

# DISRUPT CAD III

## MAKING BIG WAVES

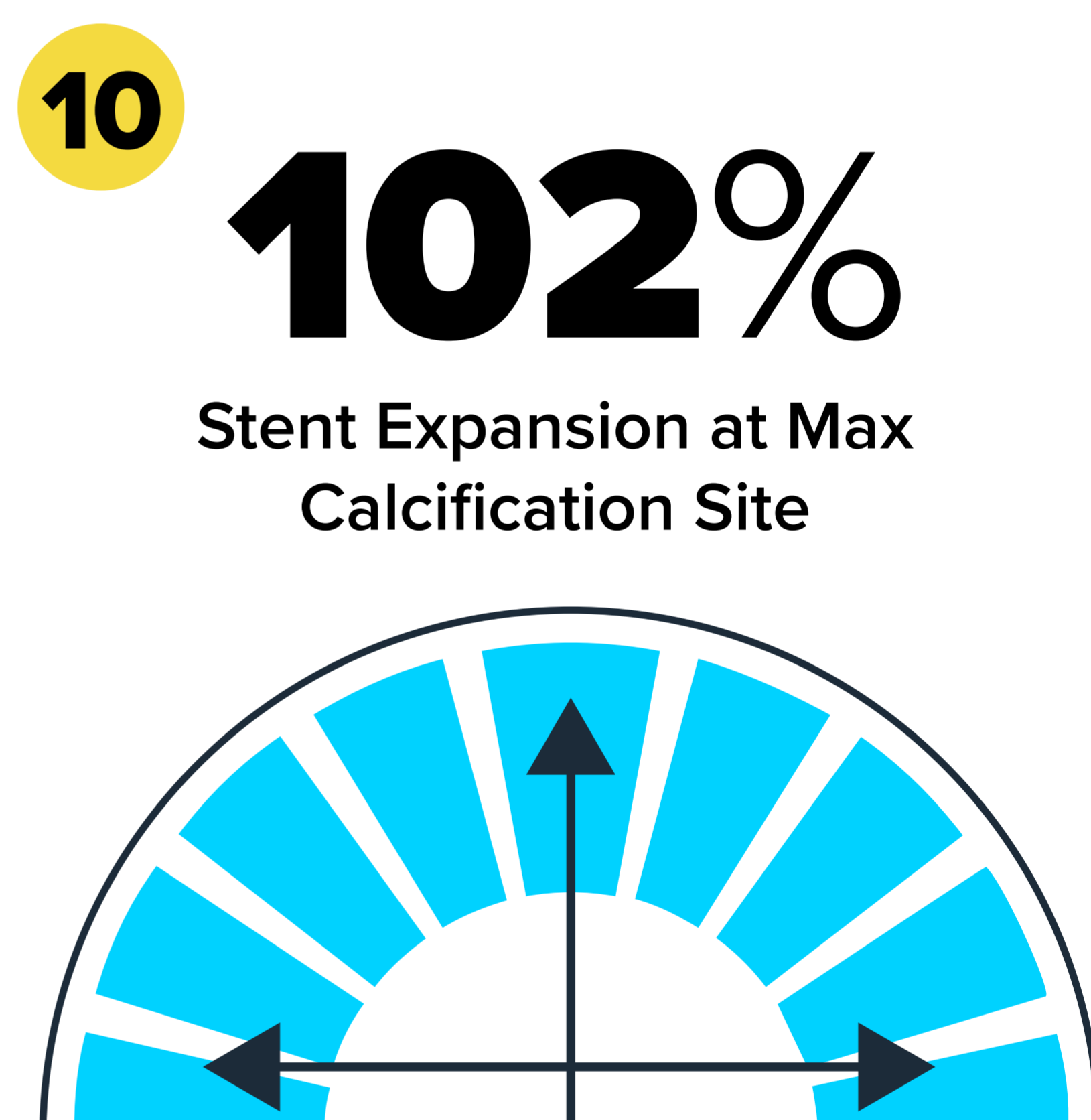
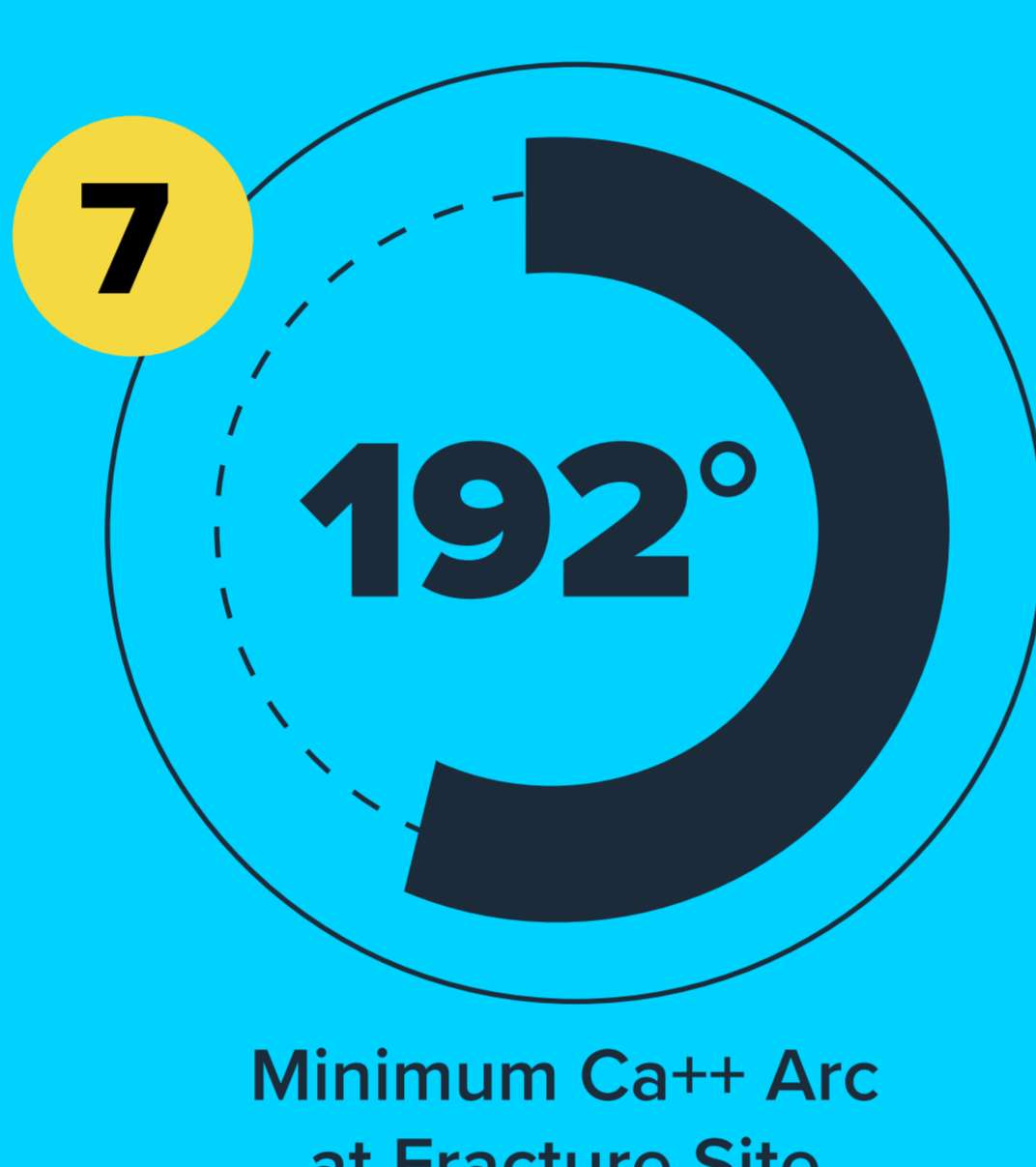
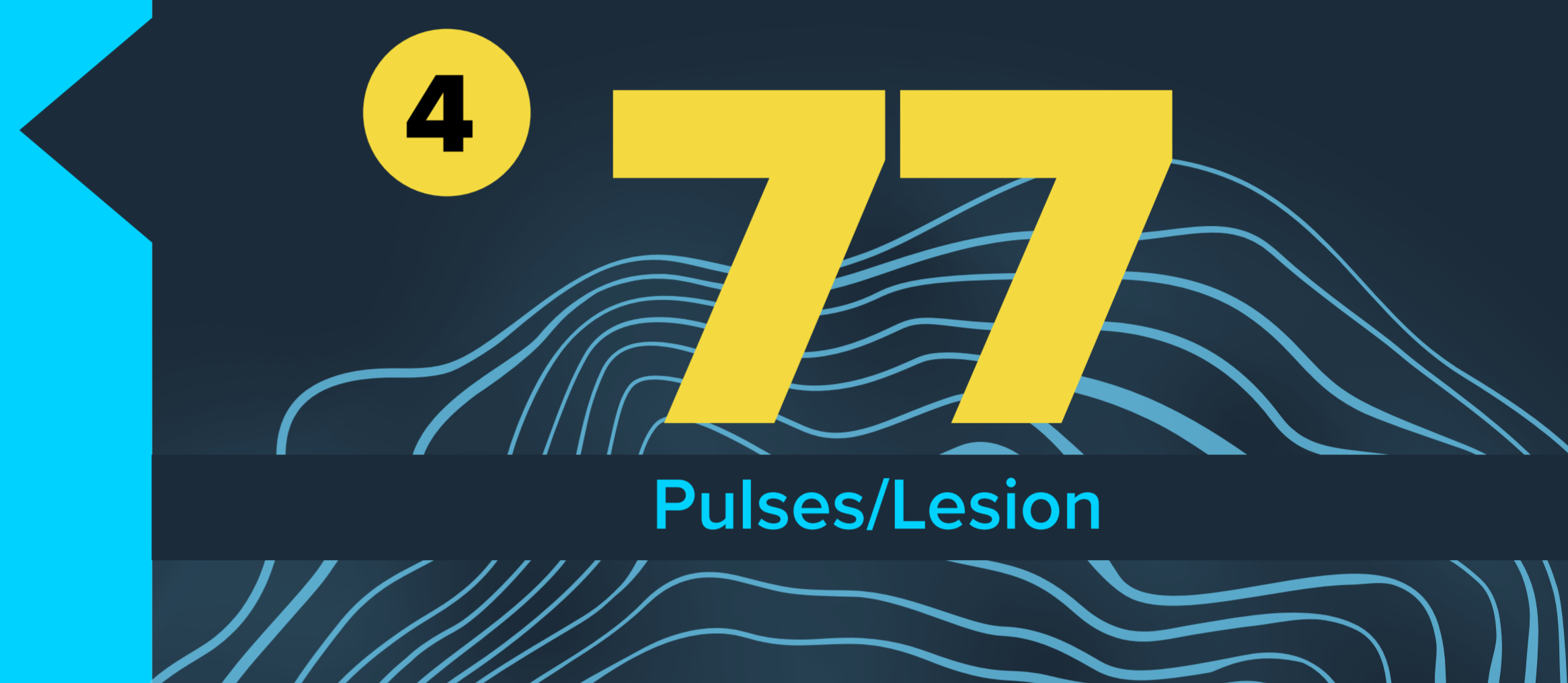
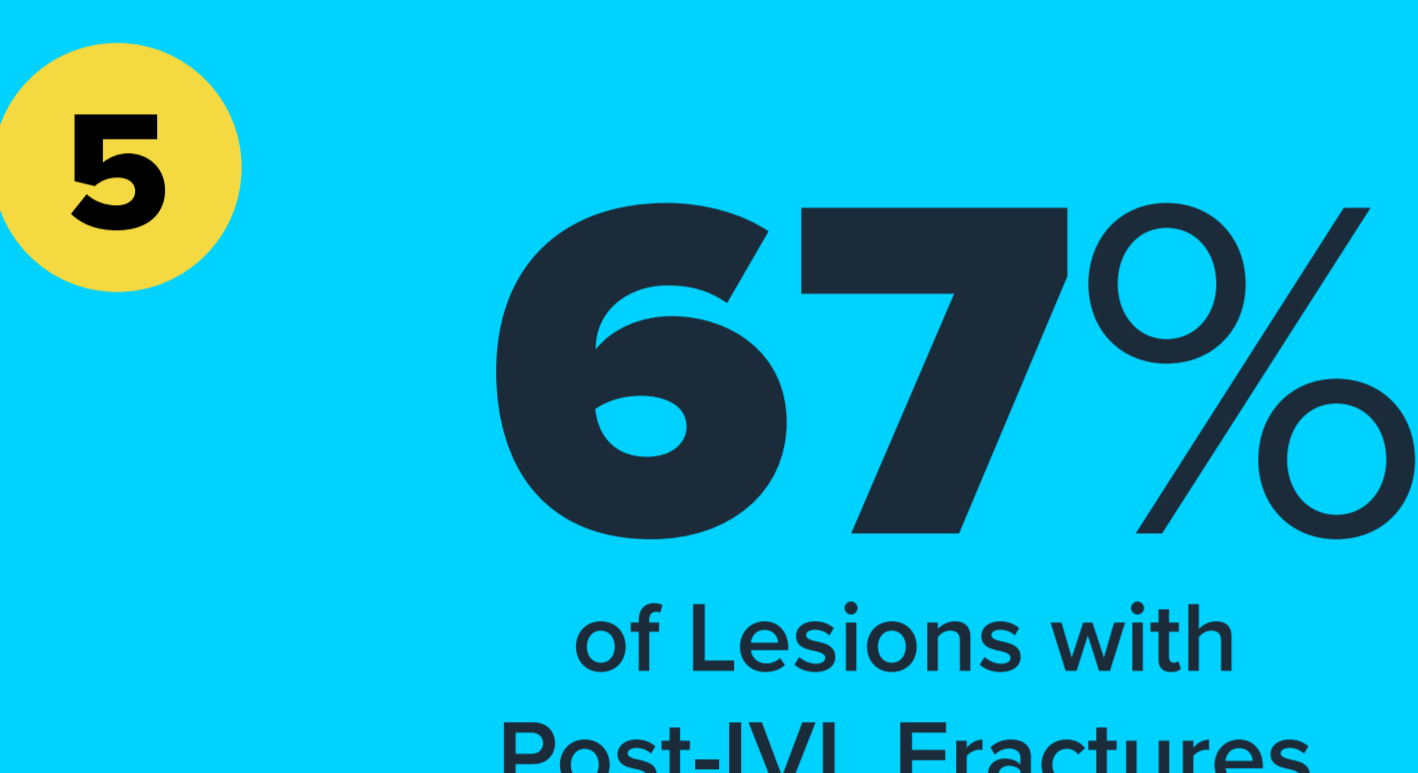
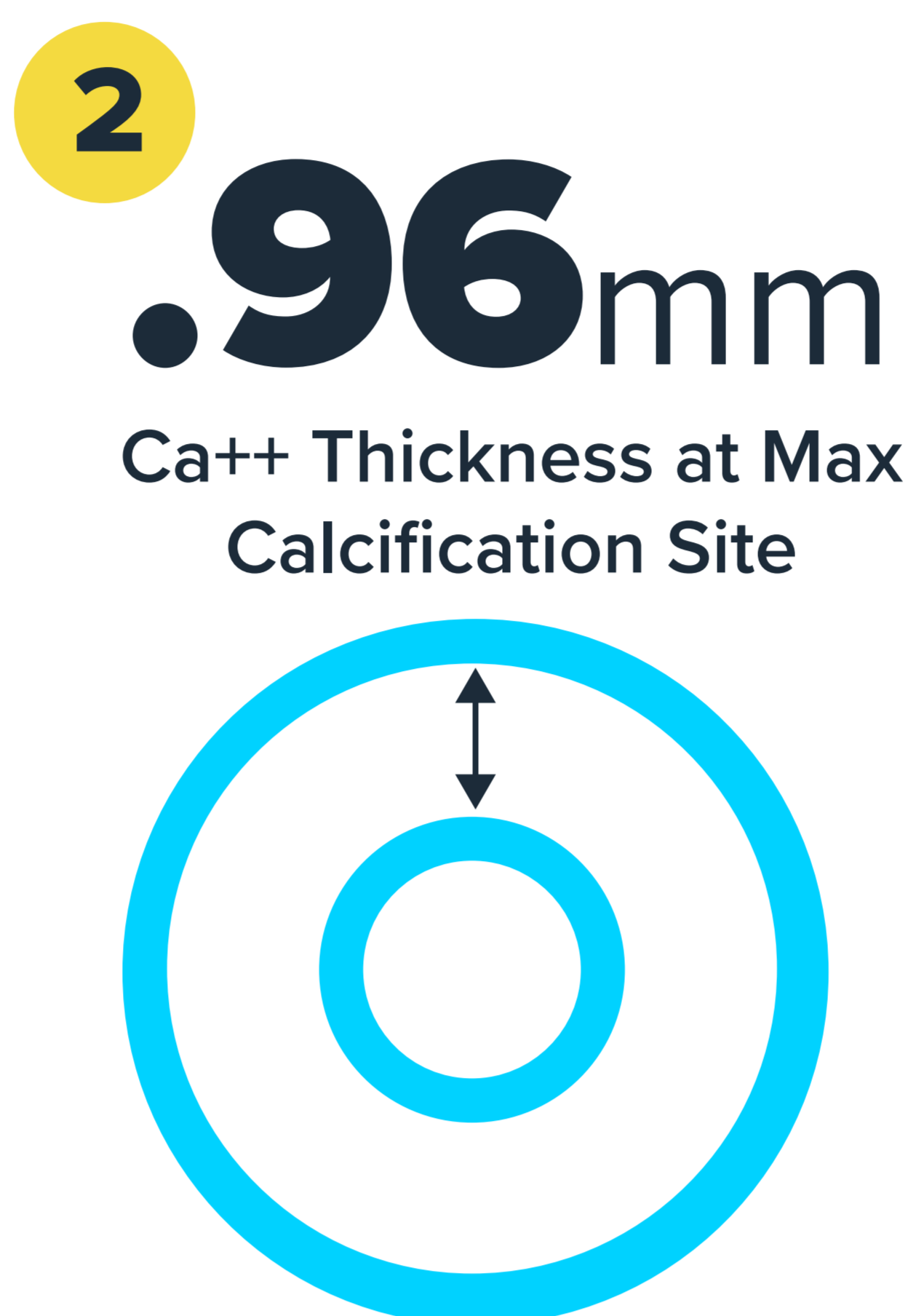
IN COMPLEX CALCIUM



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



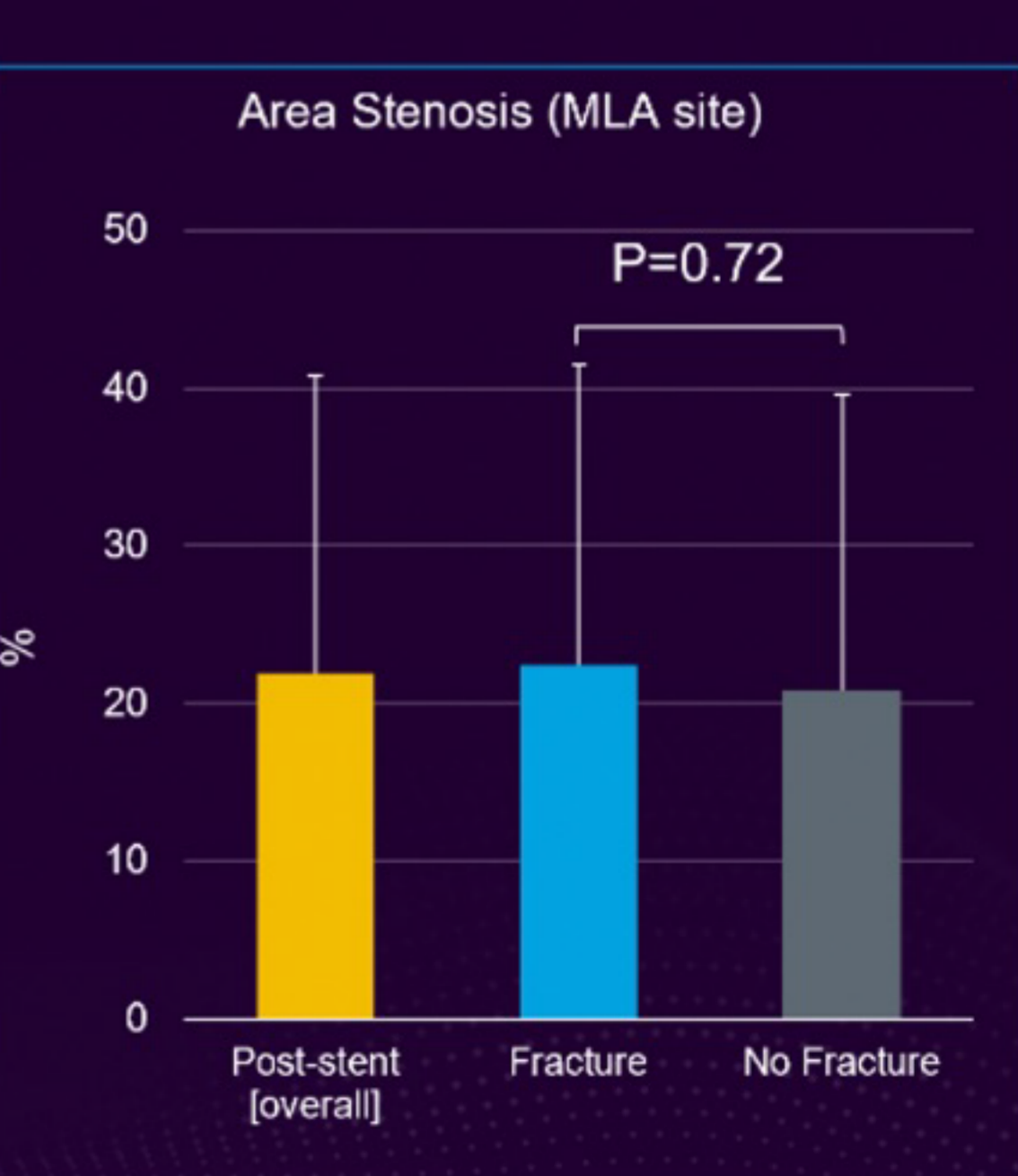
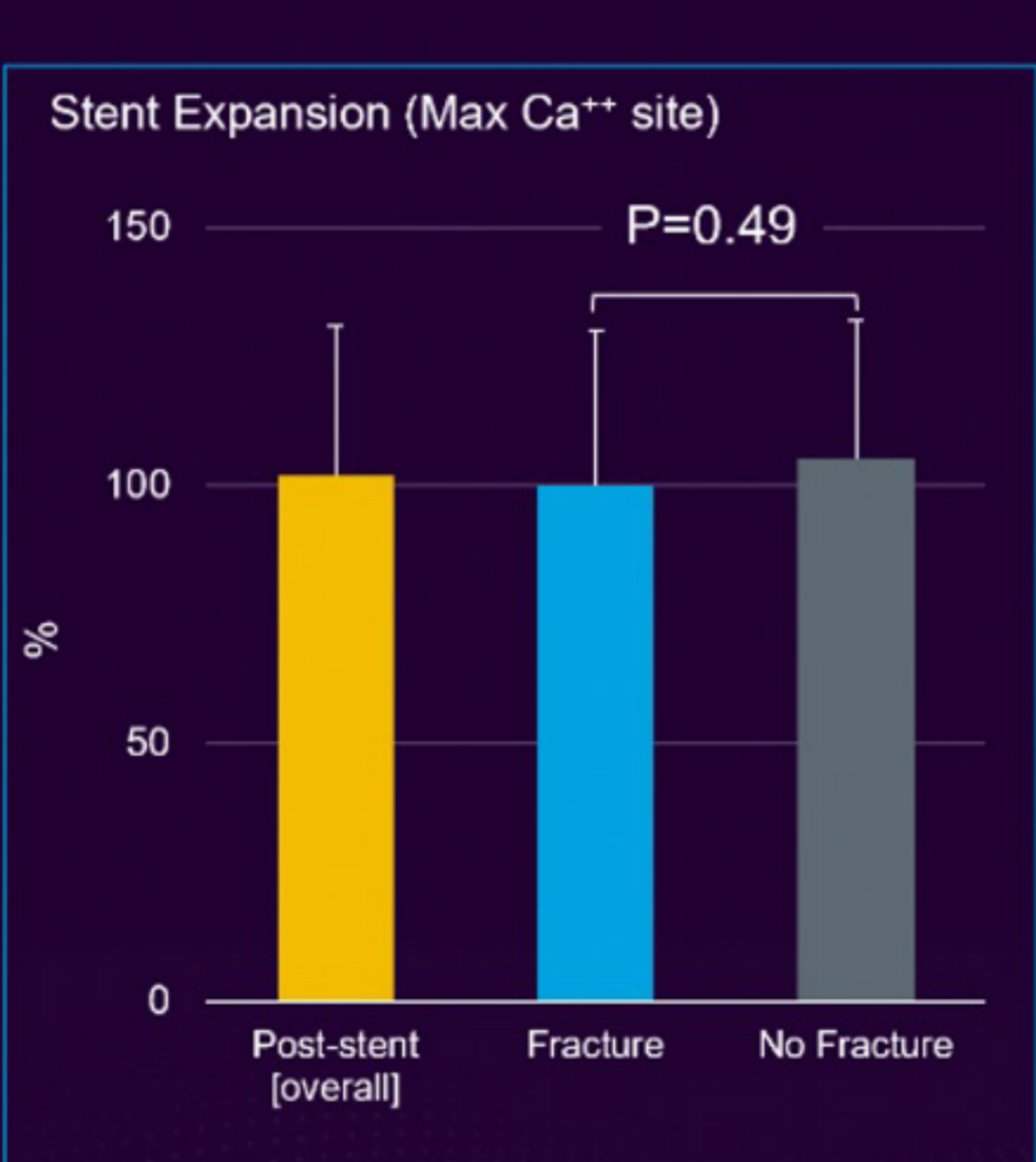
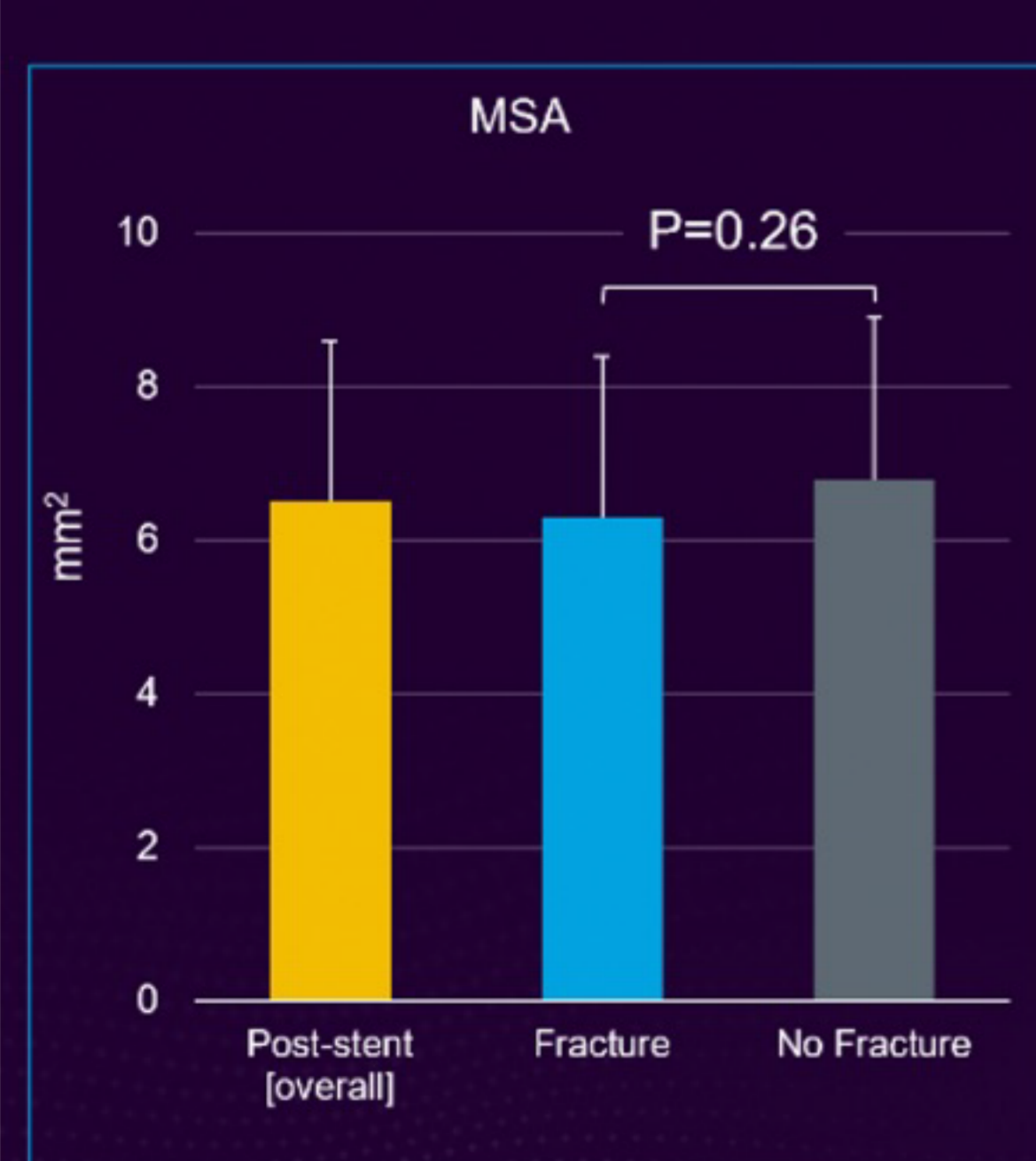
# 100

 Patients with  
Severe Ca++

## Consistently Excellent Outcomes Regardless of Fracture After IVL

### Outcomes by Fracture Visualization

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Consistent outcomes regardless of fracture visualization by OCT

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### Conclusions

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- 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 C<sup>2</sup> Coronary IVL catheters are investigational devices, limited by United States law to investigational use. Shockwave C<sup>2</sup> Coronary IVL catheters are commercially available in certain countries outside the U.S. Please contact your local Shockwave representative for specific country availability. The Shockwave C<sup>2</sup> 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](mailto:customerservice@shockwavemedical.com)