

Evermine⁵⁰TM

EES Observational Study

Clinical safety and efficacy of World's thinnest (50 μm), very long (>40 mm) Everolimus Eluting Stent (EES) among real world patients

Evermine50 EES Observational Study Design

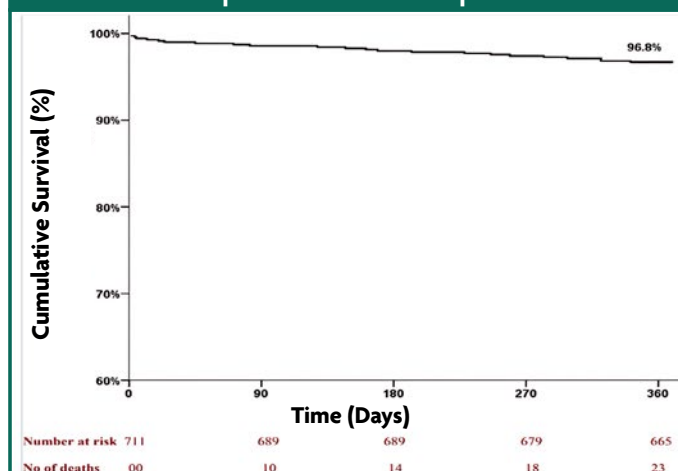
OBSERVATIONAL STUDY

- Between August 2017 and December 2018, 711 patients were implanted with Evermine50 EES for various indications at LPS Institute of Cardiology, GSVM Medical College, India
- Inclusion Criteria:** Patients having ACS, CCS, ISR, bifurcation lesion, intervention of degenerated grafts following CABG
- Patients (72.3% male, mean age: 51.4 \pm 16.6 years) who received Evermine50 had:
 - DM- 19.1%
 - HTN-22.6%
 - STEMI- 44.7%
 - UA- 14.5%
- Primary Endpoints:** DOCO, a composite of cardiac death, TVMI, and ID-TLR which was assessed at 1 year
- Additional Endpoints:** Individual components of primary end point, GCEP and Device success (defined as successful trackability, delivery and deployment of assigned stent at target lesion with final residual stenosis \leq 30% following post dilatation if any)

PRIMARY ENDPOINT

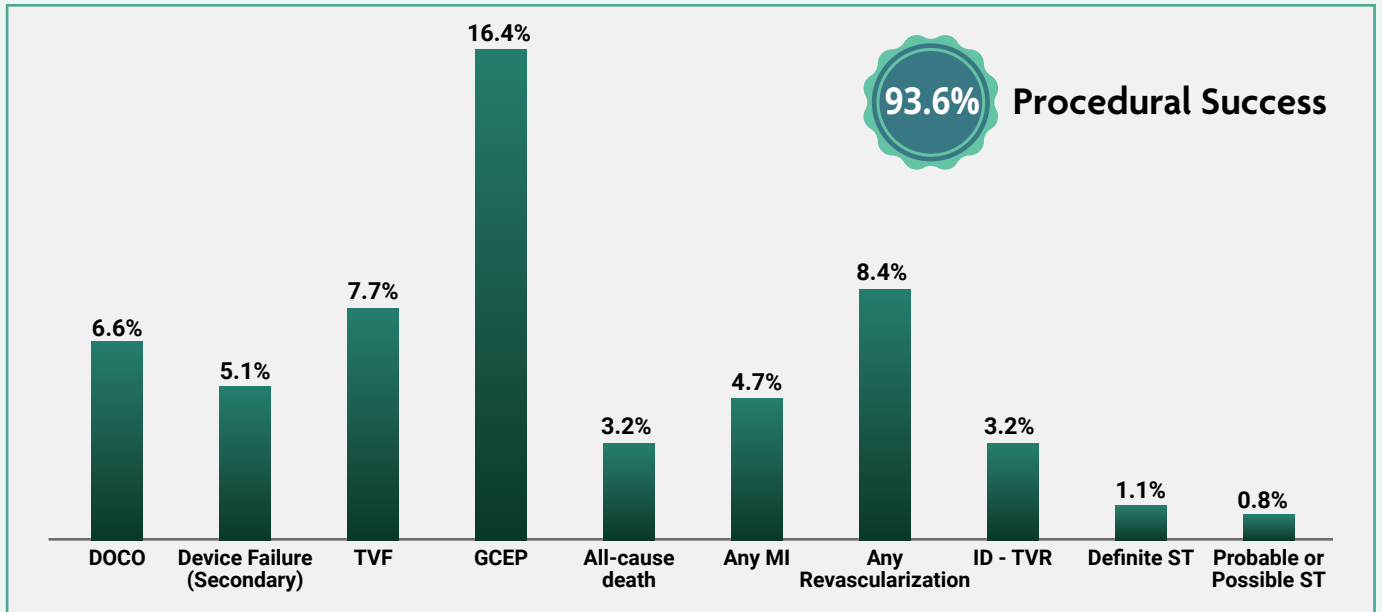
Evermine50 EES demonstrated
6.6% DOCO rate at 1-year

Kaplan-Meier survival curve of patients over 12 months period of follow up was 96.8%

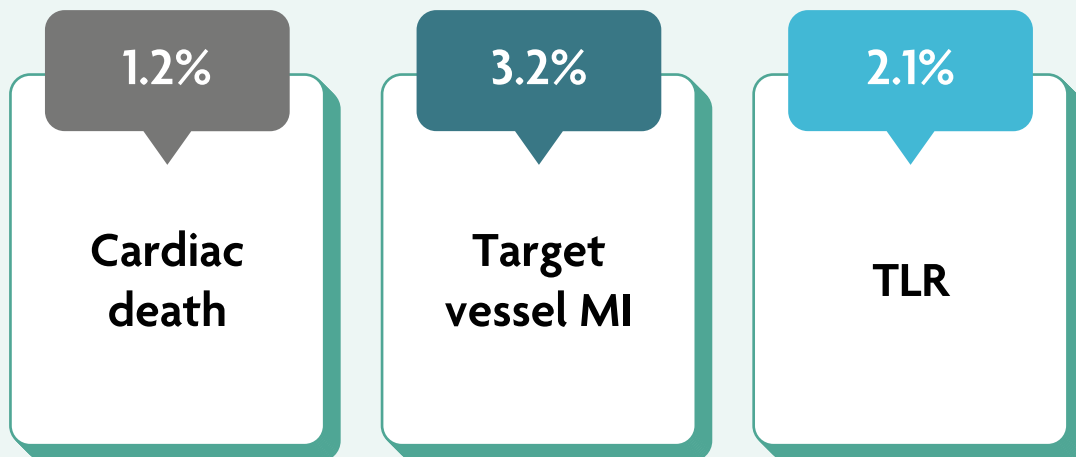


Clinical Outcomes

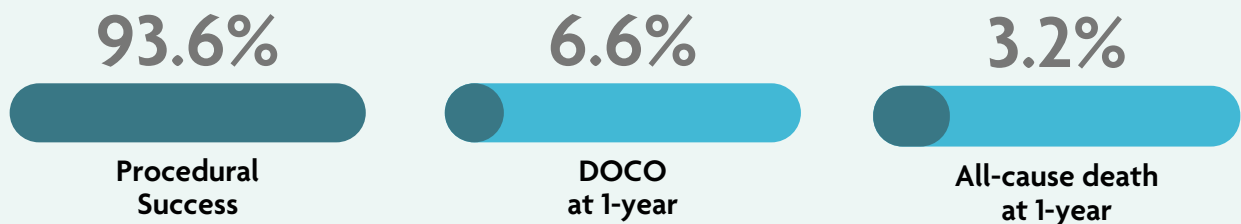
Key Clinical Endpoints at 1-year



DOCO:



KEY OUTCOMES:



The study shows that the Evermine50, a very long (>40 mm) and ultra-thin everolimus eluting stent with a bioresorbable polymer, is safe and effective for various coronary artery lesions, including those with chronic total occlusion and diffusely diseased small vessels



ID -TVR = Ischemia driven target vessel revascularization, ST = Stent thrombosis, TVF = Target vessel failure, TLR = Target lesion revascularization

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