GORE® EXCLUDER®
Thoracoabdominal Branch
Endoprosthesis

BRIDGING THE GAP
between thoracic and abdominal care

GET STARTED

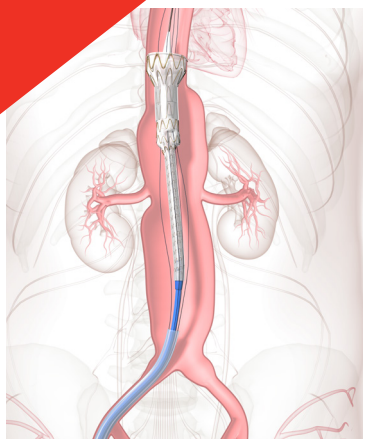
Together, improving life

FIRST FDA APPROVED,
off-the-shelf endovascular solution for a range of complex visceral aortic cases.

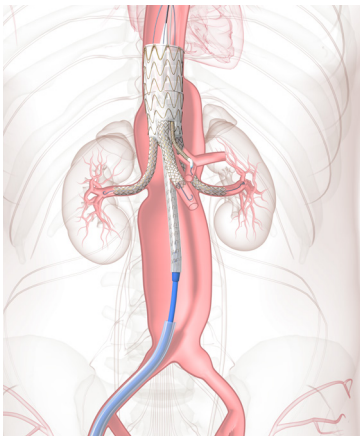
Meet the component you were looking for

Modular design and studied compatibility with other Gore commercial devices.

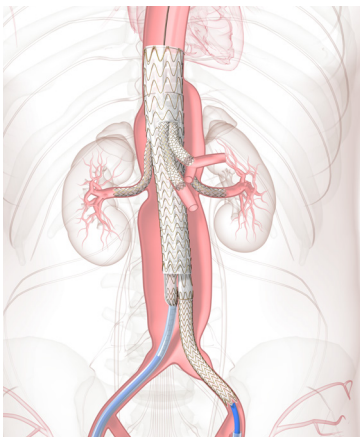
WATCH DEPLOYMENT



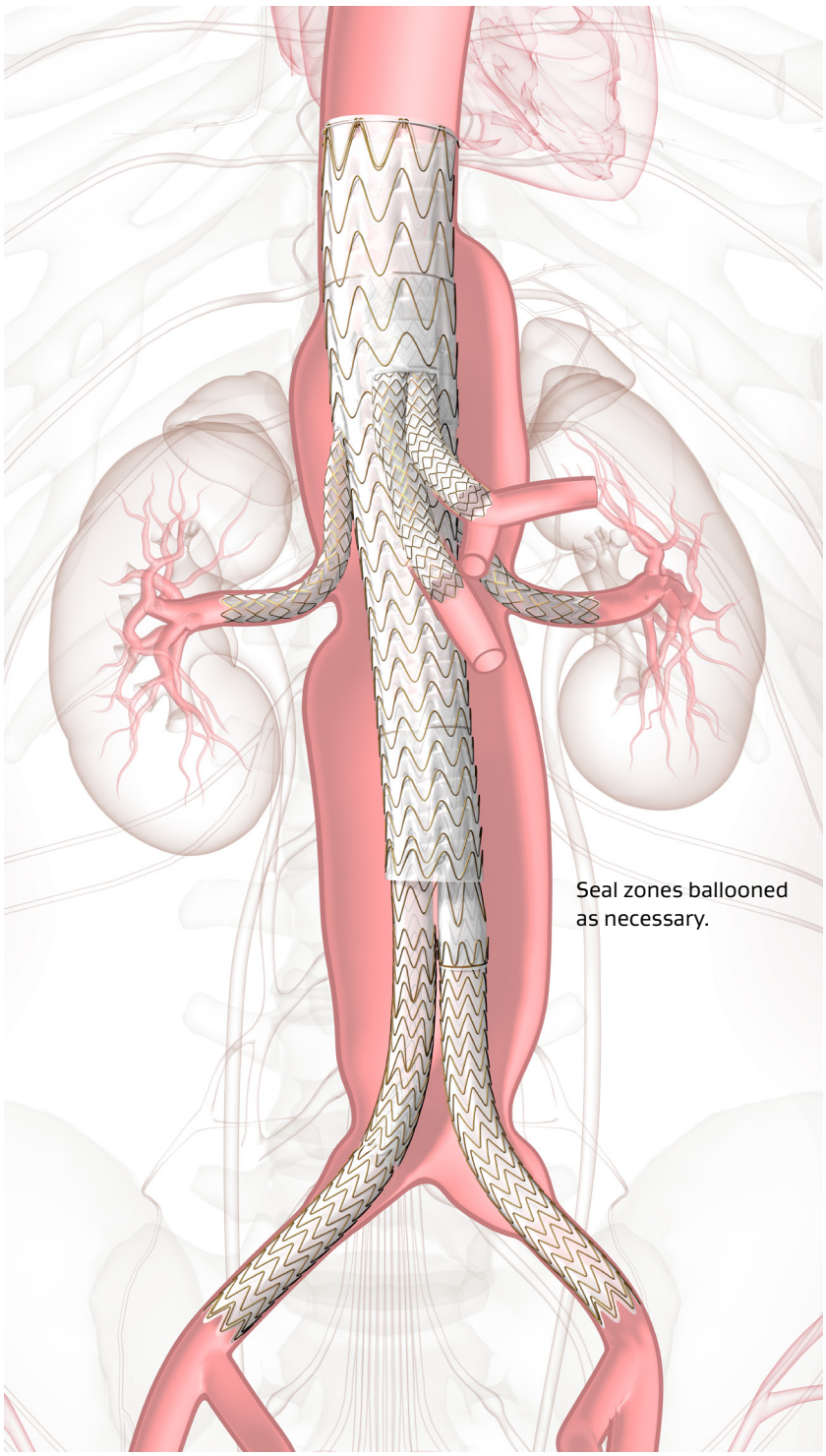
Aortic Component positioned and partially deployed.



Branch Components delivered and deployed through pre-cannulated portals of Aortic Component.



Aortic Component deployment completed, followed by **Distal Bifurcated Component** and **Contralateral Leg Component.**



Seal zones ballooned as necessary.

SEE THE DATA

On-label solution for endovascular repair

- Thoracoabdominal aortic aneurysm patients with appropriate anatomy
- High-risk patients with pararenal aortic aneurysms and appropriate anatomy

Off-the-shelf availability for timely patient care

The benefits of minimally invasive care[1,2] without the time and effort to create custom grafts.

Proven clinical performance, improved patient experience

TAMBE Pivotal Study through 12-month follow-up[3]

0%	Lesion-related mortality
94%	Freedom from aneurysm growth
92.6%	Freedom from failure of device effectiveness
85.3%	Freedom from any device component occlusions
100%	Freedom from occlusion of aortic and iliac device components
95.8%	Freedom from target visceral artery occlusion

Real-world evidence (RWE)

Significant reduction in length of stay (LOS) for the endovascular procedure over open surgical repair.*,[4]

15.8 days

RWE average LOS for open surgical repair[4]

6.2 days

RWE average LOS for endovascular repair[4]

4.9 days ↓

Average LOS for TAMBE repair[3]

* Data on file 2024; W. L. Gore & Associates, Inc; Flagstaff, AZ.

LEARN MORE

Another first in branched technology

With dedicated support you can depend on in complex procedures.

- A deep reservoir of product knowledge.
- Our representatives support hundreds of aortic cases per year.
- Non-commissioned sales force – our focus is on outcomes.

Contact your Gore representative for more information.

References

1. Bavaria JE, Appoo JJ, Makaroun MS, *et al*; Gore TAG Investigators. Endovascular stent grafting versus open surgical repair of descending thoracic aortic aneurysms in low-risk patients: a multicenter comparative trial. *Journal of Thoracic & Cardiovascular Surgery* 2007;133(2):369-377.

2. Arko FR 3rd, Murphy EH, Boyes C, *et al*. Current status of endovascular aneurysm repair: 20 years of learning. *Seminars in Vascular Surgery* 2012;25(3):131-135.

3. GORE® EXCLUDER® Thoracoabdominal Branch Endoprosthesis [Instructions for Use]. Flagstaff, AZ: W. L. Gore & Associates, Inc; 2023. MD193085.

4. PINC AI™ Applied Sciences, Premier Inc. PINC AI™ Healthcare Database: Data that informs and performs (White Paper). July 2023. https://offers.pinc-ai.com/PINC-AI-Healthcare-Database-White-Paper-LP.html

Consult Instructions for Use
eifu.goremedical.com

INDICATIONS FOR USE IN THE U.S.: The GORE® EXCLUDER® Thoracoabdominal Branch Endoprosthesis is indicated for endovascular repair in patients with thoracoabdominal aortic aneurysms and high-surgical risk patients with pararenal aortic aneurysms who have appropriate anatomy as described below: Adequate iliac/femoral access and brachial/axillary access; Proximal (supraceliac) aortic neck treatment diameter range over 2 cm seal zone of 22–34 mm for aneurysms extending up to 6.5 cm or less above the origin of the most proximal branch vessel; Aortic neck angle ≤ 60° at the Aortic Component proximal seal zone; Iliac artery treatment diameter range of 8–25 mm and iliac artery seal zone length of at least 10 mm; Renal artery seal zone diameters between 4.0–10.0 mm; Celiac and superior mesenteric artery seal zone diameters between 5.0–12.0 mm; ≥ 15 mm seal zone length in renal arteries, superior mesenteric artery, and celiac artery; Visceral segment of aorta (3 cm proximal through 9.5 cm distal to the most proximal visceral artery) must be ≥ 20 mm in diameter. **CONTRAINDICATIONS:** The GORE® EXCLUDER® Thoracoabdominal Branch Endoprosthesis is contraindicated in: Patients with known sensitivities or allergies to the TAMBE Device materials including ePTFE, FEP, nickel titanium alloy (Nitinol), stainless steel, and gold. Patients who have a condition that threatens to infect the graft. Patients with known hypersensitivity to heparin, including patients who have had a previous incident of Heparin-Induced Thrombocytopenia (HIT) type II and cannot receive the GORE® VIABAHN® VBX Balloon Expandable Endoprosthesis. ℞ Only

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.

Products listed may not be available in all markets.

W. L. Gore & Associates, Inc.
goremedical.com

Asia Pacific +65 67332882 **Australia/New Zealand** 1800 680 424 **Europe** 00800 6334 4673
United States Flagstaff, AZ 86004 800 437 8181 928 779 2771

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