

Tryton Medical's Side-Branch Stent™ Demonstrates Unparalleled Ease-of-Use and Definitive Treatment of Bifurcation Lesions at TCT Asia 2007 and at the American College of Cardiology's Innovation and Intervention (i2) Summit in New Orleans

Interventional Cardiologists Treat Complex Lesions Within 10 Minutes, With Superb Angiographic Results

FOR IMMEDIATE RELEASE

Newton, MA, U.S.A. –May 8, 2007– Tryton Medical, Inc. has marked new milestones in stent technology by demonstrating on a global scale how the firm's Side-Branch Stent offers unparalleled ease-of-use and the best option to safely and definitively treat bifurcation lesions. Tryton transmitted a live satellite feed of a successful clinical case to an audience of interventional cardiologists at TCT Asia 2007 in Seoul, Korea, performed by Robert van Geuns, M.D. Ph.D., Cardiologist, Thoraxcenter, Erasmus Medical Center. Professor Serruys, Head of the Department of Interventional Cardiology, Thoraxcenter, Erasmus Medical Center, moderated the event. Tryton's Side-Branch Stent was also featured at the American College of Cardiology's i2 Summit, where a live satellite feed of a clinical case, performed by Dr. George Sianos, Senior Interventionalist, Thoraxcenter, Erasmus Medical Center, was transmitted to demonstrate the ease-of-use and superb angiographic results that can be predictably achieved by using Tryton's stent. The news follows a previous announcement that revealed the safety of Tryton's stent during a live case that was performed in front of 1,000 interventional cardiologists at the Joint Interventional Meeting (JIM 2007) in Rome.

“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. “This device has greatly facilitated the treatment of these patients. The Tryton strategy allows the Interventionist to secure the side branch and then treat the main vessel with his stent of 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. While others pursue the elusive goal of treating bifurcation lesions, we are already definitively treating these lesions. 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 stented in a predictable manner. These benefits simply are not offered with provisional stenting,” Davis added.

Every year, over half a million bifurcation coronary lesions are sub-optimally treated as no commercially available optimized solution exists 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 side branch vulnerable to thrombosis and restenosis. “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.

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 or visit www.TrytonMedical.com

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