The evolution of AORFIX™

AORFIX™ AAA Stent Graft now with the new AORFLEX™ Delivery System
The confident choice for the right angles

AORFIX™ – the only AAA stent graft approved for all angulations from 0 – 90°, now even easier to use with AORFLEX™ Delivery System

Enhanced navigation in tortuous anatomy
- Reduced risk of vessel damage during AORFLEX™ delivery system insertion and withdrawal
- Improved manoeuvring and reduced friction between the delivery system and vessel walls
- Minimised risk of vessel trauma and wall abrasion

Greater deployment control with reduced deployment forces
- Excellent torque, pushability and trackability
- High kink resistance and flexibility
- Reduced risk of sheath stretch in complex anatomies
- AORFLEX™ tracks consistently and easily, even when accessing tortuous iliacs and high neck angulations

- Excellent angiographic visibility
- Excellent torque and kink resistance
- Reduced friction and enhanced navigation with hydrophilic coating
- Gentle taper for trackability in tortuous vessels
- Optimal flexibility with interlocking spine

AORFIX™ AAA Stent Graft with AORFLEX™ Delivery System
NEW AORFLEX™ Delivery System

Enhanced control for effective deployment, specifically for AAA patients with complex anatomies

Confidence with precise positioning

- Platinum Iridium radiopaque marker with exceptional radiopacity designed for excellent angiographic visibility
- Greater confidence with enhanced placement accuracy
- Indicates accurate position of the sheath during deployment

Sheath control allows controlled step-by-step fishmouth and graft body deployment

Initial 10 cm of sheath free of hydrophilic coating for improved grip

Disconnector control for release of AORFIX™ stent graft from the delivery system

Push rod control to engage fixation hooks

Reduced blood loss with improved valve performance

Proximal handle for delivery system stabilisation

Seam orientation marker ensures accurate anterior positioning prior to insertion

The new wave of delivery for the right angles
Retrospective AORFIX™ Data Retrieval (‘RADAR’) registry results

<table>
<thead>
<tr>
<th>Reported Complications</th>
<th>All Cases</th>
<th>Neck Angle &lt;60</th>
<th>Neck Angle ≥60</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible cases for 3 year follow up</td>
<td>538</td>
<td>228</td>
<td>138</td>
</tr>
<tr>
<td>Stent migration</td>
<td>0.4%</td>
<td>0.4%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Wire fracture</td>
<td>0.2%</td>
<td>0.0%</td>
<td>0.7%</td>
</tr>
<tr>
<td>Type 1 endoleaks</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Type 3 endoleaks</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Number of re-interventions</td>
<td>2.1%</td>
<td>0.7%</td>
<td>0.9%</td>
</tr>
</tbody>
</table>

Voluntary international registry includes data from 1498 cases with a follow up range up to 9 years (March 2012).

Clinical practice is increasingly moving towards endovascular aneurysm repair and away from surgery, and devices that both perform well and are flexible such as AORFIX™ will play an important role as a highly effective option for patients with more complex anatomy and increase the number of patients for whom a non-operative AAA repair is possible.

Dr Gray, Cardiovascular Research Foundation, New York; ISET Symposium 2012

The device’s flexible design allows safe and accurate aneurysm sac exclusion in patients with highly challenging anatomy.


62.4% of all patients had sac shrinkage 5 mm or more

59.2% of patients with neck angles > 60° had sac shrinkage 5 mm or more
Measure a range of diameters in the neck. Oversize largest diameter by 10%.

- **D1**: Measure a range of diameters in the neck. Oversize largest diameter by 10%.
- **L1**: Graft length from decided proximal landing zone to aortic bifurcation minus about 10 – 30 mm.
- **L2**: Cannulation socket to distal landing zone position.*
- **L3**: Cannulation socket to distal landing zone position.*
- **D2**: Diameter at distal landing zone. Oversize by 10%.
- **D3**: Diameter at distal landing zone. Oversize by 10%.

DISCLAIMER: It is the responsibility of the clinician to assess the suitability of AORFIX™ for their patient by referring to the Instructions for Use (IFU). The information included in this brochure should not be used as an EVAR training tool and does not replace clinical expertise. Clinicians should understand the principles related to endovascular stent grafts and be trained in EVAR techniques prior to commencing any EVAR procedure.

For more information about sizing, please visit [www.lombardmedical.com](http://www.lombardmedical.com).

Smartphone users can access this information by scanning this code.

Championing complex EVAR treatment

The 1st and only AAA stent graft approved for use with 0–90° angles*

- Effective sealing even in high angulations shown to reduce Type I endoleaks

- Precise positioning with high visibility tantalum radiopaque markers

- Secure fixation 8 mm infrarenal fixation and seal zone with 8 "cat's claw" hooks

- Supreme flexibility in angles up to 90° with helical stent structure

- Minimised limb occlusion with highly flexible limbs

- Excellent durability electropolished nitinol wire

- Exceptional contouring to landing zones with woven polyester fabric

*CE Marked, please refer to current AORFIX™ IFU.