Exceptional outcomes. Proven again.

SuperB Study results: Quality of life (QOL) benefits in complex SFA lesions.

100%

- Limb salvage in long, complex SFA lesions $(n = 63)^1$
- 23.3 cm average lesion length
- 38.1% critical limb ischemia (CLI)
- 96.7% TASC II C&D lesions



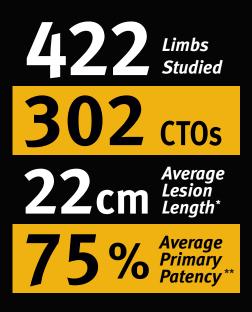
Improvement in 1-month patient outcomes

Multicenter, randomized controlled trial comparing GORE[®] VIABAHN[®] Endoprosthesis to Femoropopliteal Bypass¹

	GORE® VIABAHN® Endoprosthesis (n = 63)	Surgical bypass (n = 62)*	P value			
Improvement in patient outcomes						
Hospitalization time	3.7 days	6.0 days	<i>P</i> = 0.002			
QOL (SF-36, 1 week)	50.2%	37.1%	<i>P</i> = 0.011			
Walking impairment questionnaire (1 month)	68.5%	47.6%	<i>P</i> < 0.05			
Total complications (1 month)	25	61	<i>P</i> = 0.048			
No difference in 12-month patencies or reinterventions						
Primary	64.8%	63.6%	-			
Secondary	85.9%	83.3%	-			
Freedom from CD-TLR	77.0%	70.7%	-			



Proven patency for complex SFA lesions.





Study	Number of limbs	Lesion length (cm)	CTOs (%)	12-month primary patency (%)	12-month secondary patency (%)
SuperB ¹	63	23	75	65	86
Gore VIPER Clinical Study ²	119	19	56	73	92
VIASTAR Trial ³	66	19	79	78	90
25 cm Trial ⁴	71	27	93	67	97
Japan IDE Clinical Study⁵	103	22	66	88	98
Combined results (weighted average, as appropriate)	422	22	71	75	93

Read the SuperB Study Abstract at goremedical.com/viabahn/superb.

* Weighted average lesion length.

- ** 12-Month weighted average primary patency.
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- 5. Ohki T, Kichikawa K, Yokoi H, *et al*. Outcomes of the Japanese multicenter Viabahn trial of endovascular stent grafting for superficial femoral artery lesions. *Journal of Vascular Surgery* 2017;66(1):130-142.e1.

INTENDED USE / INDICATIONS: The GORE[®] VIABAHN[®] Endoprosthesis is indicated for improving blood flow in patients with symptomatic peripheral arterial disease in superficial femoral artery de novo and restenotic lesions up to 270 mm in length with reference vessel diameters ranging from 4.0 - 7.5 mm, in superficial femoral artery in-stent restenotic lesions up to 270 mm in length with reference vessel diameters ranging from 4.0 - 1.5 mm. The GORE[®] VIABAHN[®] Endoprosthesis is also indicated for the treatment of stenosis or thrombotic occlusion at the venous anastomosis of synthetic arteriovenous (AV) access grafts. Refer to *Instructions for Use* at goremedical.com for a complete description of all contraindications, warnings, precautions and adverse events.



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Consult Instructions for Use

Products listed may not be available in all markets.

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