



The FANTOM II Study

**First Report for the 12-month clinical outcomes of
the Fantom sirolimus-eluting bioresorbable scaffold**

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Potential conflicts of interest

Speaker's name: Dr. Alexandre Abizaid

I have the following potential conflicts of interest to report:

Consultant to REVA Medical, Inc.

Fantom Bioresorbable Scaffold



Fantom® (REVA Medical)
Sirolimus-Eluting Bioresorbable Scaffold
Desaminotyrosine Polycarbonate

Key Scaffold Features

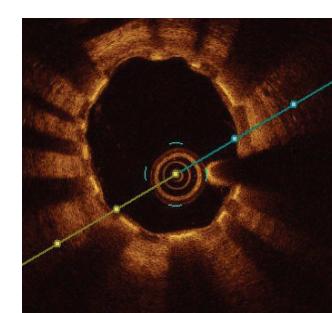
- Complete scaffold visibility under x-ray
- Single-step continuous inflation
- Clinically significant expansion range
- Optimal radial strength at 125 µm thickness
- Vasomotion restoration ~1 year
- No special storage or handling



Visibility



Deliverability



Vessel Patency

Fantom

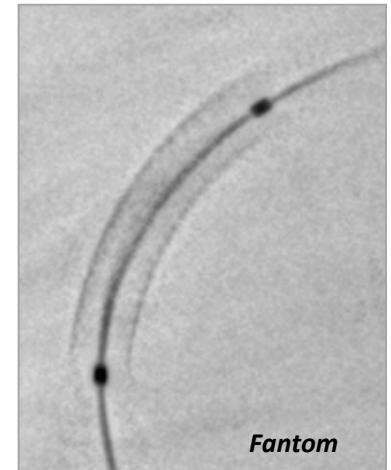
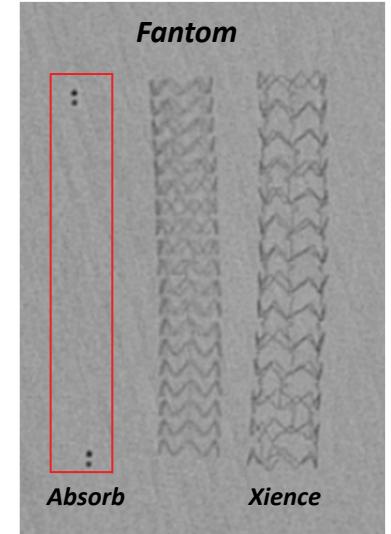
Radiographic Visibility

- **Fantom's (x-ray) visibility**

(Covalently bound Iodine to polymer)

Allows for:

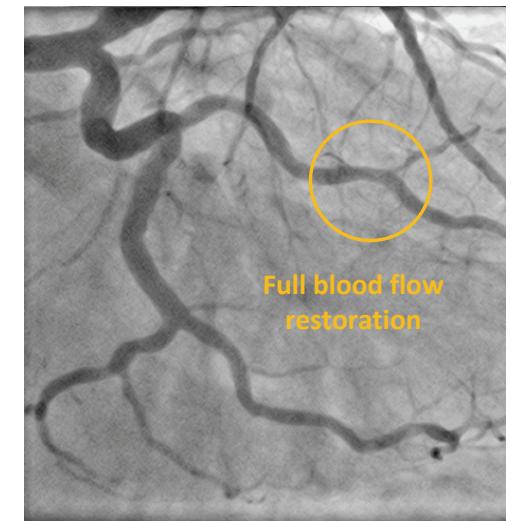
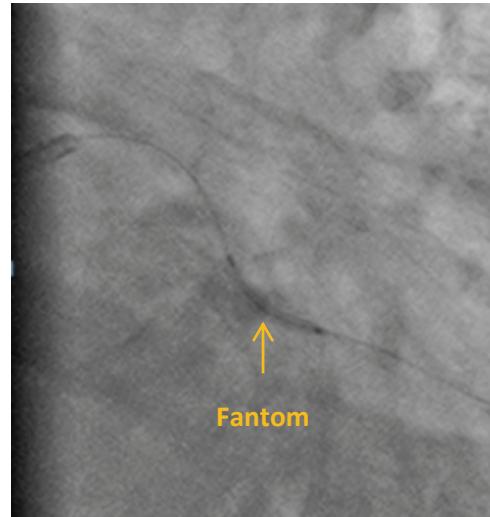
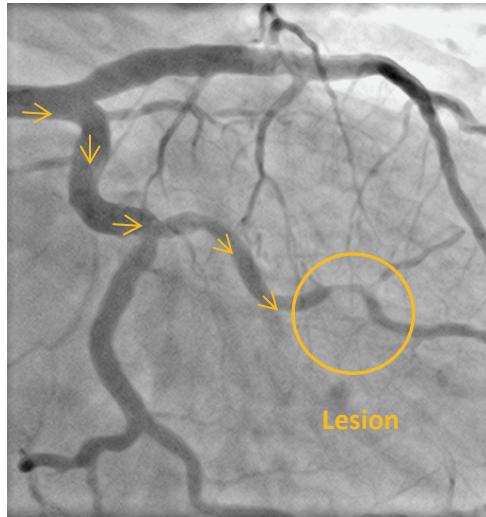
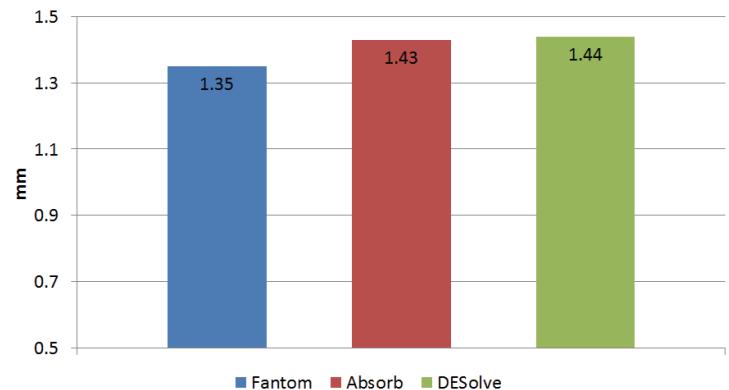
- Precise scaffold placement
- Accurate lesion coverage
- Full structural assessment after deployment
- Less reliance on invasive imaging compared to other BRS (IVUS/OCT)



Fantom

Enhanced Deliverability

- **Thin 125 μ m strut design enables:**
 - Reduced scaffold crossing profile
 - Greater device flexibility
 - Increased access to a greater number of lesions



Courtesy of A. Abizaid, Dante Pazzanese, Sao Paulo, Brazil 4

Fantom

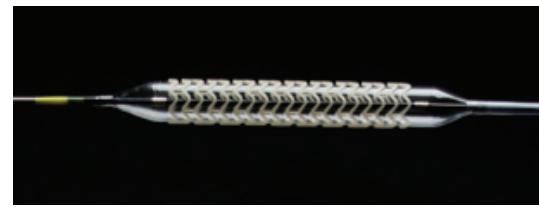
Single-Step Inflation

- **Inflation process:**

- Continuous inflation to intended diameter
- Reduces arterial occlusion time for the patient
- Increases speed for scaffold delivery for the physician
- Eliminates the need to recall multiple inflation schemes



[VIDEO]



REVA's advanced polymer enables single-step inflation

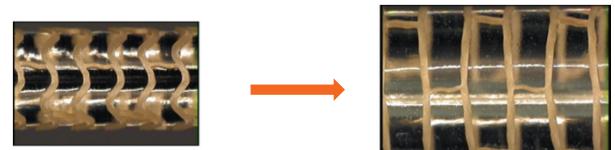
Fantom

Bioresorbable Scaffold Features

- **Post-dilation without compromise**

- Substantial expansion safety margin
 - 0.75 to 1.0 mm depending upon device size
- Able to adjust for vessel taper

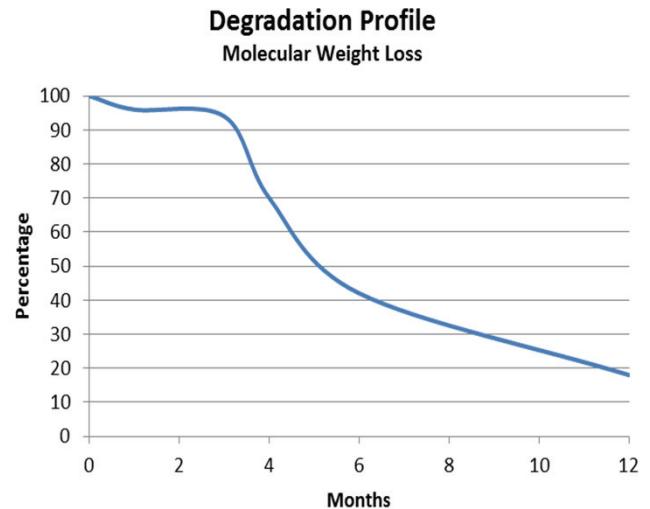
3.0mm Nominal Device

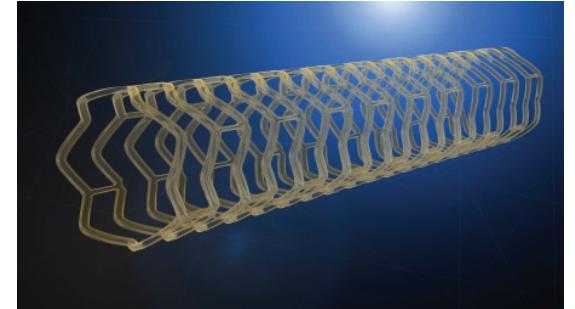


Polymer enables expansion to 3.75 mm without fracture

- **Restoration of vasomotion**

- Maintains radial strength during healing
- Restoration of vasomotion approx. 1 yr.
- Eliminates undesirable shear stress induced by a permanent implant





FANTOM II Trial

Safety & Performance Study for the
Fantom Sirolimus-Eluting Bioresorbable
Coronary Scaffold

FANTOM II

Study Investigators

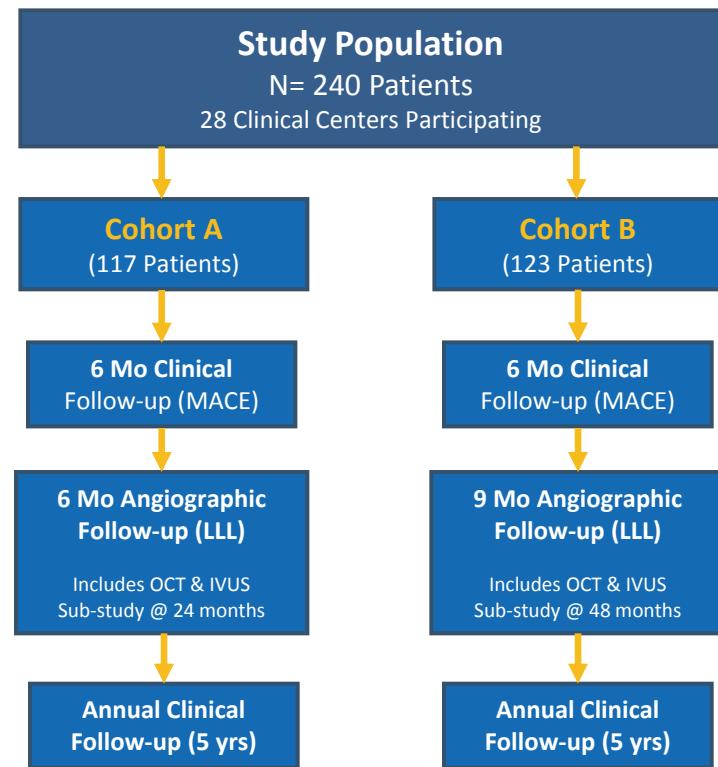
- Australia
 - Dr. Muller, Dr. Jepson, Dr. Walters
- Belgium
 - Dr. De Bruyne
- Brazil
 - Dr. Abizaid, Dr. Costa, Dr. Chamie, Dr. Perin
- Denmark
 - Dr. Christiansen, Dr. Lassen, Dr. Okkels-Jensen
- France
 - Dr. Carrié, Dr. Chevalier, Dr. Fajadet, Dr. Collet
- Germany
 - Dr. Weber-Albers, Dr. Naber, Dr. Achenbach, Dr. Frey, Dr. Lutz, Dr. Kische, Dr. Ince, Dr. Brachman
- Netherlands
 - Dr. Amoroso, Dr. Wykrzykowska, Dr. Daemen
- Poland
 - Dr. Dudek, Dr. Kochman, Dr. Koltowski, Dr. Lesiak, Dr. Wojdyla

FANTOM II

Study Design and Endpoints

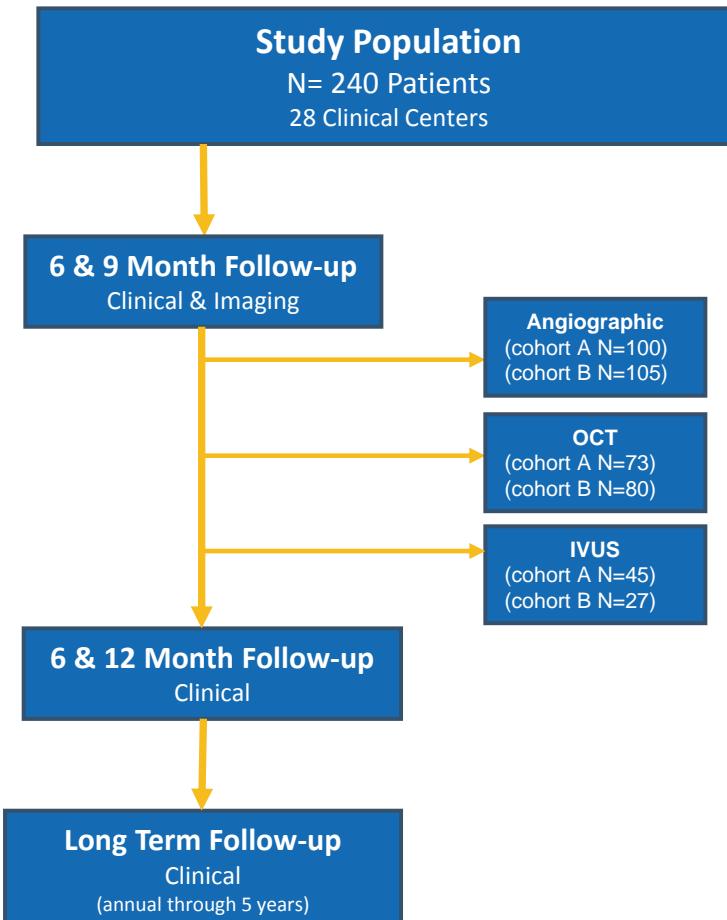
- **Study Design**

- Safety and Performance Trial
- 240 patients in 2 cohorts
- 2.5mm to 3.5mm vessels
- Lesion length \leq 20mm
- Angiographic follow-up
 - Cohort A: 6 months 117 Pts.
 - Cohort B: 9 months 123 Pts.
- Serial imaging sub-studies
 - Cohort A: 24 months (25 Patients)
 - Cohort B: 48 months (25 Patients)



FANTOM II – Cohort A & B

Study Overview and Baseline Characteristics



Patient Characteristics (N=240)	
Patient Age (average years)	62.7 ± 10.1
Male	70.4%
Diabetes	23.8%
Current/Former Smoker	59.6%
Hypertension	73.8%
Hyperlipidemia	70.8%
Prior PCI	43.8%
Prior CABG	2.9%
Prior MI	26.3%
Recent LVEF <40%	0.0% (N=231)

FANTOM II – Cohort A

Lesion Characteristics and Procedural Outcomes

Lesion Characteristics

Target Lesion Location (n=238) ¹	
LAD	48.7% (116)
LCX	31.3% (74)
RCA	20.2% (48)
ACC/AHA Lesion Class (n=238) ¹	
Type A	18.5% (44)
Type B1	49.6% (118)
Type B2	29.4% (70)
Type C	2.5% (6)

(1) Two pre-procedure angiograms were not available

Initial Outcomes

Acute Procedural Outcomes	
Acute Technical Success ⁽¹⁾	95.8%
Acute Procedural Success ⁽²⁾	99.1%
Clinical Procedural Success ⁽³⁾	99.6%

(1) Defined as successful delivery and deployment of the intended scaffold in the intended lesion without device related complications.

(2) Defined as acute technical success (see definition above), resulting in a residual stenosis of ≤50 percent with no immediate (in-hospital) MACE.

(3) Defined as acute procedural success (see definition above), with no MACE thirty days post-intervention and with a final diameter stenosis ≤50 percent.

FANTOM II – Cohort A & B

Safety Results

Components of 6-Month Primary Endpoint (modified ITT): non-Hierarchical		N=240 (%), (N)
MACE		2.1% (5)
Cardiac Death		0.4% (1)¹
Target vessel MI		1.3% (3)
Clinically Driven TLR		0.8% (2)

Components of 12-Month Secondary Endpoint (modified ITT): non-Hierarchical		N=240 N, (%)
MACE		4.2% (10)
Cardiac Death		0.8% (2)^{1,2}
Target vessel MI		1.3% (3)
Clinically Driven TLR		2.5% (6)

(1) One patient died between 0-6 months. Exact cause of death not determined. Patient died at home 4 weeks after subsequent TAVI procedure.

(2) One death occurred between 6-12 months. Patient was reported to have died of COPD by treating physician but cardiac relation could not be excluded.

FANTOM II – Cohort A & B

Safety Results

Scaffold Thrombosis Assessment 12-Months Event Rate	N=240 (%), (N)
Scaffold Thrombosis Per Protocol Definitions	0.4% (1) ¹
Scaffold Thrombosis Per ACR Definition	
Definite	0.4% (1)
Probable	0.0% (0)

Only 1 case of scaffold thrombosis reported to date

Current Long-Term Follow-up	
Patients through 12 month follow-up	240
Patients through 18 month follow-up	Approx.: 140
Patients through 24 month follow-up	Approx.: 10

(1) Target lesion was not fully covered with scaffold. Significant untreated stenosis was present at index procedure. Patient returned 5 days post procedure with a scaffold thrombosis

FANTOM II – Cohort A & B

Angiographic – QCA Results

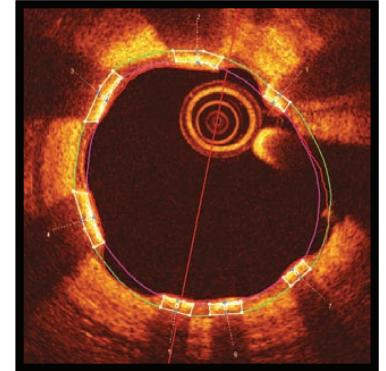
In-Scaffold Analysis	Baseline (n=238) ¹	Cohort A – 6 Mo. (n=100)	Cohort B – 9 Mo. (n=105)
RVD (mm)	2.71 ± 0.37	2.70 ± 0.36	2.73 ± 0.37
MLD (mm)	0.82 ± 0.31	2.23 ± 0.41	2.22 ± 0.43
Diameter Stenosis (%)	69.5 ± 11.0	15.3 ± 15.2	16.4 ± 14.3
Acute Gain (mm)	1.68 ± 0.41		
Acute Recoil (%)	4.0 ± 8.3^2		
Mean LLL (mm)		0.25 ± 0.40	0.33 ± 0.36
In-Segment Analysis			
Mean LLL (mm)		0.17 ± 0.34	0.29 ± 0.41

(1) Baseline angiographic data was not available for two enrolled patients

(2) N = 156 patients available for recoil analysis

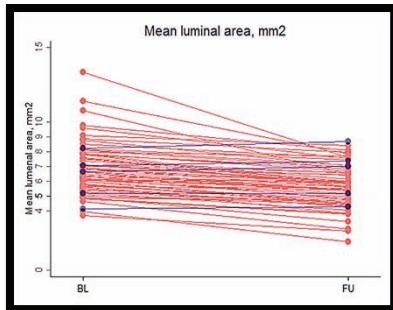
Fantom Scaffold OCT

Mean Lumen Area Analysis



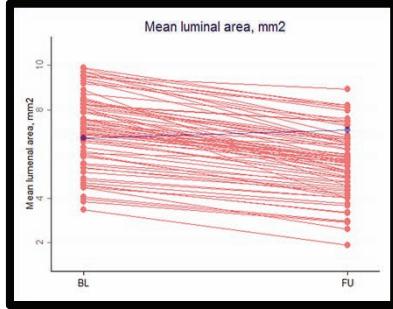
PCI Research
Aarhus University Hospital

6 Month Assessment



	Baseline	Follow-up	Difference	p-value
Mean lumen area (mm^2)	6.8 (1.7)	5.7 (1.4)	-1.1 (-1.3;-0.9)	<0.0001
Minimal lumen area (mm^2)	5.3 (1.4)	4.4 (1.4)	-1.0 (-1.3;-0.7)	<0.0001

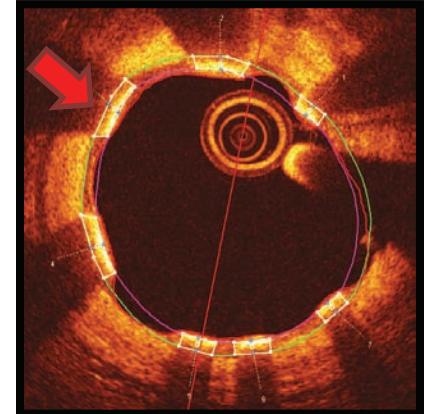
9 Month Assessment



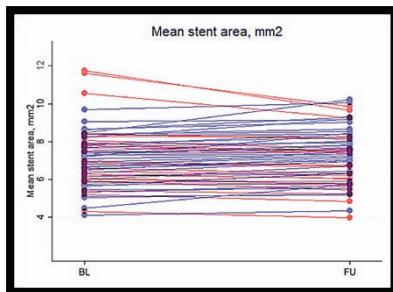
	Baseline	Follow-up	Difference	p-value
Mean lumen area (mm^2)	7.1 (1.6)	5.6 (1.5)	-1.6 (-1.7;-1.4)	<0.0001
Minimal lumen area (mm^2)	5.7 (1.4)	4.0 (1.4)	-1.7 (-1.9;-1.4)	<0.0001

Fantom Scaffold OCT

Stent Area Analysis

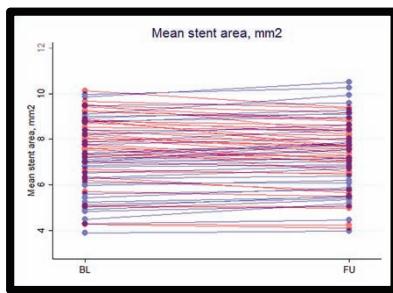


PCI Research
Aarhus University Hospital



6 Month Assessment

	Baseline	Follow-up	Difference	p-value
Mean stent area (mm^2)	7.1 (1.5)	7.2 (1.4)	0.1 (-0.02;0.24)	0.12
Minimal stent area (mm^2)	5.9 (1.3)	6.0 (1.3)	0.1 (-0.02;0.25)	0.08

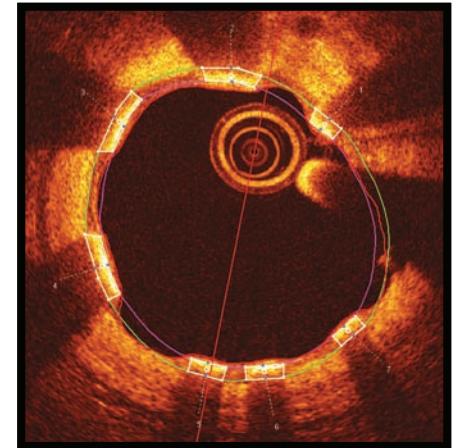


9 Month Assessment

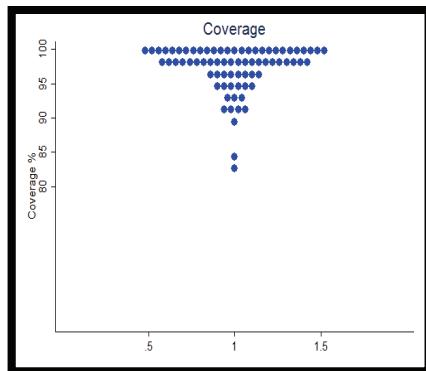
	Baseline	Follow-up	Difference	p-value
Mean stent area (mm^2)	7.4 (1.6)	7.3 (1.5)	-0.1 (-0.2;0.0)	0.16
Minimal stent area (mm^2)	6.1 (1.4)	6.0 (1.3)	-0.1 (-0.2;0.1)	0.43

Fantom Scaffold OCT

Strut Coverage



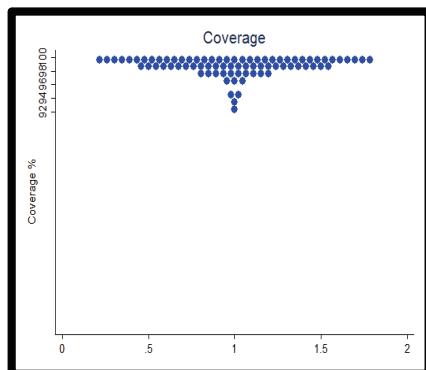
PCI Research
Aarhus University Hospital



6 Month Assessment

Follow-up

Covered struts	98.1% (95.9;99.4)
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9 Month Assessment

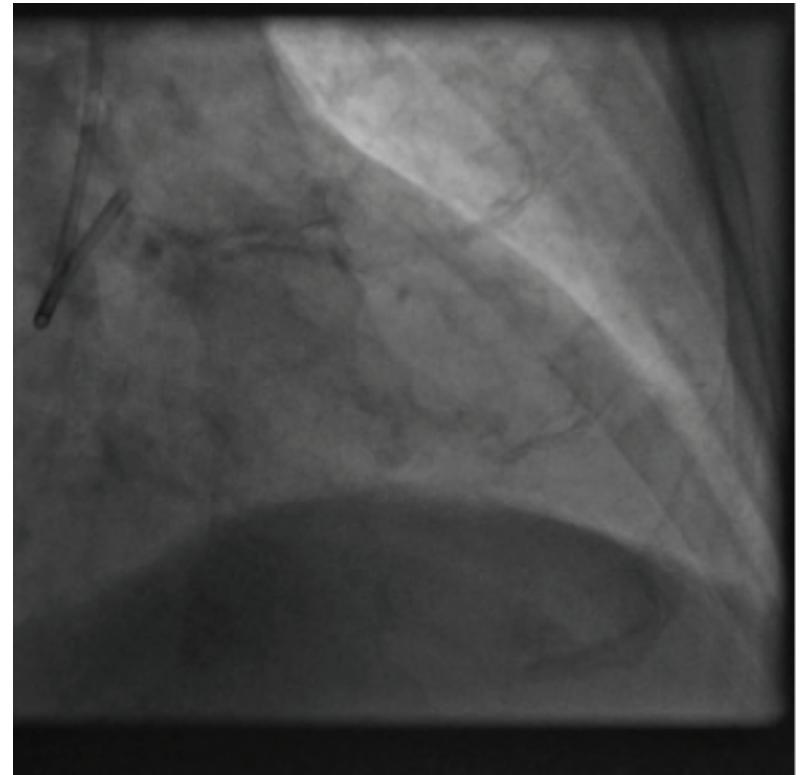
Follow-up

Covered struts	99.0% (98.3;100.0)
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Case Sample

Baseline assessment and Pre-dilatation

- 68 yo. Female
 - History of Hypertension
 - No prior PCI
 - Non-smoker
 - No Diabetes
 - LVEF = 66%
- Baseline Assessment
 - Mid LAD Lesion
 - Est. Stenosis = 80%
 - Est. RVD = 2.79mm
 - Lesion Length = 14 mm

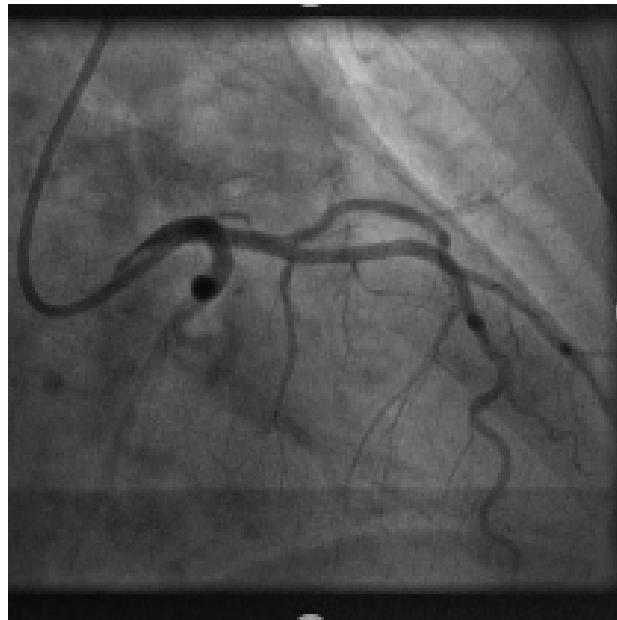


[VIDEO]

Case Sample

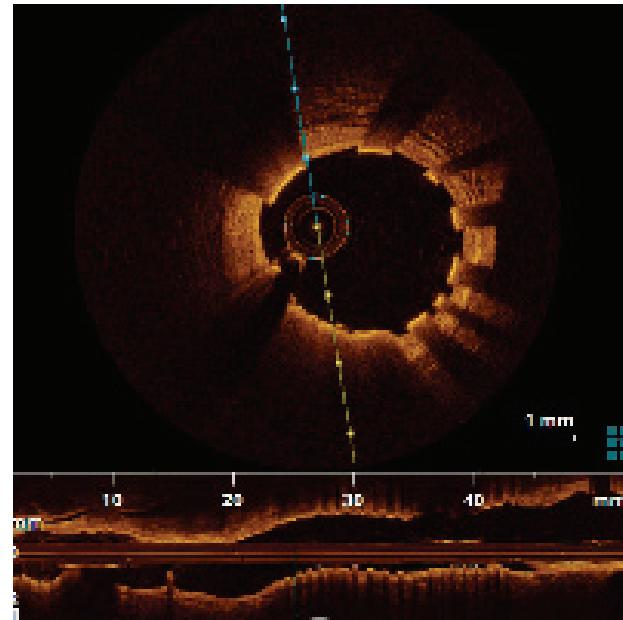
Index Procedure

- Actual Deployment Data
 - Scaffold: 3.00 x 18.00 mm
 - Actual Deployment Pressure = 12 atm
 - Diameter stenosis result = 10%
 - Post-dilatation: 3.25 x 15 mm, 16 atm, 15 sec



[VIDEO]

Post-Implant



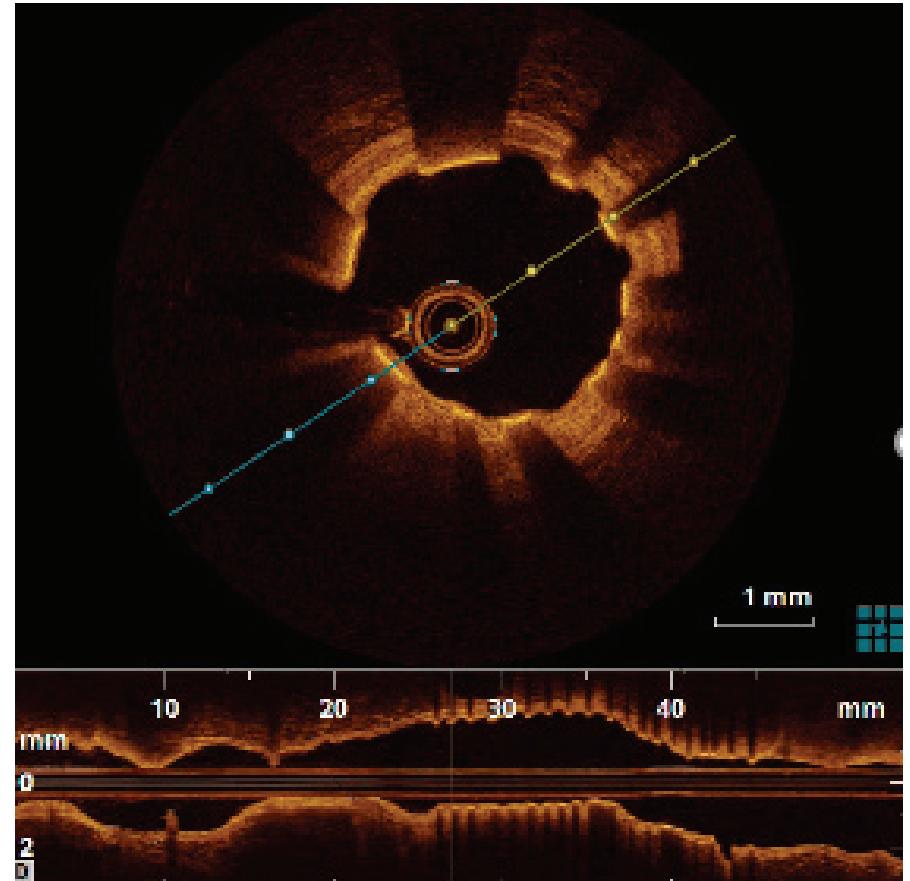
[VIDEO]

Case Sample

6 Month Follow-up Procedure



[VIDEO]



[VIDEO]

Vessel remains widely patent at 6 months

FANTOM Program

Clinical Summary

- **Fantom offers new and clinically important features**
 - Radiopacity
 - Deliverability
 - Single-step inflation
 - No special handling requirements
- **Initial clinical data demonstrates**
 - Good acute performance
 - Enhanced device deliverability
 - Minimal residual stenosis and acute recoil (4%)
 - Sustained performance and safety through 12 months
 - Low MACE Rate (4.2%)
 - No evidence of late scaffold thrombosis

Thank you!