# GORE Side Branch Endograft

Thoracic aorta: Acute type B Dissections

Critical Issues in Aortic Endografting 2012

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Within the past 12 months, the presenter or their spouse/partner have had a financial interest/arrangement or affiliation with the organization listed below.

- Research/Research Grants, Clinical Trial Support
  - W. L. Gore
  - Cook Medical
- Consulting Fees/Honoraria
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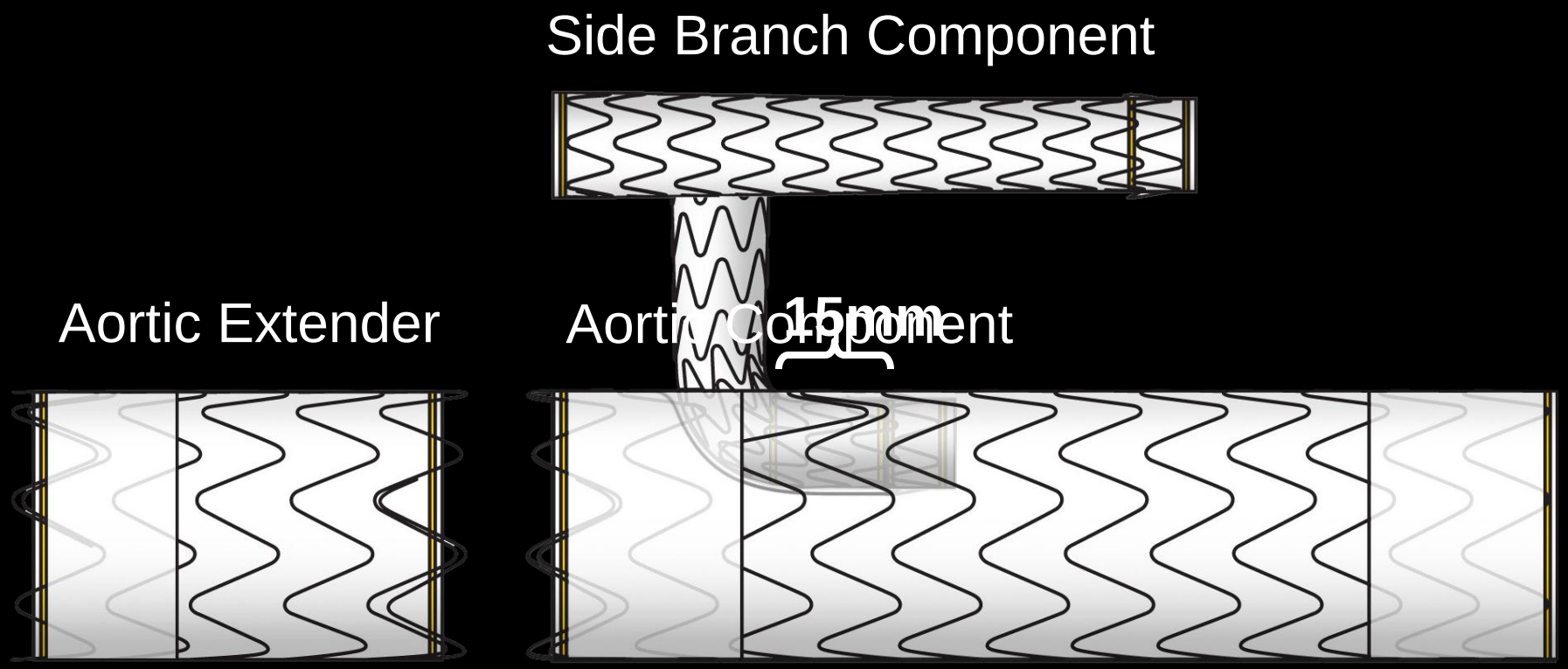
  - Abbott Vascular
- Equity Interests/Stock Options
  - NovoStent
  - Vatrix
  - Amaranth
  - CVRx
  - Endoluminl Sciences
  - REVA Medical
  - TriVascular
  - Cytograft Tissue Engineering
  - Microfabrica
  - Vortex
  - Arsenal
- Officer, Director, Board Member or other Fiduciary Role
  - VIVA Physicians Group
- Speaker's Bureau
  - None

# GORE® TAG® Branched Thoracic Endoprosthesis

## Device Overview

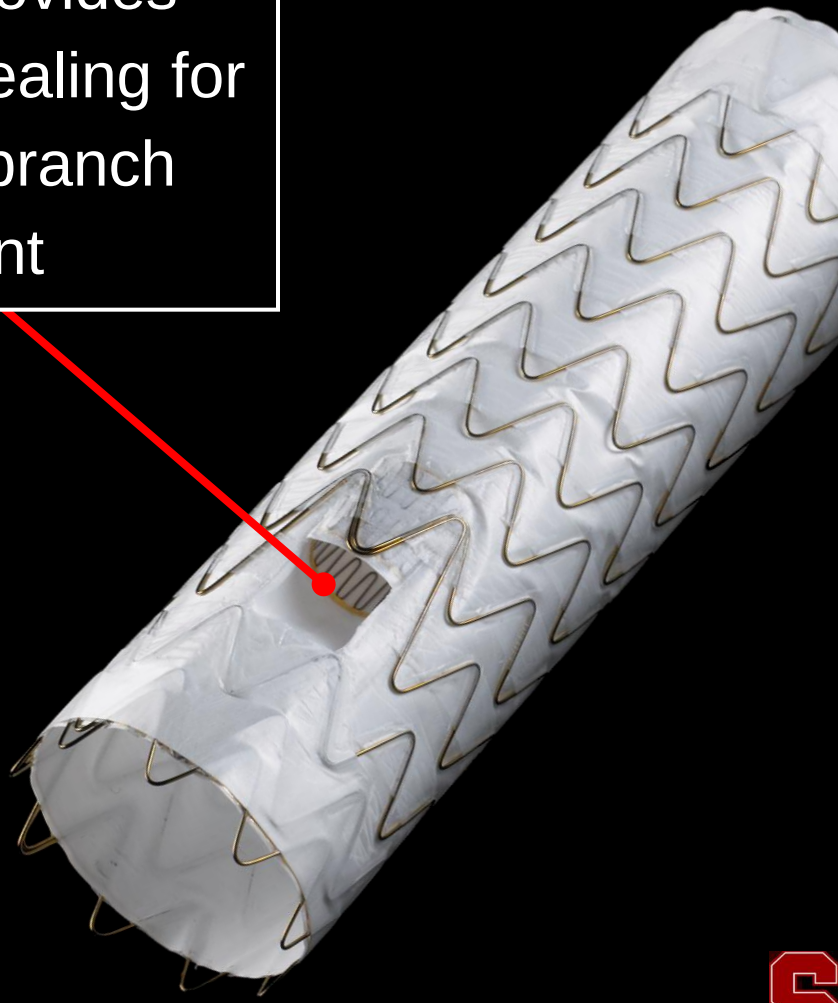
- Off-the-shelf device components
- Purpose-designed
- Safe
- Easy to use
- Leveraging existing Gore technology
  - Conformable GORE® TAG® Device
  - GORE Excluder® AAA Endoprosthesis
  - GORE® Viabahn® Endoprosthesis
  - Carmeda® BioActive Surface

# TAG® Branched Thoracic Endoprosthesis

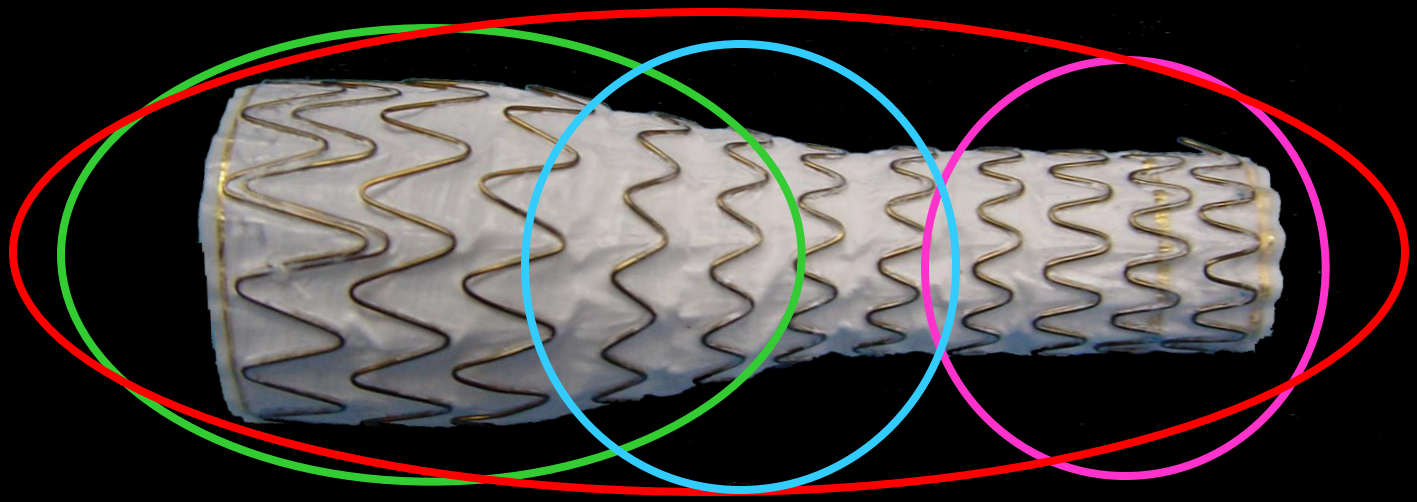


# TAG® Branched Thoracic Endoprosthesis

Inner portal provides anchoring and sealing for modular side branch component



# Side Branch Component Design



**Vessel Sealing Zone**

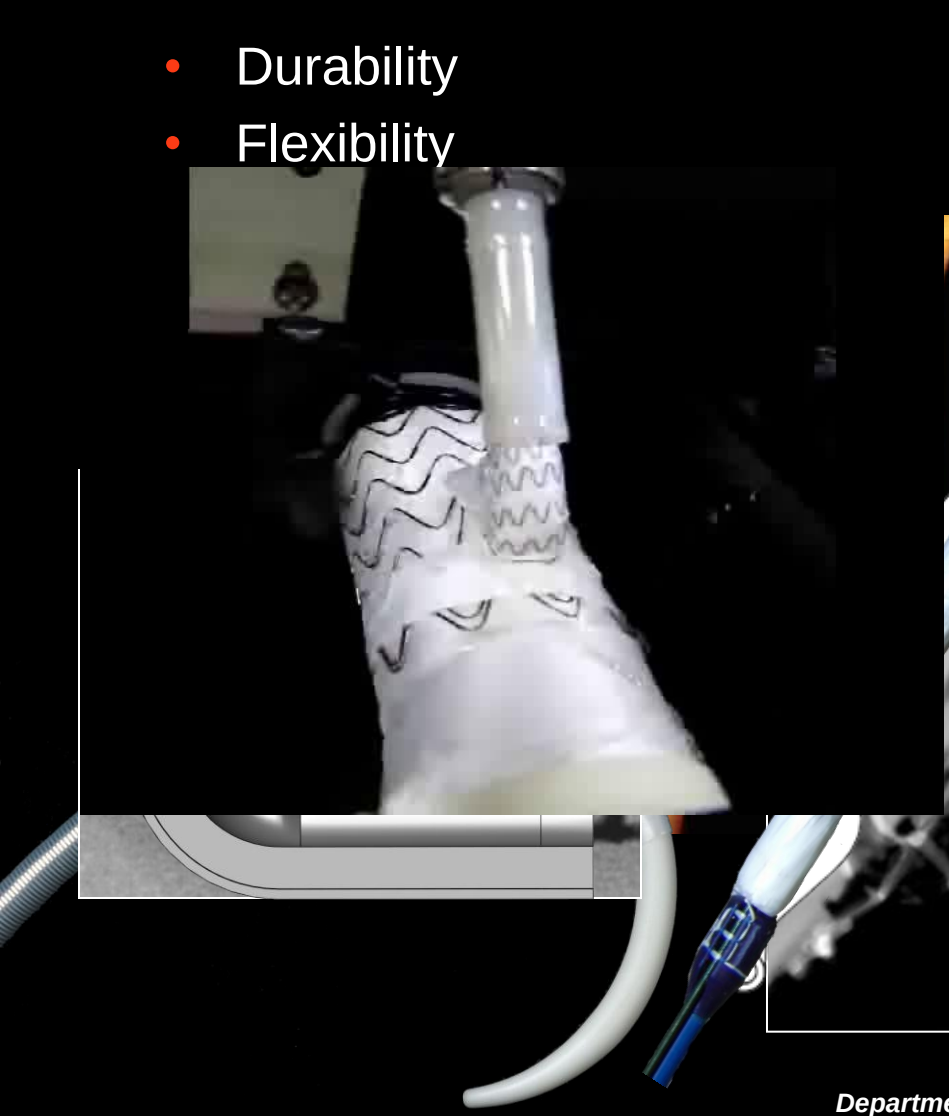
**Portal Sealing Zone**

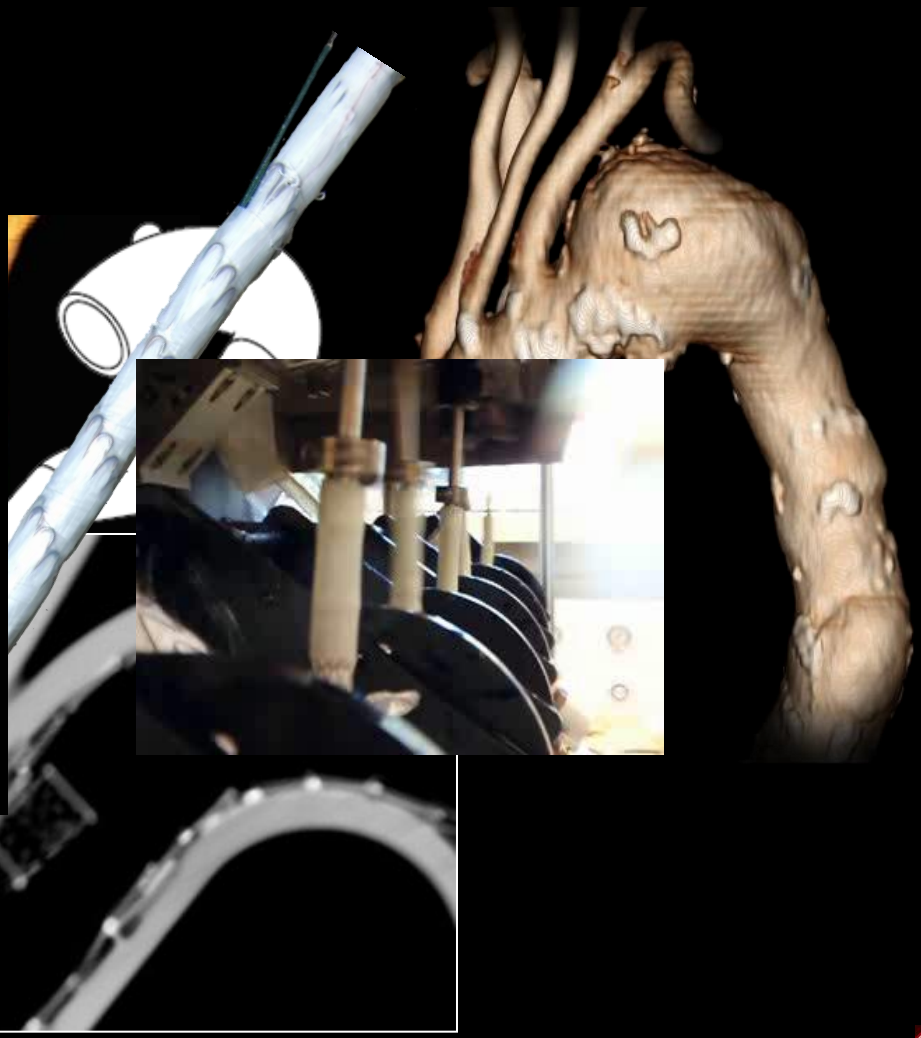
**Heparin-bonded (CBAS) lumen**

**Tapered Flex Zone**

# Designed for the Arch

- Durability
- Flexibility





# Designed for Challenging Anatomies

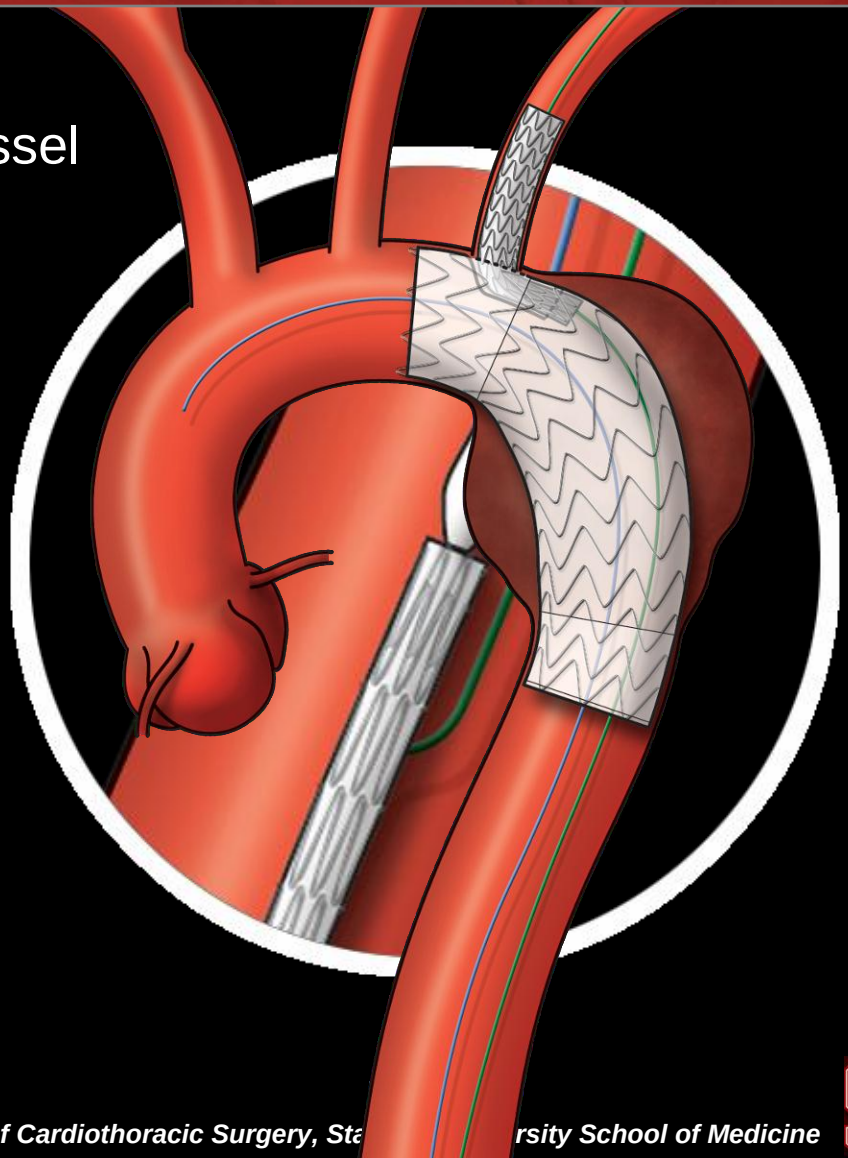
**Step 1:**
- Insert guidewires in aorta and branch vessel

**Step 2:**
- Introduce aortic component over both guidewires into position within the arch

**Step 3:**
- Deploy aortic component and withdraw catheter

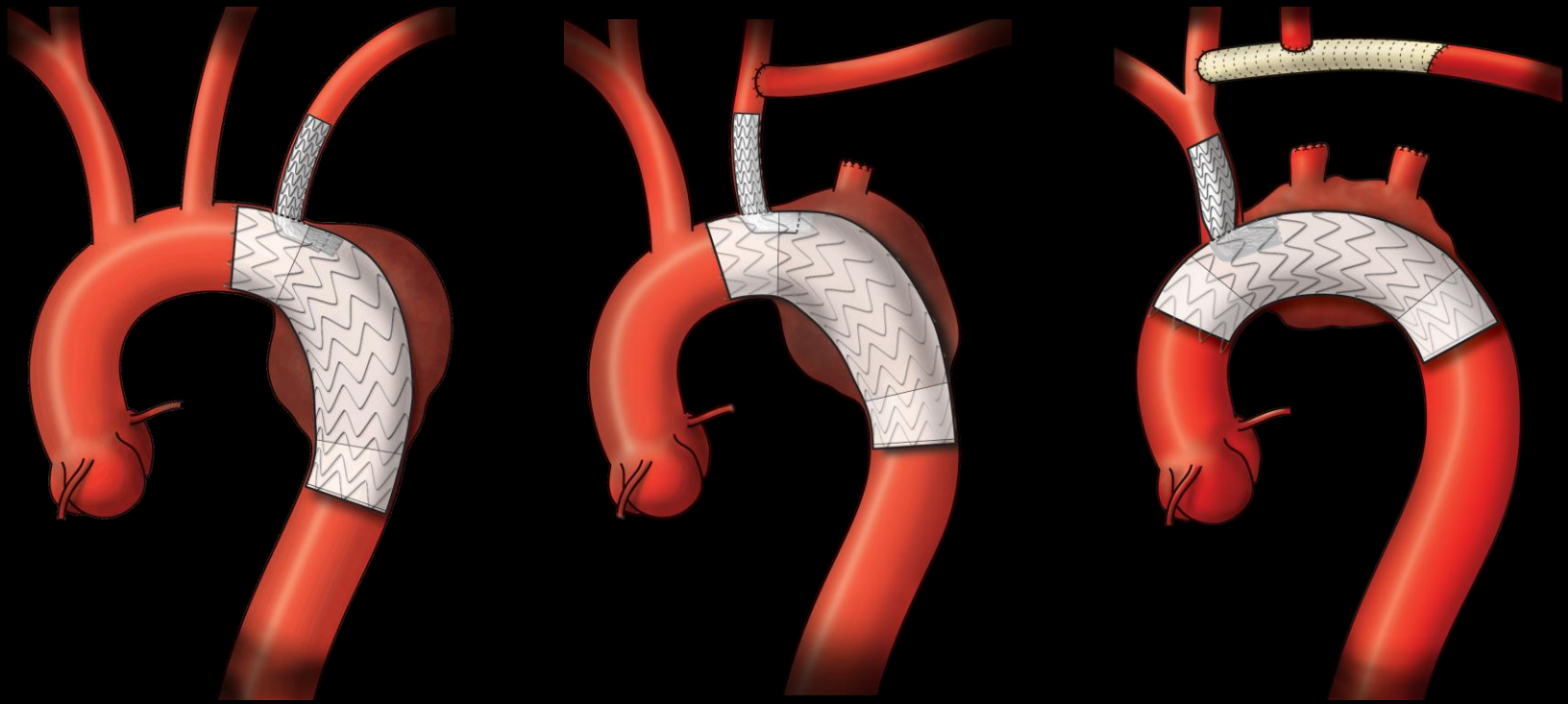
**Step 4:**
- Advance introducer sheath and dilator

**Step 5:**
- Advance and deploy branch component

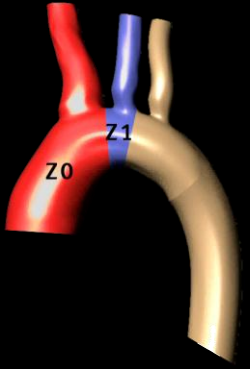


# TAG® Branched Thoracic Endoprosthesis

Zone 2 | Zone 1 | Zone 0




30
MPH




# Zone 0/1 – Summary

- Open surgical repair of the arch and ascending aorta in the setting of extensive aortic aneurysms is challenging
  - Significant risk of mortality and morbidity including neurological deficits / stroke
- Although comparisons are difficult due to varying risk amongst single center reports, hybrid open/endovascular procedures can improve results, however:
  - Endovascular devices are not designed for these applications
  - Procedures remain significantly invasive
- Endovascular approaches to the aortic arch may provide further improvement in patient outcomes
  - Reduced invasiveness
  - Device and delivery system designed for application