

DCB Treatment Methodology(1)

Lesion preparation

Pre-dilation with

PTCA Balloon | Non-Compliant Balloon | Scoring Balloon

Ratio balloon-vessel-diameter 1:1, inflation pressure > nominal

Acceptable angiographic result:

No flow limiting dissection;
Residual stenosis $\leq 30\%$; FFR > 0.8

DCB-only with
SeQuent® DCBs

DAPT (Stable CAD) (2)

DCB-only: 1 month

BMS-ISR: 1 month

DES-ISR: Duration defined by DES but at least 1 month

Unacceptable angiographic result:

Flow limiting dissection;
Residual stenosis $> 30\%$; FFR ≤ 0.8

Stenting

DES implantation Coroflex® ISAR NEO

DAPT

according to current guidelines

(1) Jeger RV et al. JACC: Cardiovascular Interventions. 2020 Jun 22;13(12):1391-402.

(2) ACS patients require 12 months of DAPT. In case of HBR it might be reduced to 6 months according to current guidelines.

SeQuent® DCBs

The Proven Performers in Coronary Angioplasty

Backing up cardiologists with unparalleled clinical data and proven performance for both paclitaxel and sirolimus coated balloons.

SeQuent® DCBs. The choice is yours.

SeQuent® Please NEO

Master of evidence

For all who rely on decades of evidence.

B. Braun's paclitaxel coated balloon SeQuent® Please NEO is the **best investigated DCB** in the field of percutaneous coronary interventions.

- Proven Paclitaxel and Iopromide coating
- Best investigated DCB
- 110+ published studies (including more than 35+ RCTs)
 - 55+ studies on ISR lesions
 - 65+ studies on de-novo lesions
- 25,000+ documented patients in 20+ countries
- 15+ years of clinical experience



More detailed
information at:
bbraun.com/dcb

SeQuent® SCB

Pioneer of proof

For all who prefer a pioneering clinical path.

B. Braun's new sirolimus coated balloon – the **first SCB** backed up with published randomized clinical trials for ISR and de-novo lesions.

- Proven Sirolimus + BHT coating
- New innovative coating technology
- The first coronary sirolimus coated balloon with published RCTs:
 - 3 RCTs on ISR lesions
 - 2 RCT on de-novo lesions
- Multicenter data from Europe and Asia
- Ongoing studies for de-novo and real world



Advantages of DCB-only

- No unnecessary stent implantation
- No inflammation due to a foreign body implant
- No risk of stent thrombosis
- No stent-related limitations for further treatment
- No stent edge effect

Efficacy of SeQuent® DCBs

- Late Lumen Enlargement (positive remodeling)
- Keep natural vessel vasomotion
- Only 1-month DAPT (Stable CAD) (2)

Important handling aspects

- Predilate the target lesion!
- DCB distal and proximal at least 2 – 3 mm longer than pre-dilated area
- Ratio balloon-vessel-diameter 1:1
- Inflation pressure 8 – 10 atm, time 30 seconds
- Only one inflation is needed
- Do not bend, touch or wipe
- Do not expose any fluids to the catheter at balloon portion
- Position at the lesion site as fast as possible
- One balloon per lesion