

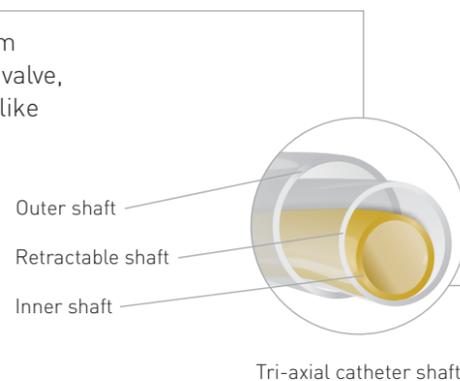
Pulsar-35

Deliverability where it matters

Being a relatively mobile artery, the SFA requires a stent that conforms to the natural vessel movement and provides sufficient support in complex, long lesions that are often difficult to cross. Pulsar-35 is a stent designed for SFA with high multi-directional flexibility on a tri-axial delivery system.

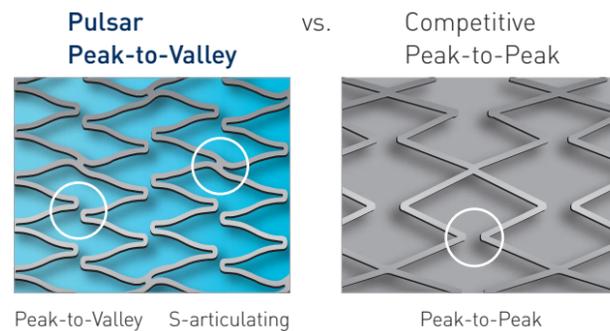
Tri-axial outer shaft

Isolates retractable shaft from friction caused by introducer valve, aimed at ensuring precision-like implantation accuracy.



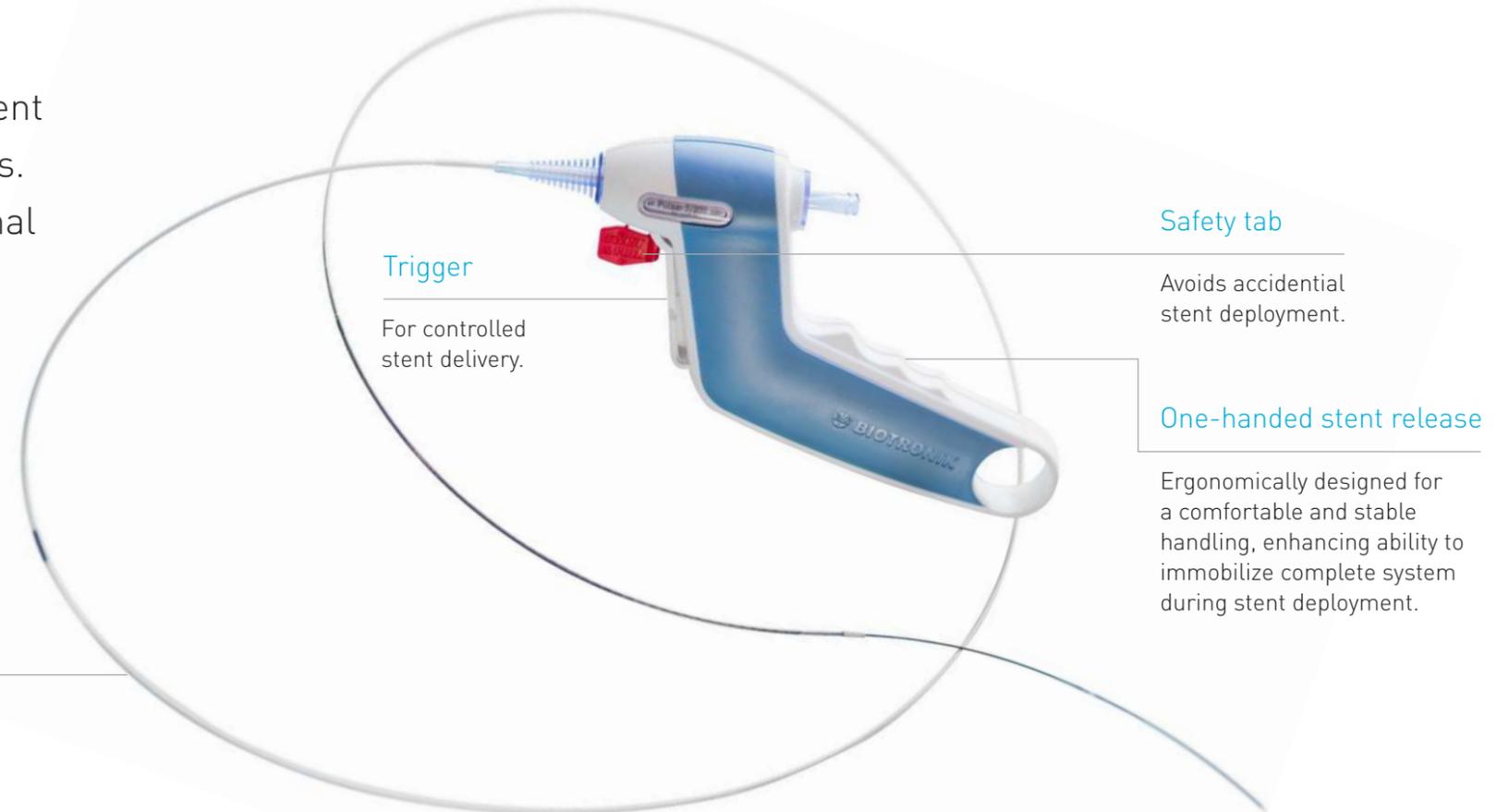
Stent designed for SFA

- Peak-to-valley design and S-articulating connecting bars provide multi-directional flexibility and avoid fish-scaling in mobile vessel architecture.
- A segmented design with thin struts provides low Chronic Outward Force (COF)¹ sufficient to maintain vessel scaffolding even in calcified lesions (4EVER study²). High COF has been shown to result in higher rates of neointimal hyperplasia³.
- Stent lengths up to 170 mm for covering long lesions with a single stent.



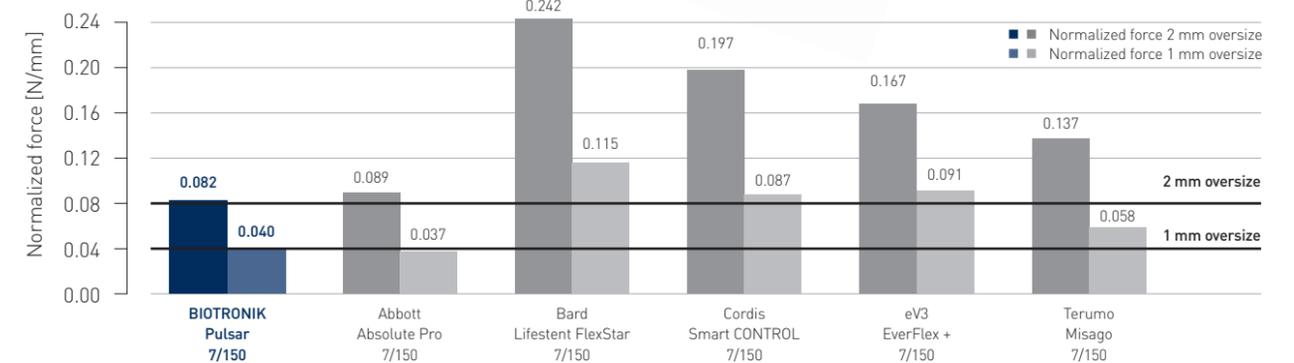
¹ BIOTRONIK data on file [IIB report (P) 71/2011-1]
² 4EVER study. Bosiers. M. 24m results presented CIRSE 2013; Deloose K. 24m results presented LINC 2014
³ Ballyk PD. Intramural stress increases exponentially with stent diameter: a stress threshold for neointimal hyperplasia. J Vasc Interv Radiol. 2006 Jul; 17(7): 1139-45.
 Freeman JW, Snowhill PB, Noshier JL. A link between stent radial forces and vascular wall remodeling: the discovery of an optimal stent radial force for minimal vessel restenosis. Connect Tissue Res. 2010 Aug; 51(4): 314-26.
 Zhao HQ, Nikanorov A, Virmani R, Jones R, Pacheco E, Schwartz LB. Late stent expansion and neointimal proliferation of oversized Nitinol stents in peripheral arteries. Cardiovasc Intervent Radiol. 2009 Jul; 32(4): 720-6.

Stent designed to achieve radial force and flexibility required by SFA



Low chronic outward force

Low Chronic Outward Force (COF)¹ sufficient to maintain vessel scaffolding even in calcified lesions (4EVER study²). As shown below, COF of Pulsar stents increases less than many competitor stents when oversized, thus potentially reducing inflammatory response and restenosis³.



BIOTRONIK data on file [IIB report (P) 71/2011-1]

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Pulsar-35

Self-expanding stent/0.035"/OTW

Technical Data

Stent	OTW
Catheter type	OTW
Recommended guide wire	0.035"
Stent material	Nitinol
Strut thickness	140 µm
Strut width	85 µm
Stent coating	proBIO (Amorphous Silicon Carbide)
Stent markers	6 gold markers each end
Sizes	ø 5.0 - 7.0 mm; L: 30 - 170 mm
Proximal shaft	6F, hydrophobic coating
Usable length	90 and 135 cm

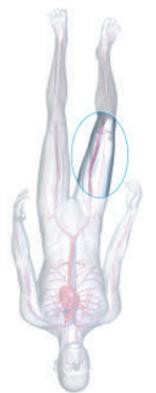
Ordering Information

Stent	ø (mm)	Catheter length 90 cm	Stent length (mm)
5.0	379878	379879	379880
6.0	379883	379884	379885
7.0	379888	379889	379890
30	379878	379879	379880
40	379878	379879	379880
60	379878	379879	379880
80	379878	379879	379880
100	379878	379879	379880
120	379878	379879	379880
150	379878	379879	379880
170	379878	379879	379880
200	379878	379879	379880

Stent	ø (mm)	Catheter length 135 cm	Stent length (mm)
5.0	379898	379899	379900
6.0	379903	379904	379905
7.0	379908	379909	379910
30	379898	379899	379900
40	379898	379899	379900
60	379898	379899	379900
80	379898	379899	379900
100	379898	379899	379900
120	379898	379899	379900
150	379898	379899	379900
170	379898	379899	379900
200	379898	379899	379900

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Pulsar-35 is part of the BIOTRONIK **6F** Solutions portfolio, including:
 ■ Introducer Sheath: **Fortress** ■ Balloons: **Passéo-35, Passéo-35 HP** ■ Stents: **Dynamic, Astron**
 For ordering please contact your local sales representative



Vascular Intervention // Peripheral

Pulsar-35

Self-expanding stent/0.035"/OTW

Indicated for femoral and proximal popliteal arteries



- One-handed stent release for accurate stent deployment
- Tri-axial shaft for a stable delivery system during stent deployment
- S-articulating connecting bars and peak-to-valley design for multi-directional flexibility
- Segmented stent design with thin struts for lower restenosis rates