

**PHILIPS**

*Phoenix*

Atherectomy system



**The next  
generation**  
of peripheral atherectomy is here





**The first and only**  
hybrid<sup>1</sup> atherectomy system

The Phoenix atherectomy catheter family combines the benefits of existing atherectomy systems to **deliver a unique, hybrid<sup>1</sup> atherectomy option**. This will help you tailor your treatment approach for your patients.

## Safe<sup>2</sup>

Clinical concern	Phoenix solution	Safety data <sup>2</sup>
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**	Design of the Phoenix cutter head allows debulked material to be continuously captured	<1% distal embolization 0% use of distal protection

\*grade C or greater

\*\*requiring intervention

## 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. The effectiveness endpoint set in the EASE trial was exceeded, and a <1% clinically driven target lesion revascularization (TLR) was achieved.<sup>3</sup>
- Phoenix catheters have been shown to effectively treat most peripheral vasculature.<sup>4</sup>
  - 1.8 and 2.2 mm (tracking) are suited for treating small vessels or highly stenosed lesions.
  - 2.4 mm (tracking and deflecting) are 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 without having to first pass a nosecone.

Product landscape	Hybrid	Directional	Laser	Orbital	Rotational
Front cutting for direct lesion access	•		•	•	•
Plaque removal	•	•			•
Directional cutting ability***	•	•	•		
Single insertion	•		•	•	•
No need for capital equipment or procedural accessories	•	•			

\*\*\*Available with Phoenix 2.4 mm deflecting catheter



# 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.<sup>3</sup>

## Capture

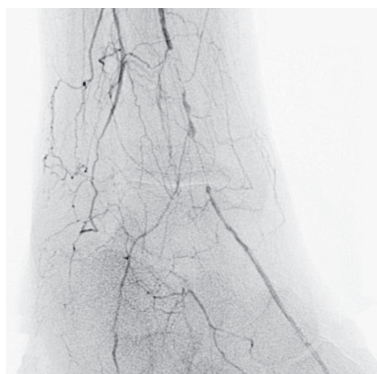
Blades are designed for continuous capture of debulked material.

## Clear

Archimedes screw clears debulked tissue.

# Low profile system for distal lesion access<sup>4,5</sup>

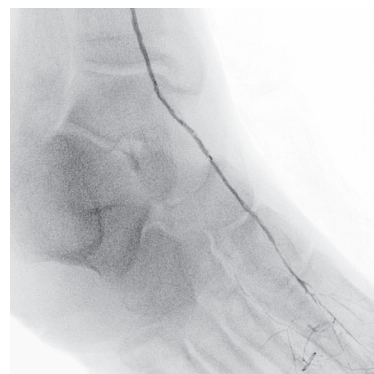
Case performed by Dr. Christopher LeSar at the Vascular Institute of Chattanooga.



Lesion identified in the dorsalis pedis.<sup>4</sup>



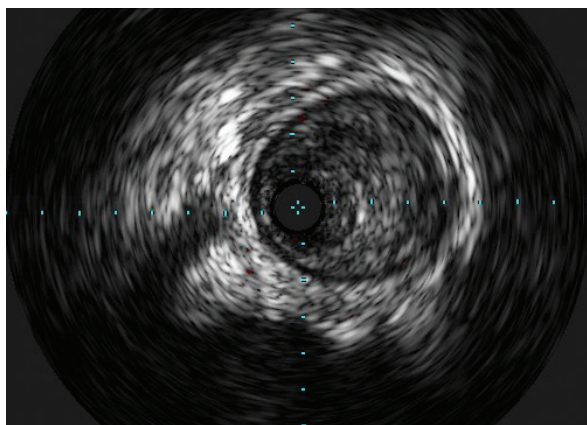
Low profile (5F), front cutting device allowed for direct access to very distal lesion location.<sup>4</sup>



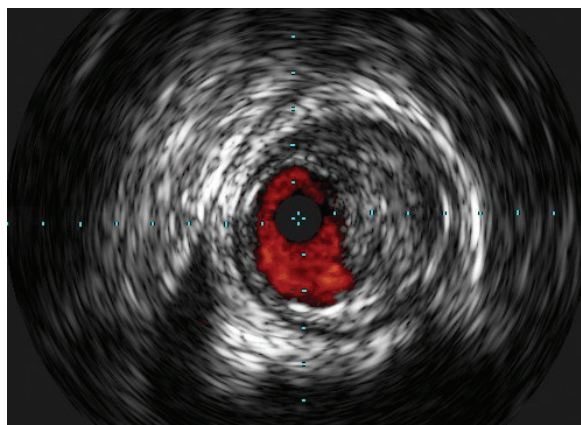
Flow is restored post treatment with Phoenix.

# Phoenix created 67% luminal gain without vessel injury<sup>5</sup>

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



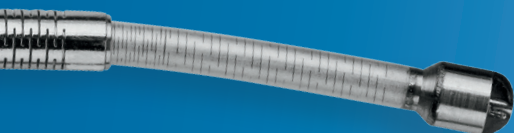
IVUS pre-Phoenix: lesion identified in the popliteal artery. IVUS showed length of plaque and vessel diameter, confirmed Phoenix as optimal treatment choice and helped physician choose DCB length and size.



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

1. Hybrid atherectomy refers to the Phoenix family of products. 2.4 mm deflecting catheter is the only device with directional cutting ability
2. Davis, Thomas et al., Safety and effectiveness of the Phoenix Atherectomy System in lower extremity arteries: Early and midterm outcomes from the prospective multicenter EASE study. Vascular. September 27, 2017, DOI: 10.1177/1708538117712383
3. Davis, Thomas et al., Safety and effectiveness of the Phoenix Atherectomy System in lower extremity arteries: Early and midterm outcomes from the prospective multicenter EASE study. Vascular. September 27, 2017, DOI: 10.1177/1708538117712383. Target lesion locations: ATK (48%) and BTK (52%). Technical success rate was 95.1% (performance goal was 86%).
4. The Phoenix atherectomy 1.8 mm tracking catheter is indicated for vessels 2.5 mm in diameter or above. The Phoenix atherectomy 2.2 mm tracking, 2.4 mm tracking and 2.4 mm deflecting catheters are indicated for vessels 3.0 mm in diameter or above. 1.8 mm, 2.2 mm and 2.4 mm tracking 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.
5. Case study results are not predictive. Results in other cases may vary.

## 2.4 mm deflecting



## 2.4 mm tracking



## 2.2 mm tracking



## 1.8 mm tracking



Deep femoral artery

Superficial femoral artery

Popliteal artery

## Above the knee

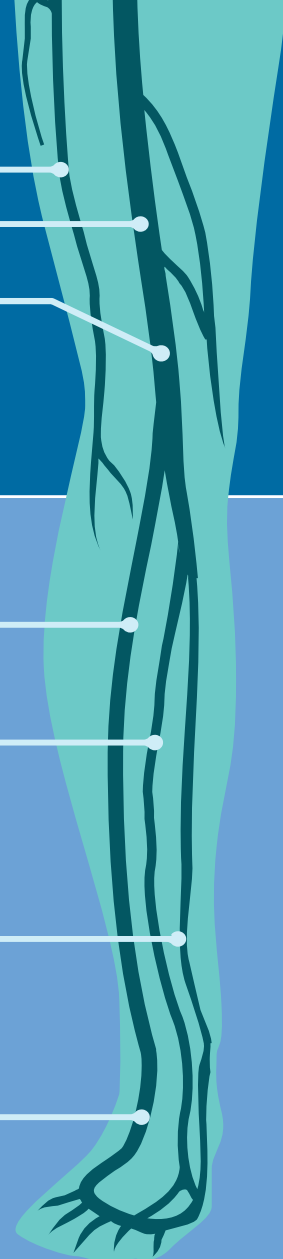
## Below the knee

Anterior tibial artery

Peroneal artery

Posterior tibial artery

Dorsalis pedis artery



# Ordering information

Part number	Catheter size	Introducer size	Working length	Guidewire diameter
P18130K	1.8 mm tracking	5F (>1.8 mm)	130 cm	0.014"
P18149K	1.8 mm tracking	5F (>1.8 mm)	149 cm	0.014"
P22130K	2.2 mm tracking	6F (>2.2 mm)	130 cm	0.014"
P22149K	2.2 mm tracking	6F (>2.2 mm)	149 cm	0.014"
P24130K	2.4 mm tracking	7F (>2.4 mm)	130 cm	0.014"
PD24127K	2.4 mm deflecting	7F (>2.4 mm)	127 cm	0.014"

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