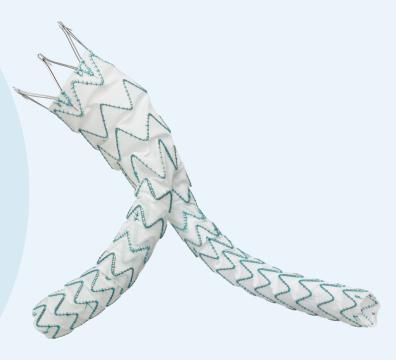




TREO® ABDOMINAL STENT-GRAFT SYSTEM

Versatile by Design. Fit for any Anatomy.*

*Per IFU.









Optimised Design for Patient Safety and Procedural Success

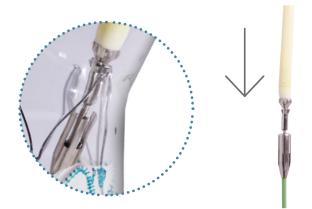
Proximal clasp allows for safe graft re-positioning and delivery system removal

В

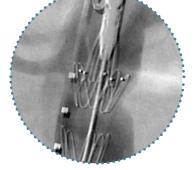
Α

Infrarenal barbs are obscured in graft fabric "valleys" prior to final clasp release Suprarenal barbs are completely covered allowing graft to be safely repositioned until clasp is released **Technical Success**¹ (at index procedure; 150/150)

100%



Proximal Clasp Simple Caudal Removal Easily withdraw delivery system without added steps or risk of entanglement



Proximal clasp prevents barb engagement with vessel wall until released

Conversions to open repair ² (150/150)

0%



A Low Profile Delivery System and Leave Behind Sheath

Designed to expand patient applicability, enable percutaneous access and fewer sheath exchanges, with the aim to reduce:

- ▶ Access vessel trauma and complications ^{3,4}
- Procedural time, hospital length of stay and cost ^{3,4}
- ▶ Patient post-operative pain ³

TREO Percutaneous Access 5 (305/321)

95%

Main Body Delivery System		Leg Extension Delivery System	
20 - 28mm	30 - 36mm	9 - 15mm	17 - 24mm
18Fr(OD))19Fr(OD)))13Fr(OD)	○ 14Fr(0D) 〇

3. El Beyrouti, H et al. 2020. Early results of a low-profile stent-graft for thoracic endovascular aortic repair. PLoS One, 15(11), p.e0240560.

4. Bi, G et al. 2022. Is percutaneous access superior to cutdown access for endovascular abdominal aortic aneurysm repair? A meta-analysis. Vascular, 30(5), pp.825-833.

5. US Post Approval Study; Data on File





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Bolton Medical Inc. 799 International Parkway, Sunrise, FL 33325, United States