		370844	370849		370854			
	90		5.0		370845	370850		370855 370856			
5F	90				370846	370851					
	90		7.0		370847	370852		370857			
	150		2.0		379863	379864		379865			
	130		2.5		379869	379870		379871			
41	130		3.0		370858	370863		370868			
	130		4.0		370859	370864		370869			
	130		5.0		370860	370865		370870			
5F	130		6.0		370861	370866		370871			
	130		7.0		370862	370867		370872			

Passeo-18 Lux combines proven technologies for treating lower limb arteries



BTHC improves coating integrity and durability

Device	Excipient	Туре	Solubility [*]
Passeo-18 Lux	Butyryl-tri-hexyl citrate (BTHC)	Hydrophobic	Very low
Lutonix	Polysorbate/sorbitol	Hydrophilic/ hydrophobic	Fast dissolving
In.Pact	Urea	Hydrophilic	Fast dissolving

- Coating characteristics are modified when surface is wettened
- Hydrophilic excipients are more soluble and dissolve faster
- Hydrophobic excipients can improve coating integrity ensuring more drug is available at the lesion site

Coating Integrity* After submerging and deployment of a 5x40mm

balloon in physiological solution at 37° C



Coating Integrity*

After submerging and deployment of a 5x40mm balloon in physiological solution at 37° C



*In water Data on file at BIOTRONIK (IIB Test)

Passeo-18 Lux delivers sufficient drug to give long lasting therapeutic effect



- A high tissue concentration is achieved after balloon inflation
- Drug concentration rapidly declines within 7 days
- Therapeutic effect is sustained at 28 days
- Prolonged presence of drug in vessel tissue is important for clinical efficacy

Lux coating technology coating process

- The Lux coating extends from the cylindrical portion of the balloon and onto the shoulders of the balloon
- Coating extends outside the margins of the markers
- This ensures proper delivery of the drug to the entire region that is contacted by the balloon during inflation, minimizing the risk of 'geographic miss'

- Passeo-18 is 'Lux' coated while the balloon is folded to reduce overall balloon profile
- Microscopy provides evidence of Lux coating on the outer surface of the balloon and within the balloon folds
- With this coating process, drug is sheltered within the balloon folds





Lux coating technology achieves uniform drug distribution to the vessel wall

Drug distribution in target arterial tissue in rabbit iliac model



Ranger[™] Drug Coated Balloon

Product Overview

Ranger DCB is designed to provide consistent and predictable drug delivery







PROVEN

Clinically proven in both randomized & and real-world trials, the Ranger SFA-Trial has achieved among the highest freedom from TLR rate of 94.4% at 6 months

TRANSPAX™ Coating Technology

Proprietary TransPax coating is designed for optimal drug transfer minimizing risk for particulate loss downstream

PLATFORM

Loading tool and proven Sterling balloon contribute to coating integrity, deliverability and ease of use

Next Generation Drug Coated Balloon

Boston Scientific Ranger[™] DCB

- Device CE-marked July 2014
- Sterling 0.018" balloon platform
- TransPax[™] coating technology
- Ranger[™] DCB loading tool designed to protects the drug coating
- Size matrix:
 - SFA: 4-8 mm; 30-100 mm
 - BTK: 2-4 mm; up to 150 mm





Ranger[™] DCB Coating Technology

TransPax[™] Technology

Paclitaxel, Excipient: Citrate ester (acetyl tributyl citrate – ATBC)



Designed to:Balance hydrophilic and hydrophobic properties

•Allow adhesion to the balloon during tracking and deployment

•Allow transfer to the vessel wall during balloon inflation

Minimize particulate loss

Coating Integrity: Adherence During Hydration



TransPax coating remained adhered to the balloon during hydration

T = 0 min

3 min

10 min

IN.PACT[™] Coating







IN.PACT coating started to crack and flake off after a few minutes of hydration

Coating Integrity



- DCBs were delivered in a peripheral track model with fluid recirculation
- Particulates lost downstream were collected with a 5 μm polycarbonate filter and are shown as green dots

Fluid recirculation ~320 ml/min Fluid temp 37°C

Peripheral Drug-Coated Balloon Sector

Device Overview Matrix

Company	Company		BIOTRONIK excellence for life	BARD	Scientific	Medtronic	Spectranetics.						
Device name	evice name								Passeo-18 Lux	Lutonix 035 Lutonix 014	Ranger	In.Pact (Admiral, Pacific, -Amphirion)	Stellarex
Catheter type	atheter type		OTW	OTW	OTW/RX	OTW	OTW						
Drug Coating	Drug Coating		Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel						
Drug Conc.			3µg/mm²	2µg/mm²	2µg/mm²	3.5µg/mm²	2µg/mm²						
Coating excipient			Lux: BTHC	Polysorbate and Sorbitol	TransPax: Acetyl Tributyl Citrate (ATBC)	FreePac: Urea	EnduraCoat: Polyethylene glycol (PEG)						
	25	L		40-150 mm		40-120 mm	40-120 mm						
	55	ø		4-12mm		4-7mm	4-6 mm						
Catheter Platform (0.0")	10	L	40-120 mm		30-150 mm	40-120 mm							
	18	ø	2-7mm		2-8 mm	4-7mm							
	14	L		40-120 mm		40-120 mm							
	14	ø		2-4 mm		Rg-4 mm							

Peripheral Drug-Coated Balloon Sector

Device Overview Matrix

Company			BIOTRONIK excellence for life	Aachen Resonance	BIOSENSORS	B BRAUN SHARING EXPERTISE	CARDIONOVUM	COOK	Q2 Eurocor	Vascular therapies for living
Device name			Passeo-18 Lux	ELUTAX SV	Biopath 035 Biopath 014	SeQuent Please OTW	Legflow RX/OTW Aperto* OTW (HP)	Advance 18 PTX	Freeway 035 Freeway 014	Luminor 035 Luminor 014
Catheter type			отw	OTW/RX	OTW	OTW	OTW/RX	OTW	OTW	отw
Drug Coating			Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel	Paclitaxel
Drug Conc.			3μg/mm²	2µg/mm²	3μg/mm²	3µg/mm²	3μg/mm²	3μg/mm²	3μg/mm²	3μg/mm²
Coating excipient			Lux: BTHC	None: 3 layers (Ice, Snow -PTX, Seal- Hydrogel)	Shellac: Aleuritic and shelloic acid	Resveratol	Shelloic acid	None	Shellac: Aleuritic and shelloic acid	physiologically innocuous matrix - multilayer thin coating
	3	L			20-150 mm	40-150 mm	20-150 mm 20, 40 mm*		20-150 mm	20-150 mm
	5	ø			4–8 mm	4-8 mm	4-10mm 5-7 mm*		4–8 mm	5-7 mm
Catheter 1 Platform 8 (0.0")	1	L	40-120 mm					40-100 mm		
	8	ø	(2) 2-7mm					3-7mm		
	1	L		10-250 mm	40-150 mm	40-150 mm	20-200 mm		40-150 mm	40-200 mm
4	4									1 5-4 mm

DCB Feasibility Trial data in perspective



Ranger SFA RCT presented at CIRSE 2016 by Prof Scheinert, Principal Investigator.; [3] D.Scheinert - TCT 2012 oral presentation;
 M.Werk et al. - Circulation CI 2012; [5] D.Scheinert – EuroPCR 2012 oral presentation;
 D.Scheinert – LINC 2013 oral presentation;
 S.Duda – EuroPCR 2013 oral presentation

Data from different clinical trials not intended for comparison. For educational use only.

SFA DCB Studies- 6 month Results in perspective



Trial	RANGER SFA	PACIFIER	Tepe et al	LEVANT I	BIOLUX-PI	ILLUMENATE
Therapy	Ranger	IN.PACT Pacific	DCB- not specified	Lutonix	Passeo-18 Lux	Stellarex
Mean lesion length	6.8	7.0	5.7	8.1	6.1	7.2

PACIFIER- Werk M, et al. *Circ Cardiovasc Interv.* 2012;5(6):831-840.; Tepe G, et al. Jendovasc Ther. 2015:727-33. ; LEVANT I-Scheinert D, et al. JACC Cardiovasc Interv. 2014;7(1):10-9 ; BIOLUX PI- Scheinert D, et al. J Endovasc Ther. 2015;22(1):14-21. ; ILLUMENATE- Schroeder H, et al. Catheter Cardiovasc Interv. 2015;86(2):278-86. Data from different clinical trials not intended for comparison. For educational use only.



Complex Cardiovascular Intervention for Young and Imbitious Doctors

The 5th Ambitious I CCI GUTO LIVE 2018 for Young and Ambitious Doctors

Date: October 18-20, 2018 Venue: Korea University Guro Hospital, Seoul, Korea

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Special Topic

Complex Coronary CTO & Non-CTO

- -TRI/TRA and Ach Provocation Test
- LM and Bifurcation intervention
- Calcified and tortuous lesion intervention
- Device update and technical tips and tricks in CTO intervention

Complex Peripheral Intervention

- Aorta and Branched Vessel
- Aorto-iliac Intervention
- Femoro-popliteal CTO
- BTK CTO

Organized by CIRI (Cardiovascular Intervention Research Institute), Korea University Guro Hospital, Seoul, Korea Sponsored by Cardiovascular Center, Korea University Guro Hospital, Seoul, Korea



Save un CCI Guro Live 2018

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Korea University Guro Hospital, Seoul, Korea

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