

**NEWS RELEASE** 

## FOR IMMEDIATE RELEASE

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## STENTYS Self-Apposing technology supported by breaking new scientific evidence

## Study points to stent sizing errors as primary cause of heart attack recurrences

PRINCETON, N.J., and PARIS, March 26, 2012 — **STENTYS S.A.** (STNT.PA), a medical technology company commercializing the world's first and only **Self-Apposing<sup>TM</sup> Stent** to treat **Acute Myocardial Infarction** (**AMI**), announced today that the scientific rationale of its technology has been strongly supported by the conclusions of a new study by world renowned pathologist Dr. Renu Virmani (CVPath Institute, Gaithersburg, Md.), presented today at the ACC annual meeting in Chicago.

Dr. Virmani's study — "Histomorphologic Determinants of Early Stent Thrombosis in Human Coronary Arteries" — is an autopsy trial of patients who died shortly after a heart attack treated with conventional stents. It analyzed their stents under microscope, comparing those where a clot re-appeared (stent thrombosis) with those that remained clot-free. The study concluded that *malapposition* and *vessel wall disruption* were two strong predictors of early stent re-clotting.

"Early stent thrombosis in patients with acute myocardial infarction is a dreadful problem for both drug-eluting and bare-metal stents because of its catastrophic consequence, a recurrent heart attack. We need new stent designs such as self-expanding stents to reduce it and improve patient outcomes," said Dr. Virmani.

During a heart attack treatment procedure, because of the clot and the vessel contraction, cardiologists cannot determine the artery diameter with certainty. When selecting a conventional stent size, they either end up undersizing (causing malapposition) or oversizing (causing vessel wall disruption), both of which lead to increased risk of heart attack recurrence.

The STENTYS Self-Apposing™ Stent solves this stent-sizing dilemma. It "fits snugly" into the contour of a blood vessel, and its shape and diameter adapt as the vessel dilates and the initial clot dissolves during the post-AMI phase, eliminating malapposition and its major complications seen with all other conventional stents.

"Dr. Virmani found further evidence that, because the cardiologist is not empowered to properly assess vessel size, the utilization of conventional stents to treat heart attacks will inevitably lead to poorer clinical outcomes" said **Gonzague Issenmann, CEO and co-founder of STENTYS**. "Fortunately, impressive clinical trial results are demonstrating that the STENTYS Self-Apposing<sup>TM</sup> technology is designed to overcome the serious limitations of conventional stents and to be *the best* solution for treating heart attack patients."

## **About STENTYS**

Based in Princeton, N.J., and Paris, STENTYS has developed a new generation of stents to treat acute myocardial infarction (AMI). Founded by **Jacques Séguin, M.D., Ph.D., (also founder of CoreValve, which was acquired by Medtronic)** and **Gonzague Issenmann**, STENTYS received CE-marking for its flagship products in 2010. Its Self-Apposing<sup>TM</sup> stent adapts to the anatomic changes of the artery in the post-infarction phase and thus prevents the malapposition problem associated with conventional stents. STENTYS has commenced marketing activities in several European countries.

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