



## P-MAX Study: Mechanical Thrombectomy For Iliofemoral DVT with Aspirix – 24-Month Results

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## Disclosure

Speaker name:  
**Michael Lichtenberg**

I have the following potential conflicts of interest to report:

- Consulting
- Employment in industry
- Stockholder of a healthcare company
- Owner of a healthcare company
- Other(s)
- I do not have any potential conflict of interest

### P-MAX Study Design

- Principle Investigator (PI)
  - Michael Lichtenberg
- Study Design
  - Prospective, multi-center, post-market observational study
- Study Purpose
  - Evaluate outcomes of Aspirix
- Study Population
  - Main
    - DVT of pelvis, legs, IVC
  - Additional
    - Dialysis shunts/bypasses; vena subclavian; vena brachiocephalic;
    - SVC; TIPS; vena porta; vena splenica; vena mesenterica superior/inferior

DVT = Deep Vein Thrombosis  
shunt      IVC = Inferior Vena Cava      SVC = Superior Vena Cava      TIPS = Transjugular intrahepatic portosystemic

### P-MAX Study Design

- Study Centers
  - Nine (9) located within the EU
- Study follow-up
  - Post-index procedure (discharge)
  - 1 month
  - 6 months
  - 12 months
  - **24 months presented today**
  - 36 months

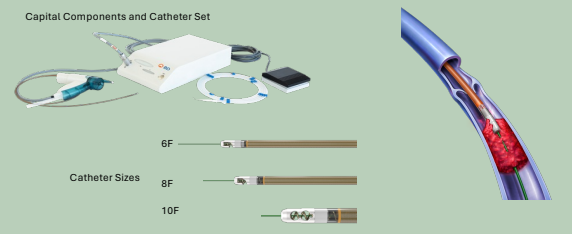
### P-MAX Study Design

<h4>Inclusion Criteria</h4> <ul style="list-style-type: none"> <li>• Acute thrombotic or thromboembolic occlusion (onset of pain &lt; 14 days)</li> <li>• Age &gt; 18 years</li> <li>• Written informed consent form</li> </ul>	<h4>Key Exclusion Criteria</h4> <ul style="list-style-type: none"> <li>• Subject not suitable for thrombectomy</li> <li>• Fracture area of broken stents</li> <li>• Persistent vasospasms</li> <li>• Known, unhealed pre-existing mechanical damage to the vessel wall (caused by surgical procedures or interventional complications)</li> <li>• Immature or not fully healed dialysis accesses or bypass grafts</li> </ul>
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### Aspirix Device - Components

Mechanical Aspiration Thrombectomy System

Capital Components and Catheter Set



Catheter Sizes

- 6F
- 8F
- 10F

### P-MAX Study Update

- Study Status
  - Enrollment
    - 81 subjects enrolled, consented, treated with Aspirex
    - Mean age (years)= 49.3 ± 17.4 (\*SD)
    - Male/Female, % = 50.6/49.4
  - Follow-up
    - 80 (98.8%) subjects completed 1-Month follow-up
    - 78 (96.3%) subjects completed 6-Month follow-up
    - 74 (91.4%) subjects completed 12-Month follow-up
    - 66 (81.5%) subjects completed 24-Month follow-up
  - Data Analysis – Full cohort and post-hoc subset analyses
    - 24-Month results presented today

\*Standard deviation

### P-MAX Study – Key Medical History

Vascular Systemic Risk Factors, n/N (%)	
Smoker	21/81 (25.9)
Diabetes mellitus	5/81 (6.2)
Hypertension (> 140 / > 90)	29/81 (35.8)
Systemic Contraceptives	11/81 (13.6)
Cortisone therapy	3/81 (3.7)

Full analysis population

### P-MAX Study – Medical History

Vascular Local Risk Factors, n/N (%)	
Varicosis	32/81 (39.5)
Ulcer cruris or further dermal lesion	2/81 (2.5)
Phlebitis	2/81 (2.5)
Previous thrombosis	42/81 (51.9)
Acute on chronic <sup>1</sup> occlusion	33/42 (78.6)
Has a longer history (e.g. DVT)	38/42 (90.7)
Has been treated	32/41 (78.0)
Left Side	29/38 (76.3)
Same leg as the current occlusion	33/38 (86.8)
Same vessel segment as the current occlusion	29/38 (76.7)
Previous pulmonary embolism	15/81 (18.5)
Previous target lesion interventions	24/81 (29.6)
Thrombolysis	5/81 (6.2)
Ultrasound enhanced thrombolysis	0/81 (0)
Percutaneous transluminal angioplasty	23/81 (28.4)
Stenting	23/81 (28.4)
Mechanical thrombectomy (e.g. Aspirex)	5/81 (6.2)
Aspiration thrombectomy	3/81 (3.7)
Surgical thrombectomy	3/81 (3.7)
Rheolytic thrombectomy (e.g. AngioJet)	0/81 (0)

Full analysis population

### P-MAX Study – Key Lesion Characteristics

Subjects Treated N = 81	
Mean Target Lesion Length (mm)	204.9
Type of Vessel Occluded	n, (%)
Vein	57 (70.4)
Stented	20 (24.7)
Dialysis Access	4 (4.9)
Thrombus Location	
Popliteal	9 (11.1)
Common Femoral Vein	40 (49.4)
Femoral Vein	29 (35.8)
External Iliac Vein	60 (74.1)
Common Iliac Vein	54 (66.7)
Brachial Vein	0
Axillary Vein	0
Subclavian Vein	6 (7.4)
Other	14 (17.3)

Full analysis population

### P-MAX Study – Key Endpoint Results Overall Population

Procedural Success: defined as intervention with Aspirex, with or without adjunctive treatment, was sufficient

- to remove the thrombus
- maintain restored blood flow at least 72 hours post-intervention
- be without critical injuries at access site, route of catheter and target site
- be absent acute distal embolism respective of pulmonary embolism

Procedural Success – Subgroup	
Procedural Success, n/N, % [95% CI]	79/81, 97.5% [90.9, 99.8] <sup>1</sup>

Technical Success: defined as successful thrombectomy

N = 81 (95% CL)	
Technical Success, n/N, % [95% CI]	79/81, 97.5% [90.9, 99.8] <sup>1</sup>

<sup>1</sup>n/N, CI (95% CL) CI = Confidence Interval

### P-MAX Study – Key Endpoint Results Overall Population

Primary Patency: defined as Freedom from Re-Intervention\*

N = 81	
Discharge n/n, % [95% CI]	79/80, 98.8% [92.6, 100] <sup>1</sup>
1 Month n/n, % [95% CI]	75/80, 93.8% [85.9, 97.6] <sup>1</sup>
6 Month n/n, % [95% CI]	70/79, 88.6% [79.5, 94.1] <sup>1</sup>
12 Month n/n, % [95% CI]	62/72, 82.7% [72.4, 89.7] <sup>1</sup>
24 Month n/n, % [95% CL]	53/68, 77.9% [66.6, 86.3] <sup>1</sup>

\*Primary Patency is defined as freedom from Re-intervention. Inclusion of patients: Patients with DVT of the pelvis or leg including vena cava inferior are included, if DVT symptoms are absent or 70% of blood flow is restored at index procedure. Patients with other indications are included, if 70% of blood flow is restored at index procedure.

<sup>1</sup>n/N, CI (95% CL) CI = Confidence Interval Full analysis population

### P-MAX Study – Key Endpoint Results Overall Population

Safety: Defined as follows:

- Serious Adverse Events (SAE) rate at 1, 6, 12 and 24 Months
- Procedure-related Adverse Events (AE) rate at 1, 6, 12, and 24 Months
- Serious Adverse Device Events (SADE) rate at 1, 6, 12 and 24 Months

	N = 81			
	1 Month	6 Month	12 Month	24 Month
SAE rate n/n, % [95% CI]	27/81, 33.3% [24.0, 44.2] <sup>1</sup>	34/81, 42.0% [31.8, 52.9] <sup>1</sup>	40/80, 50.0% [39.3, 60.7] <sup>1</sup>	46/77, 59.7% [48.6, 70.0] <sup>1</sup>
Procedure-related AE rate n/n, % [95% CI]	11/80, 13.8% [7.7, 23.1] <sup>1</sup>	11/79, 13.9% [7.8, 23.4] <sup>1</sup>	11/74, 14.9% [8.3, 24.9] <sup>1</sup>	11/66, 16.7% [9.4, 27.6] <sup>1</sup>
SADE rate n/n, % [95% CI]	2/80, 2.5% [0.2, 9.2] <sup>1</sup>	2/79, 2.5% [0.2, 9.3] <sup>1</sup>	2/74, 2.7% [0.2, 9.9] <sup>1</sup>	2/64, 3.1% [0.2, 11.3] <sup>1</sup>

<sup>1</sup>95% CI [Agree]-Cons; CI = Confidence Interval Full analysis population

### P-MAX Study – Key Endpoint Results Overall Population

Secondary Endpoints:

- Venous Clinical Severity Score (VCSS)<sup>1</sup> Pain Score

Timepoint	Pain Score
Screening, Mean (SD)	1.92 (0.69)
Discharge, Mean (SD)	0.43 (0.59)
1 month, Mean (SD)	0.31 (0.47)
6 month, Mean (SD)	0.30 (0.56)
12 month, Mean (SD)	0.30 (0.49)
24 month, Mean (SD)	0.40 (0.72)

Full analysis population

<sup>1</sup>Each attribute is scored on a severity scale from 0 to 3 (Absent = 0, Mild = 1, Moderate = 2, Severe = 3).  
<sup>2</sup>VCSS (Venous Disability Score) is scored on a scale of 0 to 3 (Asymptomatic = 0, Symptomatic but able to carry out usual activities without compression therapy = 1, Can carry out usual activities only with compression and/or limb elevation = 2, Unable to carry out usual activities even with compression and/or limb elevation = 3). Usual activities = Patient's activities before onset of disability from venous disease. SD = Standard Deviation

### P-MAX Study – Key Endpoint Results Overall Population

Secondary Endpoints:

- Venous Disability Score (VDS)<sup>2</sup>

Timepoint	Score
Screening, Mean (SD)	2.26 (0.85)
Discharge, Mean (SD)	0.79 (0.83)
1 month, Mean (SD)	0.51 (0.69)
6 month, Mean (SD)	0.38 (0.58)
12 month, Mean (SD)	0.39 (0.52)
24 month, Mean (SD)	0.48 (0.61)

Full analysis population

<sup>1</sup>Each attribute is scored on a severity scale from 0 to 3 (Absent = 0, Mild = 1, Moderate = 2, Severe = 3).  
<sup>2</sup>VDS (Venous Disability Score) is scored on a scale of 0 to 3 (Asymptomatic = 0, Symptomatic but able to carry out usual activities without compression therapy = 1, Can carry out usual activities only with compression and/or limb elevation = 2, Unable to carry out usual activities even with compression and/or limb elevation = 3). Usual activities = Patient's activities before onset of disability from venous disease. SD = Standard Deviation

### P-MAX Study – Key Endpoint Results Overall Population

Secondary Endpoints:

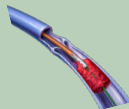
- Clinical-Etiology-Anatomic-Pathophysiologic Score (CEAP)

Clinical classification by visit	Screening		Discharge		1 month		6 month		12 month		24 Month	
	N	%	N	%	N	%	N	%	N	%	N	%
C0			16									
	0	0	11	7	18	29.0	15	24.2	15	24.2	15	28.3
C1-C3	62	92.9	53	3	41	66.1	46	74.2	44	71.0	32	60.4
	4	6.1	2	3.0	3	4.8	1	1.6	3	4.8	6	11.3
Total	66	100	66	100	62	100	62	100	62	100	53	100

Full analysis population

### P-MAX Study – Summary of Outcomes

- Procedural Success: 97.5%
- Technical Success: 97.5%
- Primary Patency – Overall Population
  - Discharge: 98.8%
  - 1 month: 93.8%
  - 6 month: 88.6%
  - 12 month: 82.7%
  - 24 month: 77.9%
- Safety rates at 1 month/ 6 month/ 12 month/ 24 month
  - SAE rate: 33.3%/ 42.0%/ 50.0%/ 59.7%
  - Procedure-related AE rate: 13.8%, 13.9%, 14.9%, 16.7%
  - SADE rate: 2.5%/ 2.5%/ 2.7%, 3.1%
- Score Improvement from Baseline VCSS, VDS, and CEAP (observational)
  - Sustained through the 24-month follow-up



### P-MAX Study Observational Data Key Subgroups

- Iliofemoral DVT Native Occlusions
- Iliofemoral DVT In-stent Occlusions
- Upper Venous System Occlusions (native excluding AVF/AVG)

DVT = Deep Vein Thrombosis; AVF = Arteriovenous Fistula; AVG = Arteriovenous Graft

### P-MAX Study – Observations Subgroup Populations

Procedural Success: defined previously

Procedural Success – Subgroup Analysis			
Subgroup – Lesion Location	N/N	%	CI <sup>1</sup>
Iliofemoral DVT Native	48/49	98.0	[88.3, 100]
Iliofemoral DVT In-stent	16/16	100	[77.3, 100]
Upper Venous System Native	5/5	100	[51.1, 100]
FAS <sup>2</sup>	79/81	97.5	[90.9, 99.8]

Technical Success: defined previously

Technical Success – Subgroup Analysis			
Subgroup – Lesion Location	N/N	%	CI <sup>1</sup>
Iliofemoral DVT Native	47/49	95.9	[85.5, 99.6]
Iliofemoral DVT In-stent	16/16	100	[77.3, 100]
Upper Venous System Native	5/5	100	[51.1, 100]
FAS <sup>2</sup>	79/81	97.5	[90.9, 99.9]

N/N = CI (Agree) Count; CI = Confidence Interval  
FAS = FAS<sup>2</sup>

### P-MAX Study – Observations Subgroup Populations


Primary Patency: defined previously

Primary Patency – Subgroup Analysis			
Subgroup – Lesion Location	N/N	%	CI <sup>1</sup>
Iliofemoral DVT Native - Discharge	49/49	100	[91.3, 100]
1 Month	47/49	95.9	[85.5, 99.6]
6 Month	45/48	93.8	[82.5, 98.5]
12 Month	42/47	89.4	[77.0, 95.8]
24 Month	36/41	87.8	[74.0, 95.1]
Iliofemoral DVT In-stent - Discharge	16/16	100	[77.3, 100]
1 Month	15/16	93.8	[69.7, 100]
6 Month	13/16	81.3	[56.2, 94.2]
12 Month	11/15	73.3	[47.6, 89.5]
24 Month	9/15	60.0	[35.7, 80.2]
Upper Venous System Native - Discharge	4/4	100	[45.4, 100]
1 Month	4/4	100	[45.4, 100]
6 Month	4/4	100	[45.4, 100]
12 Month	4/4	100	[45.4, 100]
24 Month	4/4	100	[45.4, 100]

N/N = CI (Agree) Count; CI = Confidence Interval

### Mechanical thrombectomy with Aspirex 10F for treatment of acute venous stent thrombosis

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THANK YOU