

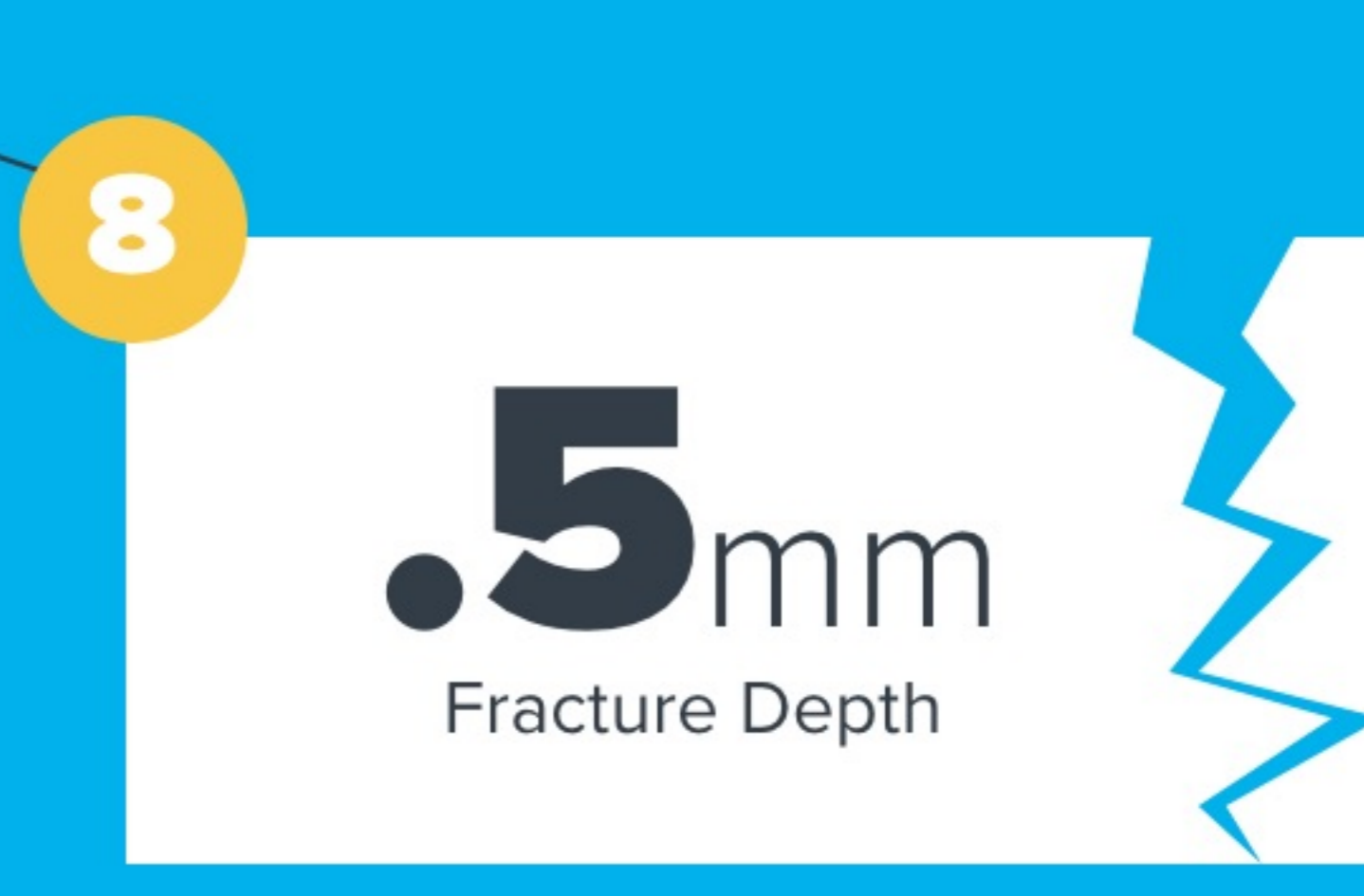
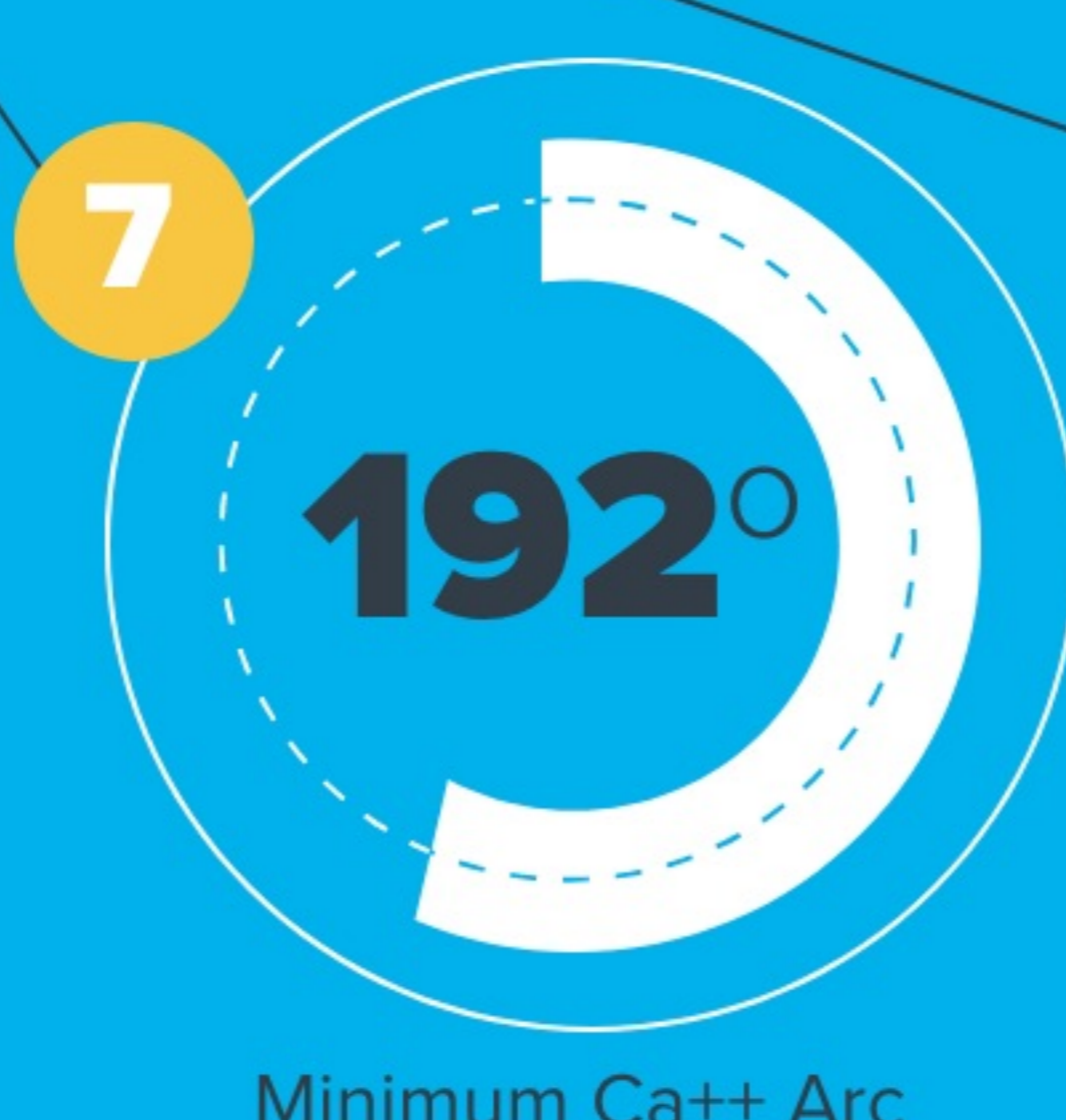
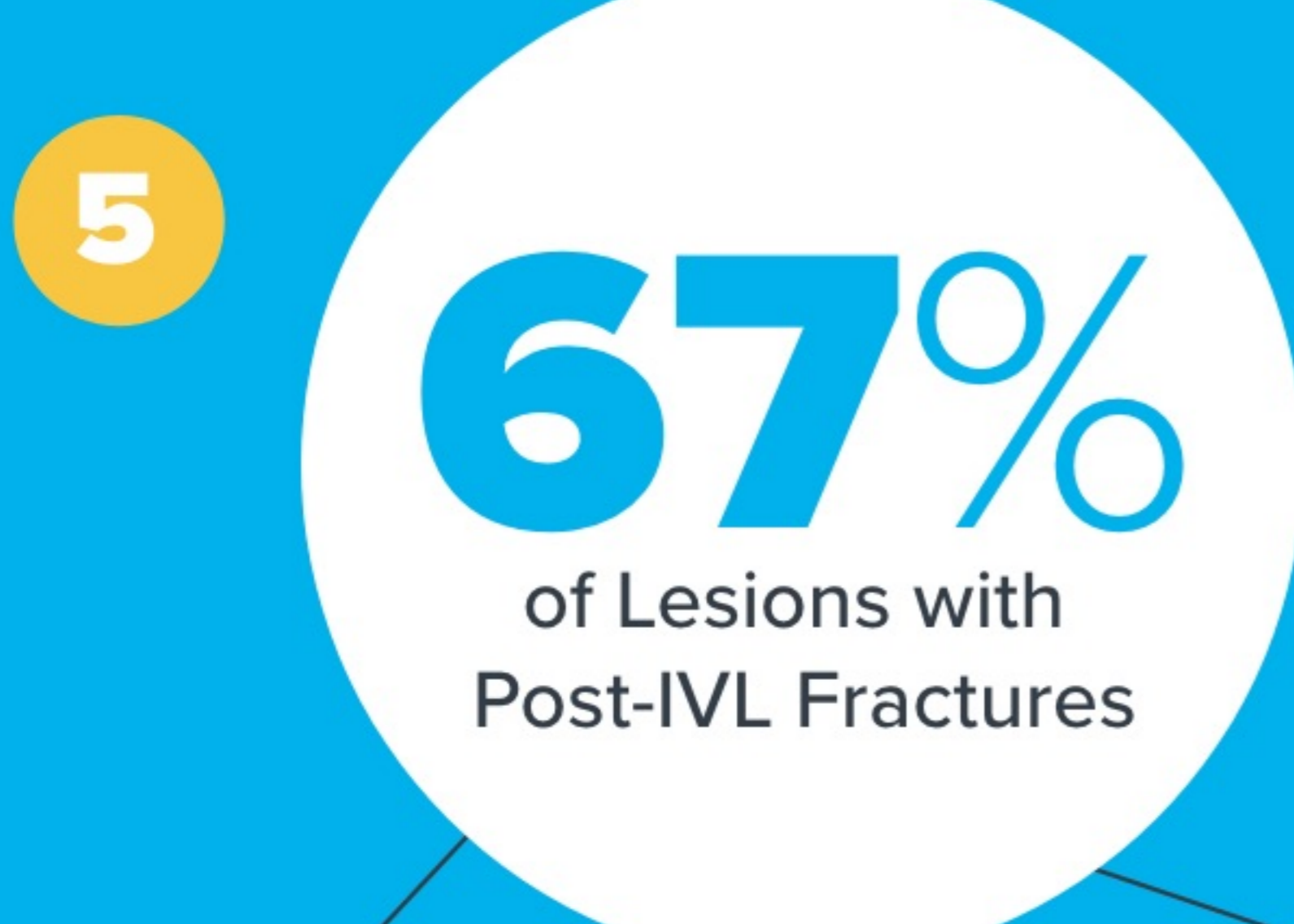
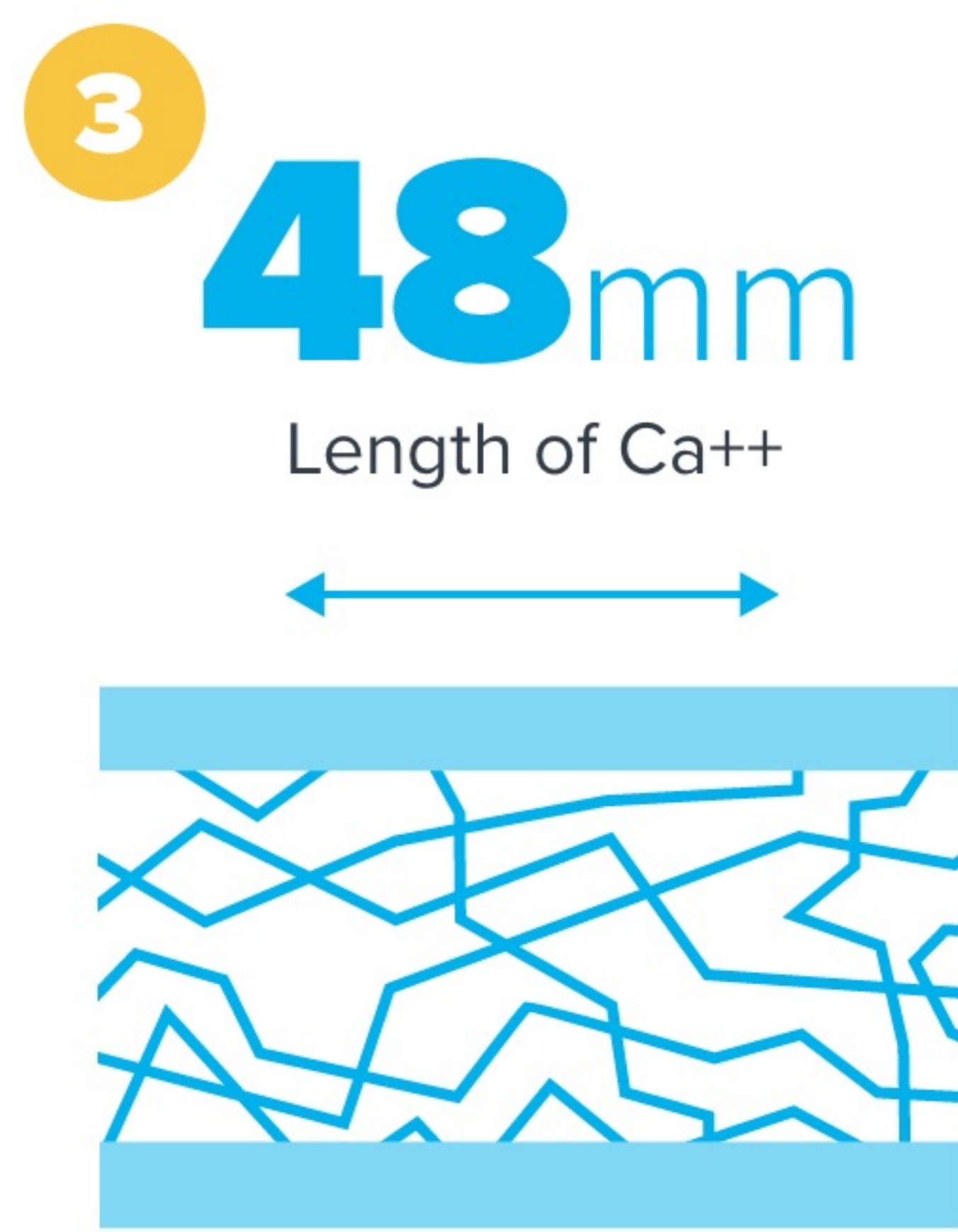
DISRUPT CAD III

MAKING BIG WAVES IN COMPLEX CALCIUM

CAD III OCT SUB-STUDY: TOP 10 DATA POINTS TO KNOW



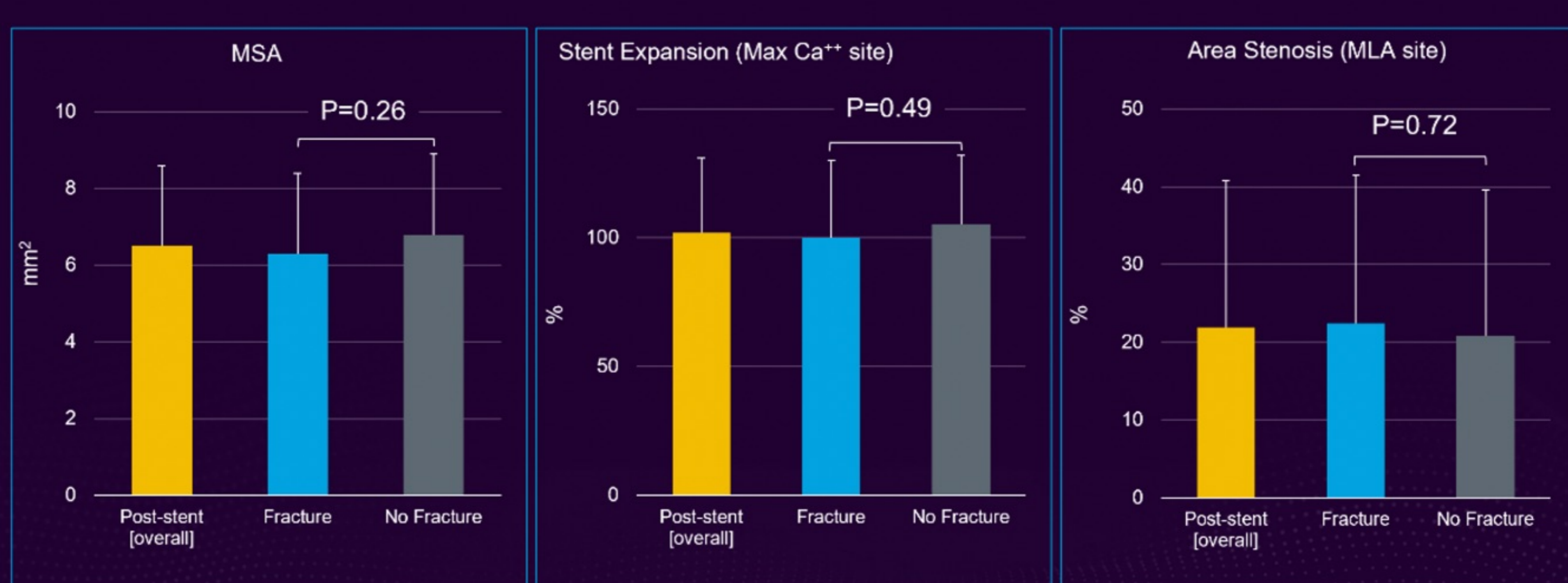
100 Patients with Severe Ca++



Consistently Excellent Outcomes Regardless of Fracture After IVL

Outcomes by Fracture Visualization

DISRUPT CAD III



Consistent outcomes regardless of fracture visualization by OCT

St. Francis Hospital, The Heart Center Catholic Health Services

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Conclusions

DISRUPT CAD III

- OCT confirmed the safety of coronary IVL with no severe angiographic complications at the end of the procedure
- OCT demonstrated longitudinal and circumferential calcium fractures in heavily calcified lesions resulting in:
 - Increased vessel compliance
 - Large post-procedural MSA
 - Excellent stent expansion
- MSA, area stenosis, and stent expansion outcomes were excellent regardless of Ca++ fracture visualization by OCT and may represent a limitation of OCT to detect subtle microfractures in calcified plaque

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For use outside the U.S. only. Caution: In the United States, Shockwave C² Coronary IVL catheters are investigational devices, limited by United States law to investigational use. Shockwave C² Coronary IVL catheters are commercially available in certain countries outside the U.S. Please contact your local catheters representative for specific country availability. The Shockwave C² Coronary IVL catheters are indicated for lithotripsy-enhanced, low-pressure balloon dilatation of calcified, stenotic de novo coronary arteries prior to stenting. Prior to use, please reference the Instructions for Use for more information on indications, contraindications, warnings, precautions and adverse events. Contact Shockwave Medical at customerservice@shockwavemedical.com