## REFORM trial clinical summary – 24 month results<sup>1</sup>

| Trial name:                      | REFORM  |  |
|----------------------------------|---|--|
| Company:                         | Cook Medical  |  |
| Product:                         | Formula™ Renal Balloon-Expandable Stent   |  |
| Lead investigator:               | Dr. Robert Bersin, Seattle Cardiology and<br>Swedish Medical Center   |  |
| Trial design:                    | Prospective, single-arm study at seven investigative sites in U.S.  |  |
| Patients enrolled:               | 100   |  |
| Core lab adjudication:           | Yes   |  |
| General lesion requirement:      | De novo or restenotic ostial lesions  |  |
| Primary endpoint:                | Primary patency at nine months  |  |
| Secondary endpoints:             | Target lesion revascularization (TLR) rate and changes in hypertension, renal function and blood pressure medication levels |  |
| Method:                          | Stenting following suboptimal angioplasty   |  |
| Patient demographics:            |   |  |
| Age (years)                      | 72 ± 10   |  |
| Diabetes                         | 43%   |  |
| Hypertension                     | 97%   |  |
| Systolic blood pressure (mm Hg)  | 150 ± 21  |  |
| eGFR (mL/min)                    | 61 ± 29   |  |
| Lesion characteristics:          |   |  |
| Lesion length (mm)               | 7.7 ± 3.6   |  |
| Reference vessel diameter (mm)   | 5.3 ± 0.9   |  |
| Diameter stenosis (preprocedure) | 57 ± 14%  |  |
| Moderate to severe calcification | 37%   |  |



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|   | 9 Months                    | 24 Months           |
|---|-----------------------------|---------------------|
| Major adverse events (TLRs only)*                                     | 2.2%                        | 5.7%                |
| Significant embolic events  | 0.0%                        | 0.0%                |
| Primary patency <sup>†</sup>  | 91.7%                       | _                   |
| Systolic blood pressure (mm Hg)<br>– preprocedure = 150 ± 21          | 141 ± 21 ( <i>P</i> < 0.01) | 136 ± 20 (P < 0.01) |
| Patients with ≥ 10 mm Hg decrease<br>in systolic blood pressure       | 45%                         | 55%                 |
| Patients with decrease in <b>dosage</b> of blood pressure medications | 30%                         | 40%                 |
| Patients with decrease in <b>number</b> of blood pressure medications | 23%                         | 40%                 |
| Clinically meaningful improvement in renal function <sup>‡</sup>      | 11.9%                       | 19.6%               |

\* Per patient.

† Defined as freedom from TLR and < 60% stenosis by duplex ultrasound (peak systolic velocity < 225 cm/sec and renal aortic ratio  $\leq$  3.5) or angiography. Patency assessed at nine months only.

- $\ddagger$  Defined as  $\ge$  25% increase in eGFR or  $\ge$  0.5 mg/dL decrease in serum creatinine.
- 1. Bersin R. Results through 2-year follow-up from the REFORM clinical study. Presented at: EuroPCR; May 17-20, 2011; Paris, France.

