



Clinical Studies

Qualimed development has been founded on a sound clinical evaluation strategy that has produced a number of published studies that are available for your prevue. Please find below a list of our Cardiology, Peripheral Vascular Studies.

Cardiology

No.	Device/Study	Report/Publication	Patients	Outcome	Result
1	Stainless Steel Stent SC-Registry	Voigt et al 2000 (Kardiologie- Abstract) - Der Stainless Steel- Stent - Erste Erfahrungen und Ergebnisse	70	6mFU RR 17.1%	Stainless Steel Stent is safe with a low restenosis rate after 6 months
2	Stainless Steel Carbon PREVENT Study MC- RCT	Sick et al 2004 (DGK-Abstract) - Prospektiv randomisierte Vergleichsstudie PREVENT	396	6mFU, RR 18.0%, MACE 13.5%	Safe and effective compared to stainless steel stent
3	Cobalt Chromium Stent PASS Study MC-RCT	Park et al 2002 (Am J Cardiol- Abs) - Randomized Comparison Cobalt Chromium Stent - PASS- Study	230	21mFU, RR 11%	Cobalt Chromium Stent reduces the restenosis rate (11% vs 18%)
4	Cobalt Chromium Stent Study SC-Registry	Schukro et al 2003 (Int Con CAD) - Preliminary Results of ArthosInert Registry	121	8mFU, RR 8.2%, MACE 8.2%	Good clinical results and low restenosis rate
5	Cobalt Chromium Stent IRIS Trial MC-RCT	Fourrier J et al 2012 (Interim Report) - IRIS - Bioactive Carbonized Stent Trial	155	6mFU, MACE 11.5%, TLR 4.5%, RR 4.5%	This stent has shown an unexpected safety and efficacy outcome in all-comer population
6	Cobalt Chromium Stent AUSTRIAN Study MC- Registry	Gyöngyösi et al 2004 (CV News) - Results of Cobalt Chromium Stent Austrian Multicenter Registry	199	6mFU, LLL 0.42mm, MACE 13.2%	Stenting of small vessel with Cobalt Chromium Stent is safe. Good results with excellent late lumen loss
7	Cobalt Chromium Stent PIPA Study MC-Registry	Garcia E 2004 (Presentation) - PIPA Results	512	6mFU, MACE 5.4%	Very good short and midterm results in the treatment of lesions in small vessels
8	Cobalt Chromium Stent PIVER Study SC- Registry	Lefebvre et al 2004 (Cardiology) - Primary Results of PIVER (CoCr Small Vessel Registry)	71	1mFU, MACE 8.6%	PIVER indicate a very high success level in the difficult treatment of small vessels
9	Paclitaxel Drug Eluting Stent APPLAUSE Study SC-RCT	Grube et al 2006 (J Inv Card) - Evaluation of a new Paclitaxel- Eluting Stent - APPLAUSE Trial	30	6mFU, MACE 10.5% vs 40%	Early evidence in safety and efficacy of Paclitaxel Drug Eluting Stent at 6 months follow up
10	Paclitaxel Drug Eluting Stent ELITE Study MC- Registry	Glogar 2010 (Cardiology Int) - ELITE Registry Europe - non randomized multi-centre study	377	2yFU, TVR 7.8%	Paclitaxel Drug Eluting Stent is safe and effective. Superior to Taxus in historical comparison
11	MR Stent MR-MP Study SC-RCT	Wessely R et al 2007 (E Heart J) - Randomized Trial Rapamycin vs Paclitaxel Eluting Stent	91	9mFU, LLL 0.33mm vs 0.96mm, TLR 8.7% vs 26.7%, ST 0%	Both stent platforms proved safe. Rapamycin is more effective than Paclitaxel





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12	MR Stent MASTER Study SC-Registry	Mehilli J., Kastrati A. 2010 (Final Report) - MASTER Study Two Year Results (Itrix vs Cypher)	224	2yFU, ST 0%, MACE 20.5%	The stent has an excellent safety and efficacy profile. Both lack of stent thrombosis and lack of late restenosis catch-up may suggest a benefit with this platform
13	MR Stent PILOT OCT Study SC-RCT	Tada T, Byrne R 2012 (DHZM Report) - PILOT - 4 months follow-up report, Tada T et al 2012 (JACC) - Differential Vascular Healing Patterns with biodegradable SES	15	4mFU, No ST, 0% >30% uc struts vs 28%, 0% map struts	MR stents were associated with enhanced vascular healing at 4 months
14	Aspiration Catheter	Multicentre trial	19	90% success rate in acute	Aspiration Catheter fulfils guideline for acute treatment in coronaries

Peripheral Vascular

No.	Device/Study	Report/Publication	Patients	Outcome	Result
1	Stainless Steel Stent SC-Registry	Voigt et al 2000 (Kardiologie- Abstract) - Der Stainless Steel- Stent - Erste Erfahrungen und Ergebnisse	94	6mFU RR 17.1%	Stainless Steel Stent is safe with a low restenosis rate after 6 months
2	Self-expanding peripheral stent POLARIS	Q3 POLARIS REGISTRY Principal Investigator – Dr. Hans Krankenberg MD	95	Acute procedural success $(\leq 30\% \text{ stenosis and the} absence of floe limiting dissection or major adverse events within 72h of the index procedure, Peripheral Academic Research Consortium (PARC) (1) was achieved in 93.7% (74/79) of the patients, and procedural success (increase in ankle brachial index \geq 0.1 from baseline) at 30 days in 86.2% (56/65). Averaged symptom classification changed from Rutherford category 2.8 at baseline to 0.3 at 30 days.$	We preliminarily conclude that the treatment of superficial femoral artery lesions with the POLARIS stent system in a real world setting is effec- tive up to 30 days. So far, no safety concerns were raised

For more enquiries, please contact:

QualiMed Innovative Medizinprodukte GmbH

Boschstraße 16, 21423 Winsen, Germany +49 4171 6578 0 www.qualimed.de







