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**Tryton's Innovative Solution Highlighted at Annual  
European Bifurcation Club Meeting**

**Durham, N.C.** – Oct. 20, 2011 – Tryton Medical's TRYTON Side Branch Stent™ System was discussed as an important new therapeutic option for patients with bifurcation disease last week at the annual European Bifurcation Club (EBC) meeting in Lisbon, Portugal, where approximately 150 international interventional cardiologists gathered to share best practices for challenging bifurcation cases.

Patrick W. Serruys, M.D., Ph.D., of Erasmus Medical Center in Rotterdam, the Netherlands, presented an overview of the Tryton stent system, highlighting results from a number of studies of the device and the growing body of clinical evidence supporting the use of the Tryton stent system.

"In a straw poll conducted at the EBC Meeting two years ago, Tryton was selected the dedicated stent of choice by a large margin. The accumulation of clinical data in more than 700 patients, with a rate of target lesion revascularization consistently less than four percent at six months, further validates Tryton's leadership position," said Prof. Serruys. "I am particularly excited about the potential of Tryton technology for the treatment of left main lesions."

"The EBC represents the finest tradition of collaboration among leaders within the European interventional community," said Shawn McCarthy, president and CEO of Tryton Medical. "Tryton is pleased to work with these visionaries as we continue a leadership role in pioneering an innovative solution to this long-standing challenge in interventional cardiology."

Coronary artery disease often results in the buildup of plaque at the site of a bifurcation, where one artery branches from another. Current approaches to treating these lesions are time consuming and technically difficult. As a result, the side branch is often left unstented, leaving it vulnerable to higher rates of restenosis, the re-narrowing of the stented vessel following implantation. Bifurcation lesions account for as many as one-third of all coronary lesions.<sup>i</sup> Left main disease, an accumulation of plaque that narrows the base of the coronary tree, is a persistent challenge in interventional cardiology, as more than 75 percent of left main lesions are bifurcation lesions.

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**About the Tryton Side Branch Stent**

The Tryton Side Branch Stent System is designed to offer a dedicated strategy for treating atherosclerotic lesions in the side branch at the site of a bifurcation. Tryton's cobalt chromium stent is deployed in the side branch artery using a standard single-wire balloon-expandable stent delivery system. A conventional drug-eluting stent is then placed in the main vessel.

The stent system has received CE Mark approval in Europe and is commercially available in 21 countries throughout Europe and the Middle East. It is approved in the United States for investigational use only.

The randomized, controlled Tryton IDE study will compare the use of the Tryton stent in the side branch in conjunction with a standard drug eluting stent in the main vessel vs. the use of angioplasty in the side branch with a standard drug eluting stent in the main vessel for the treatment of complex bifurcation disease. The primary endpoint of the study is target vessel failure at nine months. A secondary endpoint is percent diameter stenosis at nine months in the side branch vessel as assessed in an angiographic subgroup.

**About Tryton Medical, Inc.**

Tryton Medical, Inc., located in Durham, N.C., is a leading developer of novel stent systems for the treatment of bifurcation lesions. The company was founded in 2003 by Aaron V. Kaplan, M.D. (professor of medicine at Dartmouth Medical School/Dartmouth- Hitchcock Medical Center) and Dan Cole to develop stents for the definitive treatment of bifurcation lesions. The Tryton Side Branch Stent System, approved for sale in Europe, is designed to offer a dedicated strategy for treating these challenging cases. Privately held, Tryton is backed by Arnerich Massena & Associates, Spray Ventures, PTV Sciences, and RiverVest Ventures. For more information please visit [www.trytonmedical.com](http://www.trytonmedical.com).

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<sup>i</sup> Scot Garg, et al. EuroIntervention 2011;6: 928-935. Available online at [http://www.pcronline.com/eurointervention/34th\\_issue/162/](http://www.pcronline.com/eurointervention/34th_issue/162/)