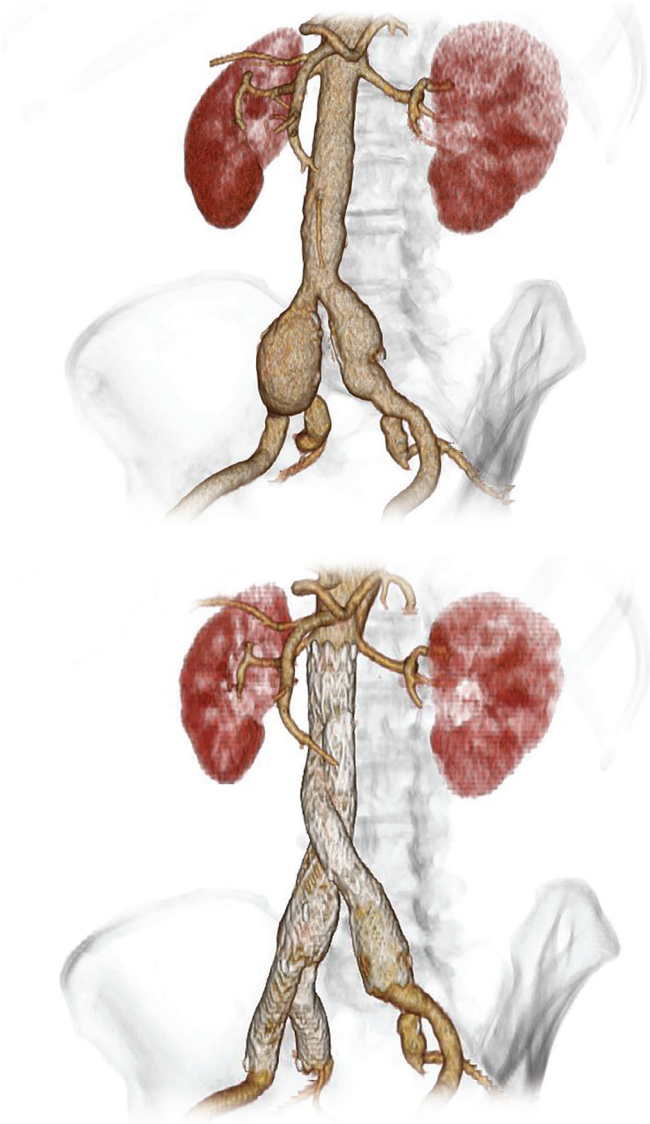
GORE® EXCLUDER®
AAA Endoprosthesis

GORE® EXCLUDER®
Iliac Branch Endoprosthesis

PRESERVATION MATTERS — A.L.W.A.Y.S.

Hypogastric artery preservation is the recommended treatment[1,2] to sustain quality of life. When determining which preservation method is best, A. L. W. A. Y. S.[3,4] consider each patient's:

- **A** Activity level
- **L** Length
- **W** Width
- **A** Aortic Disease
- **Y** Young
- **S** Seal



Pre-treatment and five-year follow-up; first clinical use. Images courtesy of Brian Peterson, MD. St. Anthony's Medical Center; St. Louis, Missouri.

Together, improving life

Durable Outcomes. Proven Performance.

The GORE® EXCLUDER® Iliac Branch Endoprosthesis (IBE) is the first and only off-the-shelf aortic branch solution approved in the US and is fully designed to preserve blood flow to external and internal iliac arteries.

Global Registry for Endovascular Aortic Treatment (GREAT) IBE data at four years follow-up:

63 patients

96.8% Patency* External iliac artery

98.4% Patency* Internal iliac artery

94.8% Freedom from IBE-related reintervention†

None reported Buttock claudication and sexual dysfunction

GORE® EXCLUDER® Iliac Branch Endoprosthesis

The GORE® EXCLUDER® AAA device is the most-studied‡ EVAR stent graft and designed for durable outcomes.

GORE® EXCLUDER® AAA Device data from GREAT through§ five years follow-up:

3,274 patients

0.7% Type Ib endoleaks

0.7% Limb occlusion*

GORE® EXCLUDER® AAA Endoprosthesis

* Based on reported occlusion adverse events.

† Based on GREAT IBE data through four years follow-up with n = 96.

‡ Based on company-sponsored trials and registries shown on clinicaltrials.gov for currently available stent grafts.

§ GREAT. n = 3,274. To calculate the overall event rates from procedure through end of study period, all subjects who could have had events, regardless of length of follow-up, were included. For outcome data, GREAT only collects site reported serious adverse events. Therefore, all reported endoleaks are defined as serious and require reintervention.

References

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 FL, Powell JT, Fraedrich G, *et al*. 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. Million A, Milner R, Oderich GS, Schneider DB, Spark I, Verzini F. Expert discussion: when to preserve the hypogastric artery. *Endovascular Today* 2017;16(8)Supplement:6-11.
4. Schneider DB, Milner R, Heyligers JMM, Chakfé N, Matsumura J. Outcomes of the GORE Iliac Branch Endoprosthesis in clinical trial and real-world registry settings. *Journal of Vascular Surgery* 2019;69(2):367-377.e1.

Consult Instructions for Use
eifu.goremedical.com

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. $\text{R}_{\text{X Only}}$

Products listed may not be available in all markets.

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