

**Tryton Medical's Side-Branch Stent Demonstrates Unparalleled Ease-of-Use to Definitively Treat Wide Variety of Extremely Challenging Bifurcated Lesions at EuroPCR 2007**

*Thousands of Leading Interventional Cardiologists Witness New Paradigm Shift in Cardiology Procedures*

FOR IMMEDIATE RELEASE

**Newton, MA, U.S.A. –June 5, 2007–** Tryton Medical, Inc., announced it successfully treated extremely challenging cases at EuroPCR 2007 in Barcelona, Spain to demonstrate how the firm's Side-Branch Stent will ultimately reshape the treatment of bifurcated lesions. EuroPCR provided an important informational venue that enabled thousands of interventional cardiologists to review how Tryton Medical's first-in-class device, the Side-Branch Stent, will provide a new standard of care for bifurcated lesions.

Approximately 540,000 annual procedures are performed to address bifurcation lesions, accounting for 20% of all coronary lesions treated. With the exception of Tryton's stent, no dedicated solution exists today that fully addresses these lesions.

The cases, transmitted via satellite to Barcelona, were performed by members of the Thoraxcenter, Erasmus Medical Center, Rotterdam, Netherlands, including Dr. George Sianos, Dr. Robert van Geuns, and Professor Patrick W. J. C. Serruys, M.D., Ph.D. The first case demonstrated how patients with complex bifurcated lesions can be definitively treated in scenarios where provisional stenting is impractical. "This technology has the capacity to redefine the treatment of bifurcation lesions and resolve a frequent dilemma of the interventional cardiologist," said Professor Patrick W. J. C. Serruys, M.D., Head of the Department of Interventional Cardiology, Thoraxcenter, Erasmus Medical Center, Rotterdam, Netherlands.

The second case demonstrated the versatility of the "treat the side branch first" approach in a lesion located far down the right coronary artery. The side branch, which was at risk of eminent closure, was stabilized with Tryton's stent, after which the main vessel was treated with a superb angiographic result. "Unlike other stents and techniques used to treat bifurcation lesions, Tryton's stent is easy to deliver as it uses standard equipment

and techniques compatible with 5 and 6 French guiding catheters,” said Dr. George Sianos, Senior Interventionalist, Thoraxcenter, Erasmus Medical Center.

The third case illustrated the use of Tryton’s stent in an extremely tortuous and calcified artery securing the side branch, after which a workhorse stent was delivered to the main vessel yielding a beautiful result. Intravascular ultrasound, performed at the end of each case, demonstrated complete coverage of the side branch origin. “Tryton’s device has greatly facilitated the treatment of these patients. Interventional cardiologists who use Tryton’s stent will no longer have to worry about the bifurcation as they’ll know the side branch will stay open and the interventionalist is then free to focus on the treatment of the main vessel using their the stent of their choice,” said Dr. Sianos.

“Tryton continues to demonstrate impressive results and growth as it becomes clear that our stent will eventually provide a new standard of care, thereby enabling any interventional cardiologists to treat the entire spectrum of bifurcation lesions they encounter every day,” said H. Richard Davis, CTO, Tryton Medical, Inc. “The benefits of our Side-Branch Stent have been witnessed by thousands of interventional cardiologists in Asia, Europe and America. Interventional cardiologists can quickly grasp how to use our stent to treat complex lesions. Tryton’s dedicated save-the-side branch approach, allows for securing the side-branch first, after which the main vessel is treated by the physician’s main stent of choice, in a predictable manner. These benefits simply are not offered with provisional stenting,” Davis added.

### **About Tryton Medical, Inc.**

Tryton Medical, Inc. is the leading developer of stents that are designed to definitively treat bifurcation lesions. 540,000 bifurcation coronary lesions are sub-optimally treated every year with a variety of time consuming and technically challenging procedures. No optimized solution is commercially available for treating bifurcation lesions. As a result, cardiologists are forced to use a provisional strategy which avoids the deployment of a second stent-- leaving the un-stented side branch vulnerable to thrombosis and restenosis. The ability to definitively treat bifurcation lesions will enable PCI-stenting to become the new standard of care for the treatment of left main coronary artery disease rather than bypass surgery.

Tryton Medical's [Side-Branch Stent™](#) has all the characteristics of a state-of the art workhorse stent, providing proven stent coverage to bifurcation lesions while eliminating the need for provisional stenting. For more information on Tryton Medical, Inc., contact Joe Romano, Partner, HighGround, Inc. at +1 781-279-1320 x 208, [jromano@highgroundinc.com](mailto:jromano@highgroundinc.com) or visit [www.TrytonMedical.com](http://www.TrytonMedical.com)

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