

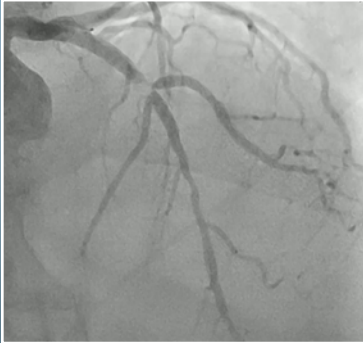
# FEATURED CASE

Tryton treats a wide spectrum of high risk diseased bifurcation lesions. Change the complex into a straight forward case and keep control.

**TRYTON SIDE BRANCH SHORT STENT**



**Baseline**

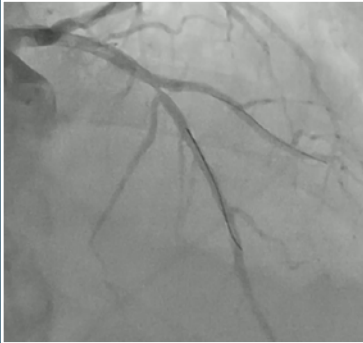


## MEDINA 1,1,1 WITH 80° ANGULATION

- Male 81 with hypertension and permanent AF
- Admission for unstable angina from referring hospital
- Mild aortic stenosis (invasive gradient of 30mmHg)
- LAD -DI and tandem lesion mid LAD

**CASE CONCERN:** Preserve large and angulated diagonal branch

**Tryton Deployed**



## FLOW RESTORED AND BRANCH SECURED

- Right radial access with SheathLess 7.5Fr.
- Tandem lesion treated with DES 2.25mm x 20mm
- LAD (main branch) and DI (side branch) pre-dilated
- Tryton SHORT 3.5mm x 3.0mm in diagonal.

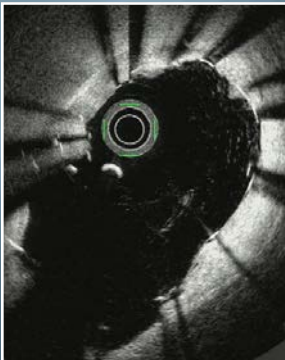
**Final Results**



## STRAIGHT FORWARD – SEAMLESS INTEGRATION

- DES LAD 3.5 mm x 28 mm seamlessly integrates with the Tryton.
- Kissing balloon with 3.5mm in LAD and 2.5mm in DI
- Tryton procedure completed in less than 15 mins.

**Key Takeaway**



*“I am very pleased with the Tryton Dedicated Side Branch system, it provides a very elegant and easy approach for treating bifurcation lesions resulting in excellent scaffolding of the carina in angulated side branches with predictable results.*

*The Tryton SHORT broadens my treatment options when the proximal main vessel landing zone is limited. In this case, allowing a shorter DES in the proximal main vessel”*



— Live case during EuroPCR 2013 by  
Nicolas van Mieghem, Thoraxcenter Rotterdam, Netherlands

Submit your **FEATURED CASE** to [featuredcase@trytonmedical.com](mailto:featuredcase@trytonmedical.com)

**TRYTON**<sup>®</sup>  
Medical

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Investigational in the US and not approved in Japan.  
The Tryton Side Branch Stent System is for sale in Europe.

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