

# REAL WORLD EVIDENCE ON REPAIR OF LARGE BORE ARTERIAL ACCESS

## PERCLOSE PROGLIDE VS. SURGICAL CUTDOWN



**This study was an Investigator Sponsored Study funded by Abbott Vascular.**

\*Logistical regression model performed for mortality. \*\*Poisson regression model performed for hospital length of stay.

1 Age, Sex, Index proc, Index year, Baseline blood transfusion, Peripheral vascular disease

2 Anticoagulant use, Atherosclerosis, Cancer, Chronic respiratory disease, MI, Stroke, Blood transfusion

3 Active Percutaneous Closure of Large Bore Access: Clinical and Economic Value, Schneider Darren B. VIVA 2017

Caution: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use provided inside the product carton (when available), at [eifu.abbottvascular.com](http://eifu.abbottvascular.com) or at [Manuals.sjm.com](http://Manuals.sjm.com) for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events. **Information contained herein for distribution outside of the U.S. only.** Check the regulatory status of the device in areas where CE marking is not the regulation in force.

Data on file at Abbott.

**Abbott International BVBA**

Park Lane, Culliganlaan 2B, 1831 Diegem, Belgium, Tel: 32.2.714.14.11

Perclose ProGlide is a trademark of the Abbott Group of Companies.

[www.Vascular.Abbott](http://www.Vascular.Abbott)

©2017 Abbott. All rights reserved. AP2944969-OUS Rev. A



Information contained herein for DISTRIBUTION outside the U.S. ONLY.  
Check the regulatory status in areas where CE marking is not the regulation in force.



The Perclose ProGlide vs. Surgical Cutdown clinical study is designed to compare clinical outcomes and complication rates among patients undergoing closure of large bore arterial access using Perclose ProGlide (Perclose) versus Surgical Cutdown (Cutdown) in a real-world setting.

## DATABASE AND PATIENT POPULATION†:

A retrospective study utilizing IBM Explorys data from IBM Watson Health with longitudinal data for approximately **55 million U.S. patients since 2012**.

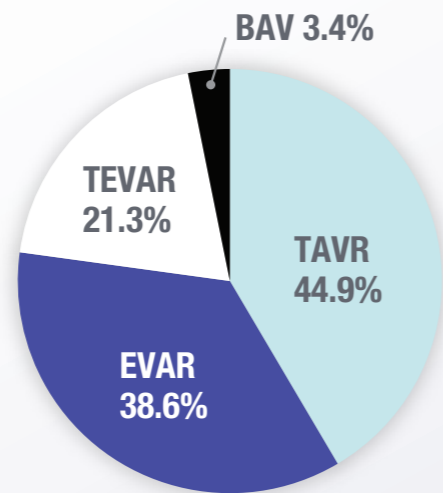
### PATIENT SELECTION AND METHODOLOGY:

- Matched cohorts<sup>1</sup>
- Multivariate regression controlled for baseline<sup>2</sup>

### PATIENT BASELINE:

	Cutdown	Perclose
# of Patients	757	757
Anticoagulants <sup>∅</sup>	17.8%	44.9%

<sup>∅</sup>p<0.05



Patients may have had multiple procedures during index admission

**Only vessel closure device FDA approved for diagnostic or interventional catheterization procedures using 5F to 21F sheaths.**

## PERCLOSE PROGLIDE

SUTURE-MEDIATED CLOSURE SYSTEM

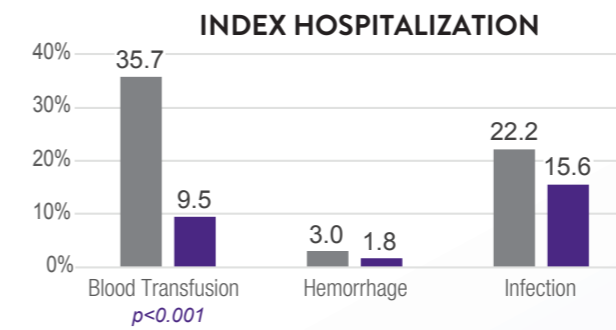
- Percutaneous suture repair with monofilament polypropylene suture for simple to complex procedures
- Deploy suture with pre-tied knot using “pre-close” or “post-close” technique
- Enable sheath downsizing for early restoration of pelvic & extremity perfusion to minimize ischemic related complications<sup>3</sup>



## KEY STUDY FINDINGS†:

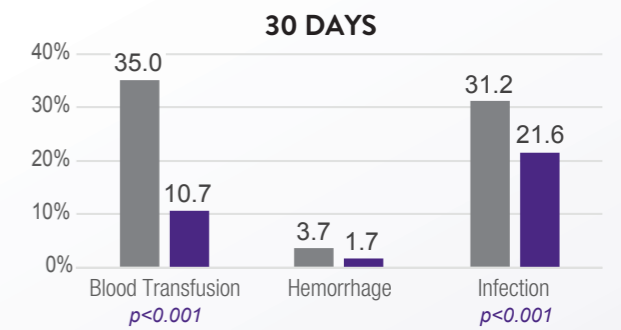
Perclose ProGlide is associated with significantly lower blood transfusions, infections, mortality, and length of stay compared to surgical cutdown.

Perclose patients **80%** less likely to require a blood transfusion and **41%** less likely to have an infection.



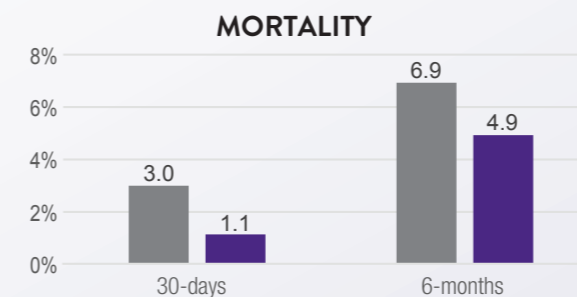
Outcome	Odds Ratio		p-value	Confidence Interval	
	Cutdown N=757	Perclose N=757		Lower	Upper
Blood Transfusion	1	<b>0.20</b>	<0.001	0.15	0.27
Infection	1	<b>0.59</b>	<0.001	0.44	0.79

At 30 days, Perclose patients were **79%** less likely to require a blood transfusion, **43%** less likely to have an infection.



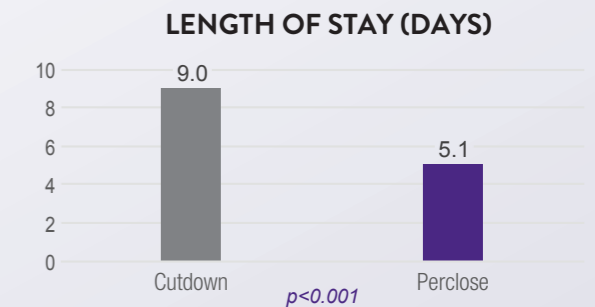
Outcome	Odds Ratio		p-value	Confidence Interval	
	Cutdown N=600	Perclose N=662		Lower	Upper
Blood Transfusion	1	<b>0.21</b>	<0.001	0.15	0.28
Infection	1	<b>0.57</b>	<0.001	0.44	0.73

At 30 days, Perclose patients **70%** less likely to die.



Time Point	Odds Ratio		p	Confidence Interval	
	Cutdown N=757	Perclose N=757		Lower	Upper
30-days	1	<b>0.30</b>	<0.001	0.13	0.71

Hospitalization **43%** shorter for Perclose patients.



Relative LOS	Hospitalization Length of Stay (LOS)**		p	Confidence Interval	
	Cutdown N=757	Perclose N=757		Lower	Upper
1	1	<b>0.57</b>	<0.001	0.53	0.62

† Perclose ProGlide Versus Surgical Closure Outcomes – Real World Evidence, Schneider, Darren B., Krajcer Zvonimir et al VIVA 2017