FilterWire EZTM Embolic Protection System



Predictable Protection Made Easy*

The FilterWire EZ[™] Embolic Protection System is meant to provide ease of use to make this system ideal for carotid artery stenting. With clinically proven safety and efficacy, the FilterWire EZ[™] System is engineered to provide predictable outcomes.

Predictable Protection*

Clinically Proven

• 30-day BEACH¹ and CABERNET² trial results demonstrate safety and efficacy.

Captures Debris Effectively*

 \bullet 110 μm pore filter design permits continuous blood flow while maintaining embolic capture efficiency.

• Suspended nitinol filter loop provides 360° apposition in straight or tortuous anatomy.*

Ease of Use

Promotes Procedural Efficiency

• Peel-away delivery sheath with pre-loaded protection wire designed to simplify device preparation while providing rapid exchange convenience.

• Radiopaque loop designed for full deployment verification with one angiographic view.

Eases Crossing and Retrieval

• 3.2F (1.1mm) delivery sheath crossing profile and silicone-coated tip designed to facilitate crossing of lesions.

• Retrieval sheath designed for maximum filter coverage while withdrawing through deployed stent.

• Nitinol filter loop closes for effective particle retention during retrieval.

Simplifies Filter Sizing

• One size provides protection in vessels with 3.5mm to 5.5mm diameter landing zone.

BEACH 30-Day Major Adverse Event Rates¹

Composite 30-Day	5.6%
• Death	1.5%
• Stroke	4.2%
- Minor Ipsilateral	1.9%
- Major Ipsilateral	1.0%
• MI Rate	0.8%
Technical Success	97.1%

N=480

CABERNET 30-Day Major Adverse Event Rates²

Composite 30-Day	3.9%
• Death	0.5%
• Stroke	3.4%
- Minor Ipsilateral	2.1%
- Major Ipsilateral	1.3%
• MI Rate	0.2%
Technical Success	99.1%

N=443



*Data on file, Boston Scientific Corporation.





Product Information 6F (2 mm) Guide Catheter or Sheath-Compatible (minimum ID 0.066" / 1.68 mm)				
Order Number	Description	Crossing Profile	Vessel Diameter Coverage	
749 20105-190 0	FilterWire EZ System, 190cm*	3.2F (1.1mm, 0.042")	3.5mm-5.5mm	
749 20105-300 0	FilterWire EZ System, 300cm	3.2F (1.1mm, 0.042")	3.5mm-5.5mm	

*Compatible with AddWire™ Extension Wire order code H749 22150-010.

Carotid Solutions from Boston Scientific

Boston Scientific offers great depth of technology specifically designed to address challenges of carotid artery disease. From surgical to endovascular options, Boston Scientific delivers tools physicians need to provide the right treatment to patients.

BEACH Trial Design: Multi-center, prospective, single-arm udy. N=747, Roll-In Group N=189, Bilateral Group N=78 Pivotal Group N=480 (symptomatic ≥50% stenosis N=112; symptomatic ≥80% stenosis N=368.) 47 U.S. clinical sites pated in the study

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BEACH Trial Objective: To evaluate the outcomes of patients with carotid artery stenosis at high risk for carotid darterectomy (CEA) using the Carotid WALLSTENT™ Monorail[™] Endoprosthesis and the FilterWire EX[™] and FilterWire EZ™ Distal Protection Systems.

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carotid endarterectomy (CEA).

Primary Endpoints: A 1-year composite endpoint of rbidity and mortality that included ● ≤24 hours: all non-Q-wave Myocardial Infarction (MI) • ≤30 days: all Q-wave MI, all Death, all Strok >30 days, ≤1 year: Ipsilateral Stroke and Neurological Death BEACH 30-Day Major Adverse Event Rates: Pivotal Group: 5.6%‡ • Death: 1.5% • Stroke: 4.2%

EZ Bent Tip Retrieval Sheath

BEACH 1-Year Major Adverse Event Rates Pivotal Group: 9.1% • Death: 3.2% • Stroke: 7.0% • MI: 1.1% ‡Patients may have had more than one even System Technical Success includes FilterWire EZ™ em Technical Success combined with Carotid WALLSTENT™ Monorail™ Endoprosthesis Technical Success and is calculated on the number of system placement attempts.

4.0F (1.3mm, 0.052")

CABERNET: Carotid Artery Revascularization using the Boston Scientific EPI FilterWire EZ and the EndoTex NexStent.

2CABERNET Trial Design: A prospective, non-randomized, Primary Endpoint #1

• MI: 0.8%

multi-center registry. N=488. (Pivotal Group N=454.) A composite major adverse event rate including: (Symptomatic 50% stenosis by Doppler ultrasound and 0-30 days; all Death. Stroke and MI (Q and non-Q-wave), plus angiogram; asymptomatic 80% stenosis by Doppler Ipsilateral Stroke, including any death related to ipsilateral ultrasound or 60% stenosis as determined by angiogram oke, from 31-365 davs (1 v CABERNET 1-Year Major Adverse Event Rates without any neurological symptoms.) 21 sites participated in the registry. At 2 sites the registry was transitioned to other Pivotal Group: 4.5%‡ institutions. Of the remaining 21 sites, there were 15 U.S. • Death: 0.5% • Stroke: 4.0% CABERNET Trial Objective: To evaluate the safety and • MI: 0.3% nt™ Monorail™ Carotid Stent and

0-365 days (1 year): all Death, all Stroke, all MI (Q and non-Q-wave Note: All D/S/MI means any death, stroke or MI that is related or NOT related to the target treate For example, if a patient died of cancer, their death was ncluded in the final calculat 1-Year Major Adverse Event Rates: Pivotal Group: 11.5%* • Death: 4.5%** • Stroke: 5.0% • MI: 4.0% *11 patients experienced multiple events

Primary Endpoint #2

**No neurological deaths



Defining tomorrow, today.™

N/A

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‡Patients may have had more than one event

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CABERNET is a registry sponsored by Boston Scientific Corporation

Delivery System and the Boston Scientific FilterWire EXTM

and FilterWire EZ™ Embolic Protection Systems by assessing

the outcomes of patients with carotid artery stenosis in the

ICA, CCA or ICA/CCA bifurcation who are at high risk for

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