THE SOLUTION PHYSICIANS TRUST AND PATIENTS COUNT ON



U.S. IDE Clinical Trial 5-year data 63 patients* from primary enrollment



100%

Patency — External iliac artery

0%

Buttock claudication[†]

98.3%

Freedom from CIAA⁺ enlargement (> 5 mm)

95.1%

Patency — Internal iliac artery

0%

New onset erectile dysfunction

95.2%

Freedom from IBE-related reintervention

ZERO

Type I/III endoleaks Migrations

Core Lab reported assessment for patency, endoleak, migration and CIAA enlargement. Denominator is number of subjects evaluated for primary effectiveness endpoint result with an evaluable result.



^{*} Sixty-three subjects with device implanted in initial cohort. Thirty-six patients have completed 5-year follow-up.

[†] On the side treated with the IBE.

THE SVS CLINICAL PRACTICE GUIDELINES FOR ABDOMINAL AORTIC ANEURYSM1 (AAA) INCLUDE RECOMMENDATIONS PERTAINING TO HYPOGASTRIC PRESERVATION DURING EVAR TREATMENT.

These recommendations include:

Preservation of flow to at least one internal iliac artery

Using a Food and Drug Administration (FDA) approved branch endograft in anatomically suitable patients to maintain perfusion to at least one internal iliac artery.

1 (Strong) | A (High)

1 (Strong) | **A** (High)

Level of recommendation

Quality of evidence

Level of recommendation

Quality of evidence

PRESERVE FLOW. ADVANCE CARE.

- Preservation matters: Recommended treatment^{1,2} to sustain quality of life
- Advances repair: All-In-One System with proven outcomes
- Performs as promised: High patency³, conformability and durability
- Complete confidence: More than 20 years of aortic device experience



Learn more at goremedical.com/IBE

Cover image: 5-year follow-up; first clinical use. Image courtesy of Brian Peterson, MD., St. Anthony's Medical Center; St. Louis, Missouri. Additional clinical trial data available in *Instructions for Use*. Additional clinical study information available.³

- 1. Chaikof EL, Dalman RL, Eskandari MK, et al. The Society for Vascular Surgery practice guidelines on the care of patients with an abdominal aortic aneurysm. Journal of Vascular Surgery 2018;67(1):2-77.e2.
- 2. Moll F.L., Powell J.T., Fraedrich G., et al; European Society for Vascular Surgery. Management of abdominal aortic aneurysms clinical practice guidelines of the European Society for Vascular Surgery. European Journal of Vascular & Endovascular Surgery 2011;41(Supplement 1):S1-S58.
- 3. Schneider DB, Matsumura JS, Lee JT, Peterson BG, Chaer RA, Oderich GS. Final 5-year results of the United States prospective, multicenter study of endovascular repair of iliac aneurysms using the Gore Iliac Branch Endoprosthesis. Presented at the Vascular Annual Meeting (VAM21); August 18-21; San Diego, CA. Abstract RS13.



Refer to Instructions for Use at eifu.goremedical.com for a complete description of all applicable indications, warnings, precautions and contraindications for the markets where this product is available. $R_{\!\scriptscriptstyle X\,\text{Only}}$

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