PHILIPS

Phoenix

Atherectomy catheter

The safe, simple **and effective choice**

The Phoenix rotational atherectomy system combines the benefits of existing atherectomy systems to deliver a unique atherectomy option. This will help you tailor your treatment approach for your patients.

Safe

Clinical concern	Phoenix solution	Safety data[1]
Vessel injury	Front cutter clears tissue in a way that may help reduce potential trauma to the vessel	1.9% perforation 0.9% dissection
Distal embolization requiring intervention	Design of the Phoenix cutter head allows debulked material to be continuously captured	<1% distal embolization 0% use of distal protection

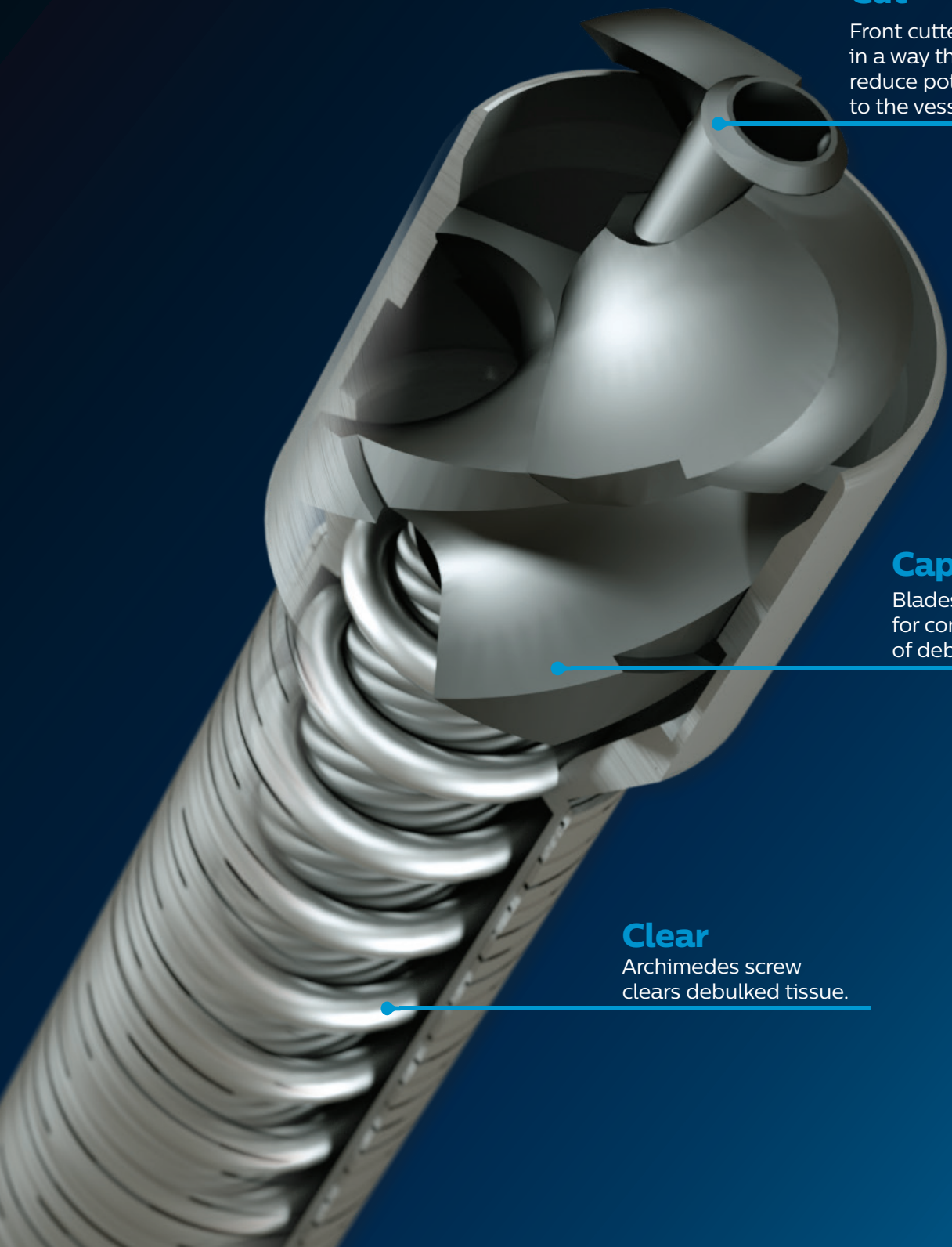
Effective

- EASE trial data confirms Phoenix's ability to effectively treat a broad range of tissue types, from soft plaque to calcified arteries, for lesions both above and below the knee.[2] The effectiveness endpoint set in the EASE trial was exceeded, and a <1% clinically driven target lesion revascularization (TLR) was achieved.[1]
- Three catheter diameters have been shown to effectively treat most peripheral vasculature.[2]
  - 1.8 and 2.2 mm (tracking) are suited for treating small vessels or highly stenosed lesions.
  - 2.4 mm (deflecting) is suited for larger vessels or eccentric lesions.

Easy

- Single insertion: no need to remove and clean out debulked material.
- Battery powered handle operated. No capital equipment or additional procedural accessories required.
- Low profile, front cutting design allows for direct lesion access.

Phoenix has a cut, capture, and clear mechanism of action



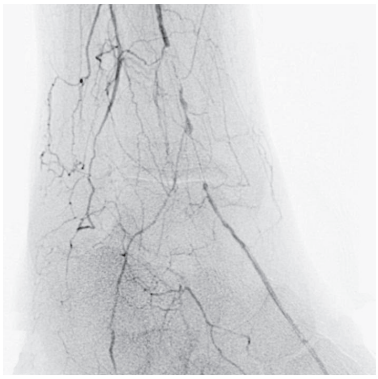
Cut
Front cutter clears tissue in a way that may help reduce potential trauma to the vessel.

Capture
Blades are designed for continuous capture of debulked material.

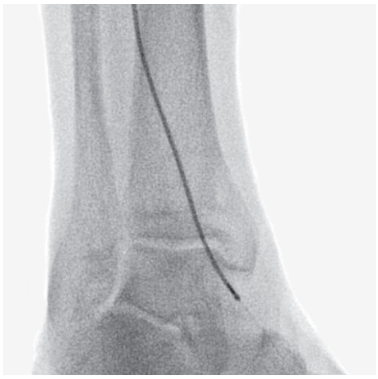
Clear
Archimedes screw clears debulked tissue.

Low profile system
for distal lesion access[2,4]

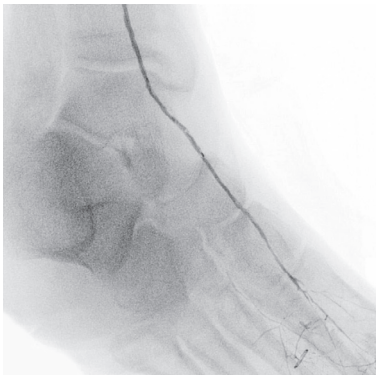
Case performed by Dr. Christopher LeSar at the Vascular Institute of Chattanooga.



Lesion identified in the dorsalis pedis.[2]



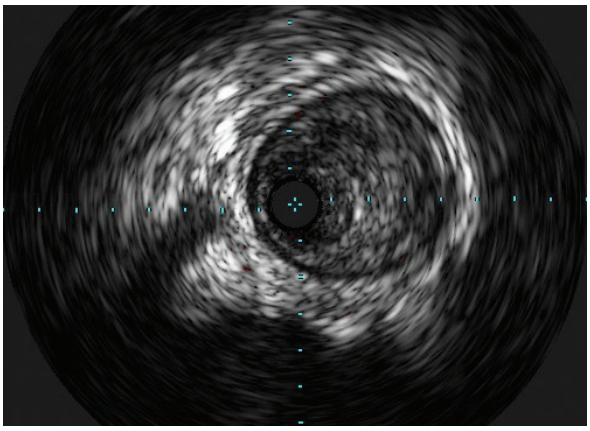
Low profile (5F), front cutting device allowed for direct access to very distal lesion location.[2]



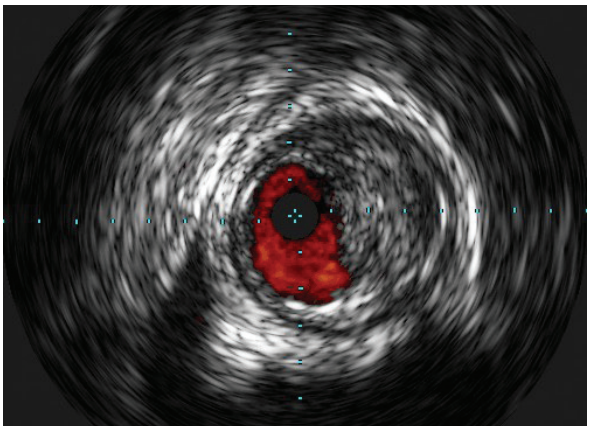
Flow is restored post treatment with Phoenix.

Phoenix created 67% luminal gain
without vessel injury[4]

Case performed by Dr. Joseph Griffin at Baton Rouge General Hospital.



IVUS pre-Phoenix: lesion identified in the popliteal artery. IVUS showed length of plaque and vessel diameter, confirmed Phoenix as optimal treatment choice and helped physician choose DCB length and size.



IVUS post-Phoenix: 2.4 mm device increased lumen more than 67%. This was done without adventitial injury or flow limiting dissections.

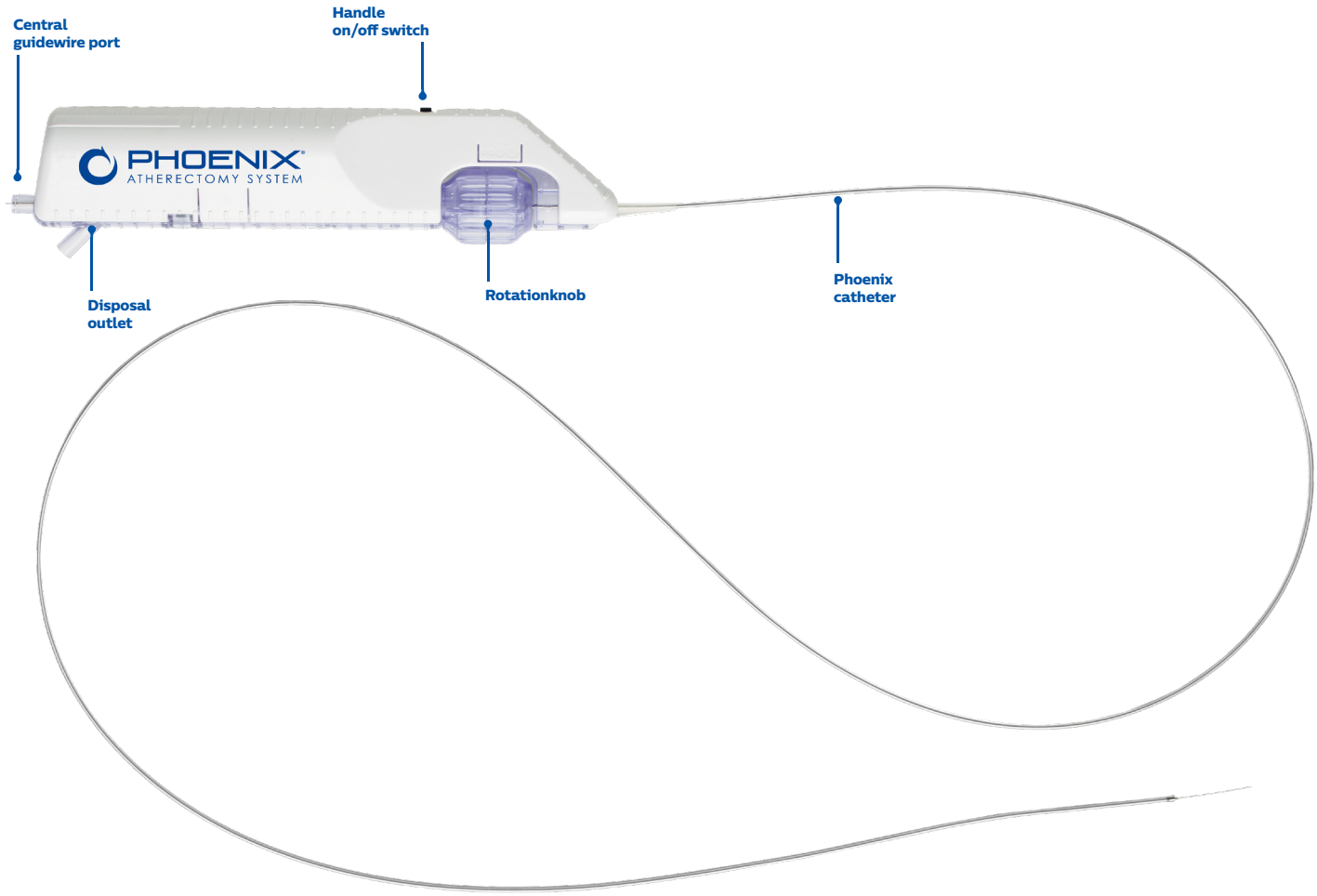
1. Davis T, Ramaiah V, Niazi K, Martin Gissler H, Crabtree T. Safety and effectiveness of the Phoenix Atherectomy System in lower extremity arteries: Early and midterm outcomes from the prospective multicenter EASE study. Vascular. 2017 Dec;25(6):563-575

2. The Phoenix atherectomy 1.8 mm tracking catheter is indicated for vessels 2.5 mm in diameter or above. The Phoenix 2.2 mm tracking and deflected as well as the 2.4 mm deflecting catheters are indicated for vessels of 3.0 mm in diameter or above. While the 1.8 mm, the 2.2 mm tracking and deflecting catheters are indicated for femoral, popliteal, or distal arteries located below the knee, the Phoenix 2.4 mm deflecting catheter is indicated for femoral and popliteal only.
3. Case study results are not predictive. Results in other cases may vary.

Phoenix atherectomy system

Part number	Catheter size	Introducer size	Working length	Guidewire diameter
P18130K	1,8 mm tracking	5 F (>1,8 mm)	130 cm	0,014"
P18149K	1,8 mm tracking	5 F (>1,8 mm)	149 cm	0,014"
P22130K	2,2 mm tracking	6 F (>2,2 mm)	130 cm	0,014"
P22149K	2,2 mm tracking	6 F (>2,2 mm)	149 cm	0,014"
PD22130K	2.2 mm deflected	6 F (>2,2 mm)	130 cm	0,014"
PD24127K	2,4 mm deflecting	7 F (>2,4 mm)	127 cm	0,014"

A simple and easy to use system



The Phoenix atherectomy system, shown with the catheter inserted into the handle drive unit.
No external, off-table components are required.

www.philips.com/IGTdevices

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