

# Stealth 360™

Peripheral Orbital Atherectomy System

BROAD RANGE  
OF CALCIUM.  
ONE SOLUTION.

DUAL-ACTION + VERSATILE + PROVEN



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Check the regulatory status of the device in areas where CE marking is not the regulation in force.

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## POWERFUL TECHNOLOGY FOR MORE PATIENTS

The Stealth 360™ Orbital Atherectomy System (OAS) is specifically designed to treat mild to severe calcific plaque in peripheral arteries with a diamond-coated crown.<sup>1</sup> The crown orbits 360 degrees against the vessel wall to get from calcified to compliant, safely and efficiently.<sup>2,3</sup>

**Sleek, electric-powered handle** allows two-minute set-up and provides efficient torque transfer to the shaft and crown<sup>4</sup>

**Easy, one-touch start button** makes device power-up effortless

**Three convenient one-touch speed controls** allows for quick adjustments within the sterile field



**GlideAssist™** for the 1.25 Micro Crown\* (4 Fr) enables the crown to spin at a slow speed (5k RPM), reducing friction in the system to:

- Facilitate tracking of the devices
- Provide easier removal of the device
- Allow smoother repositioning of the ViperWire Advance™ Guide Wire during procedures as compared to Stealth 360™ OAS without GlideAssist™ Mode

**Prime button** allows quick flushing

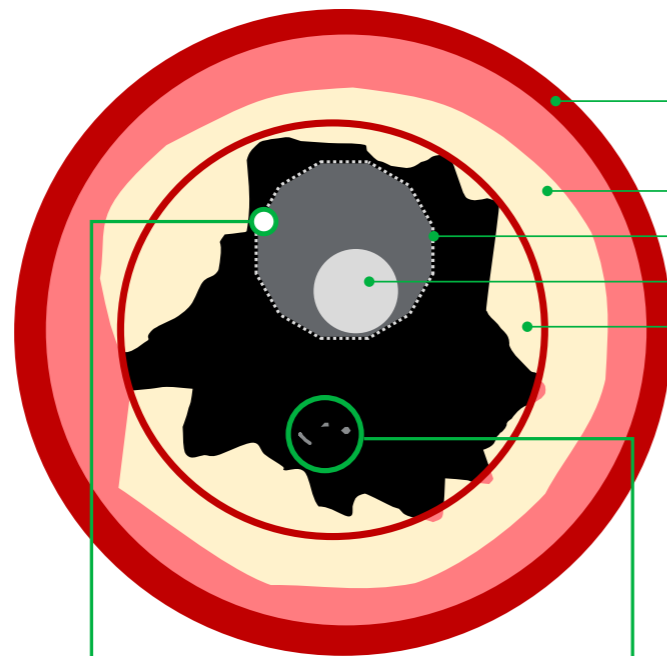
† Set up times may vary.

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# DUAL-ACTION

Uniquely designed to enable simultaneous modification of both intimal and medial calcium.

## Differential Sanding Modifies Intimal Calcium<sup>5</sup>

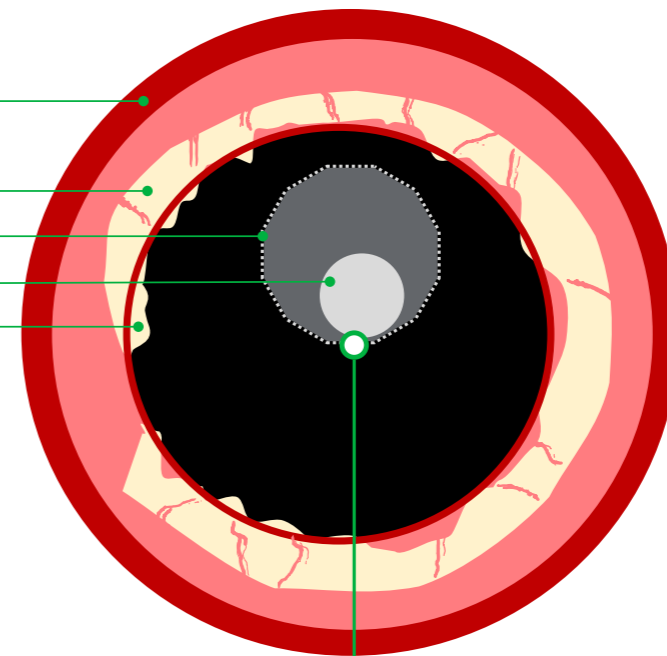


Crown's diamond surface sands intimal calcium while potentially minimizing damage to medial layer<sup>5,7</sup>

- VESSEL WALL
- MEDIAL CALCIUM
- CROWN
- DRIVE SHAFT
- INTIMAL CALCIUM

Generated particulates average ~2 microns, smaller than red blood cells<sup>5</sup>

## Fractures Medial Calcium<sup>6</sup>



Rotation of crown over the wire generates high frequencies (1000 – 1900 Hz) producing pulsatile mechanical forces<sup>8</sup>

# VERSATILE – A SPECIALIZED APPROACH TO PAD

The low-profile design of the Stealth 360™ OAS can help minimize access site complications<sup>9</sup> and improve procedural range.<sup>10</sup>

## Improved Clinical Experience

- Low profile systems can reduce access site complications<sup>9</sup> and allow for non-femoral access options, like transpedal.
- The Stealth 360™ OAS low profile design allows for the treatment of small and large vessels without the need to upsize your catheter and sheath size.



### Iliac and Common Femoral Arteries

Vessel Diameter Range: 5.0-10.0 mm

2.00 mm Solid Crown

### Superficial Femoral Artery

Vessel Diameter Range: 4.0-7.0 mm

2.00 mm Solid Crown

1.50 mm Solid Crown

2.00 mm Classic Crown

### Popliteal Artery

Vessel Diameter Range: 4.0-6.0 mm

1.25 mm Micro Crown

1.50 mm Solid Crown

1.25 mm Solid Crown

2.00 mm Classic Crown

### Tibial and Peroneal Arteries

Vessel Diameter Range: 2.0-4.0 mm

1.25 mm Micro Crown

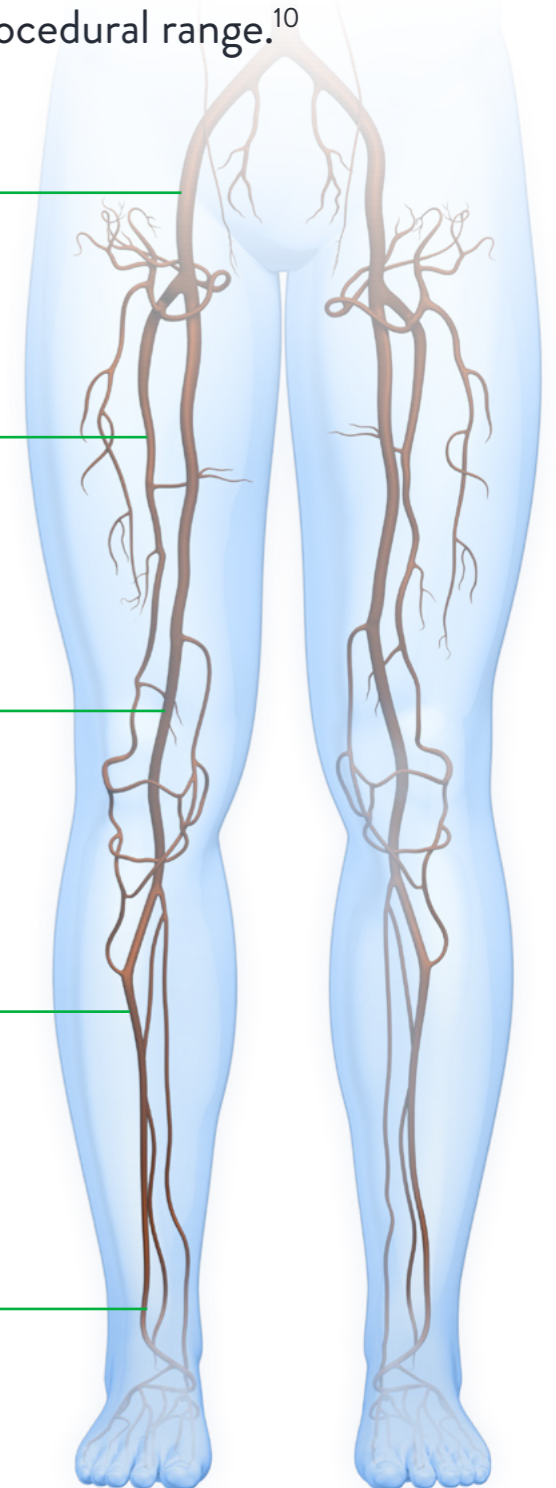
1.25 mm Solid Crown

1.50 mm Classic Crown

### Distal Tibial Artery

Vessel Diameter Range: 2.0-2.5 mm

1.25 mm Micro Crown



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# PROVEN

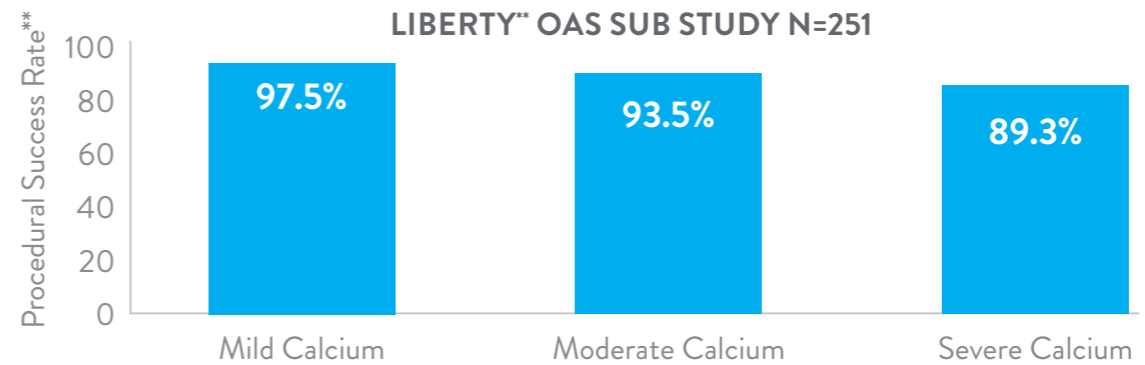
Orbital atherectomy is proven to be effective with a full range of calcified lesions above- and below-the-knee, and across a wide range of Rutherford Classes (RC 2-6).<sup>10</sup>

More than 4,800 real-world patients with over 7,000 lesions treated in peripheral clinical trials.\*<sup>11</sup>

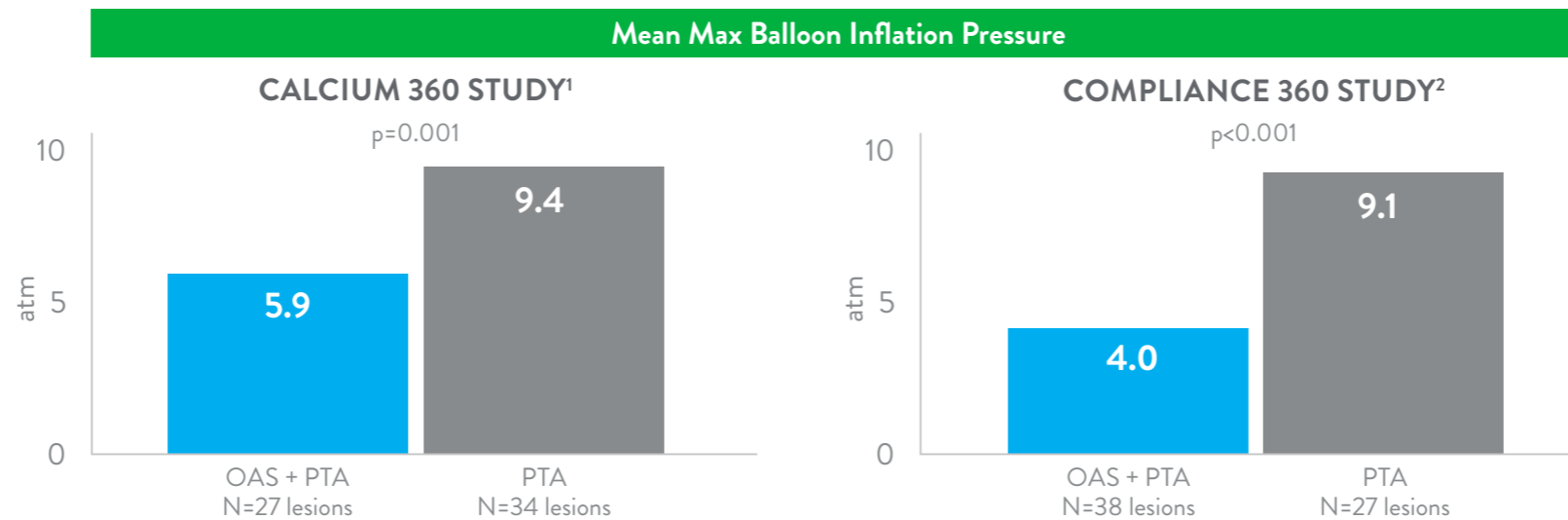
## Long-Term Results revealed by Liberty 360 Study



## High Rate of Procedural Success Across a Wide Range of Calcified Lesions (RC 2-6)<sup>12</sup>



## Lower Max Balloon Inflation Pressure Compared to PTA<sup>1,2</sup>



\*Counts updated 06Jan2020—subject to change (include PAD I, PAD II, OASIS, CONFIRM, CALCIUM, COMPLIANCE, TRUTH, CLARITY, LIBERTY, OPTIMIZE, REACH PVI)

\*\*Calcium Grades based on PACSS. Procedural success <50% residual stenosis for target lesion (core lab)

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## PRODUCT ORDERING INFORMATION

### Stealth 360™ Peripheral Orbital Atherectomy System

Micro Crown Model Number	Crown Size	Length	Quantity	Sheath Size Compatibility
P-2ST-MI125-145*	1.25 mm	145 cm	1 each	4F

\*GlideAssist is only available on the 1.25 Micro Crown

Solid Crown Model Number	Crown Size	Length	Quantity	Sheath Size Compatibility
P-2ST-SO125-145	1.25 mm	145 cm	1 each	6F
P-2ST-SO150-145	1.50 mm	145 cm	1 each	6F
P-2ST-SO200-145	2.00 mm	145 cm	1 each	6F

Classic Crown Model Number	Crown Size	Length	Quantity	Sheath Size Compatibility
P-2ST-CL150-145	1.50 mm	145 cm	1 each	6F
P-2ST-CL200-145	2.00 mm	145 cm	1 each	6F



### The Complete Stealth 360™ OAS System utilizes:

- OAS Pump
- ViperWire Advance™ Peripheral Guide Wire
- ViperSlide™ Lubricant
- Saline Line (comes packaged with the Stealth 360™ device)

### ViperWire Advance™ Peripheral Guide Wire

Model Number	Description	Length	Quantity
VPR-GW-14	0.014" Shaft/0.014" Tip	335 cm	Box of 5
VPR-GW-17	0.014" Shaft/0.017" Tip	335 cm	Box of 5

### ViperWire Advance™ Peripheral Guide Wire with Flex Tip

Model Number	Description	Length	Quantity
VPR-GW-FLEX14	0.014" Shaft/0.014" Tip	335 cm	Box of 5
VPR-GW-FLEX18	0.014" Shaft/0.018" Tip	335 cm	Box of 5

### ViperSlide™ Lubricant

Model Number	Description	Quantity
VPR-SLD2	100 mL Bag	Box of 10

### OAS Pump

Model Number	Description	Quantity
SIP-3000	Saline Pump	1 each

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1. Shammam NW, Lam R, Mustapha J, Ellichman J, et al. Comparison of orbital atherectomy plus balloon angioplasty vs. balloon angioplasty alone in patients with critical limb ischemia: results of the CALCIUM 360 randomized pilot trial. *J Endovasc Ther.* 2012 Aug;19(4):480-8.
2. Dattilo R, Himmelstein SI, Cuff RF. The COMPLIANCE 360° Trial: a randomized, prospective, multicenter, pilot study comparing acute and long-term results of orbital atherectomy to balloon angioplasty for calcified femoropopliteal disease. *J Invasive Cardiol.* 2014;26(8):355-60.
3. Das T, Mustapha J, Indes J, et al. Technique optimization of orbital atherectomy in calcified peripheral lesions of the lower extremities: the CONFIRM series, a prospective multicenter registry. *Catheter Cardiovasc Interv.* 2014 Jan 1;83(1):115-122.
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5. Adams GL, Khanna PK, Staniloae CS, et al. Optimal techniques with the Diamondback 360° System achieve effective results for the treatment of peripheral arterial disease. *J Cardiovasc Transl Res.* 2011 Apr;4(2):220-9.
6. Mustapha J, et al. Orbital Atherectomy Treatment of Peripheral Artery Disease and Critical Limb Ischemia. *J Crit Limb Ischem.* 2021;1(3):E118-E125.
7. Krishnan P, Martinsen BJ, Tarricone A, et al. Minimal Medial Injury After Orbital Atherectomy. *J Endovasc Ther.* 2017 Feb;24(1):167-168.
8. Zheng Y, Belmont B, Shih AJ. Experimental investigation of the abrasive crown dynamics in orbital atherectomy. *Med Eng Phys.* 2016 Jul;38(7):639-647.
9. Bosiers M, Deloose K, Callaert J, et al. 4-French-compatible endovascular material is safe and effective in the treatment of femoropopliteal occlusive disease: results of the 4-EVER trial. *J Endovasc Ther.* 2013 Dec;20(6):746-56.
10. Giannopoulos S, Secemsky EA, Mustapha JA, et al. Three-Year Outcomes of Orbital Atherectomy for the Endovascular Treatment of Infrainguinal Claudication or Chronic Limb-Threatening Ischemia. *J Endovasc Ther.* 2020 Oct;27(5):714-725.
11. Data on file at Abbott - Clindex Report. 2020 Mar.
12. Data on file at Abbott - Suppl. Table C03 from LIBERTY OAS Sub-analysis by PACSS Grade.

These instructions do not replace the Stealth 360™ Peripheral Orbital Atherectomy System Instructions for Use (IFU). Refer to the Stealth 360™ Peripheral Orbital Atherectomy System IFU for the use and operation of the Stealth 360™ Peripheral Orbital Atherectomy System.

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