Improving the T:N* ratio is especially important in complex patients

A complex patient profile can include:

- Prior Embolization
- Large Tumor
- Multi-Focal Disease
- Borderline Liver Function
- Hypovascular Tumors

*Tumor-to-Normal

Both Clinical and Real World Evidence (RWE) support use of Pressure-Enabled Drug Delivery™ (PEDD™) in complex patients

Clinical

Multiple studies of different therapeutics make up a growing body of evidence that supports how TriNav's PEDD approach can increase the T:N ratio and improve patient outcomes[1,2]

RWE

A comprehensive RWE study of PEDD for TACE and TARE among patients with HCC and liver metastases proved that despite higher baseline disease burden and complexity, patient outcomes were similar for non-PEDD patients[3]

1. Pasciak AS, McElmurray JH, Bourgeois AC, Heidel RE, Bradley YC. The impact of an antireflux catheter on target volume particulate distribution in liver-directed embolotherapy: a pilot study J Vasc Interv Radiol. 2015; 26(5):660-669.doi: 10.1016/j.jviv. 2015.01.029;
2. Titano, J. J. et al. End-hole Versus Microvalve Infusion Catheters in Patients Undergoing Drug-Eluting Microspeheres-TACE for Solitary Hepatocellular Carcinoma Tumors: A Retrospective Analysis. Cardiovasc Intervent Radiol 42, 560-568 (2019)
3 Keziah Cook, Deepshekhar Gupta, Yunjuan Liu, Chris Miller-Rosales, Fangzhou Wei, Edward Tuttle, Steven C. Katz, Richard Marshak & Alexander Y. Kim (2024) Real-world evidence of Pressure-Enabled Drug Delivery for trans-arterial chemoembolization and radioembolization among patients with hepatocellular carcinoma and liver metastases, Current Medical Research and Opinion, 40:4, 591-598, DOI: 10.1080/03007995.2024.2322057

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TriNav®: Enhancing care for complex patients, improving tumor response and safety

T

Helps better target the tumor to improve therapeutic delivery

89% vs 55%
Particles in tumor. PEDD vs traditional microcatheter (n=23; p=0.002)[1]

23%
Increase in tumor dose vs traditional microcatheter (n=61; p<0.001)[2]

33%-90%
Increase in tumor deposition vs traditional microcatheter (n=9; p<0.05)[3]

N

Helps decrease non-target delivery

58%
Decrease of particle non-target embolization. PEDD vs traditional microcatheter (n=9; p<0.05)[3]

Better targeting the tumor may result in a better response

100% vs 77%
Overall response rate, PEDD vs traditional microcatheter (n=88; p=0.019)[1]

89% vs 34%
Pathological response vs. traditional microcatheter (n=23; p=0.026)[1]

Decreasing non-target delivery may result in better safety

In a comprehensive RWE study, matched cohort analyses of TARE patients with Hepatocellular Carcinoma (HCC) (n=72) and with CRC liver metastases (CRCLM) (n=50) demonstrated that:[4]

- PEDD HCC patients had fewer 30-day inpatient visits than non-PEDD patients post-procedure
- PEDD CRCLM patients had fewer overall clinical complications than non-PEDD patients post-procedure

RX Only

For the safe and proper use of TriNav and TriNav LV, refer to their individual Instructions for Use.[5,6]

Indications For Use

The TriNav and TriNav LV Infusion Systems are intended for use in angiographic procedures. They deliver radiopaque media and therapeutic agents to selected sites in the peripheral vascular system.[5,6]

Contraindications

TriNav and TriNav LV Infusion Systems are not indicated for use in the vasculature of the central nervous system (including the neurovasculature) or central circulatory system (including the coronary vasculature).[5,6]

1. Titano, J. J. et al. End-hole Versus Microvalve Infusion Catheters in Patients Undergoing Drug-Eluting Microspeheres-TACE for Solitary Hepatocellular Carcinoma Tumors: A Retrospective Analysis. Cardiovasc Intervent Radiol 42, 560-568 (2019);
2. d' Abadie P, et al. Antireflux catheter improves tumor targeting in liver radioembolization with resin microspheres. Diagn Interv Radiol 2021; 27:768-773;
3. Pasciak AS, McElmurray JH, Bourgeois AC, Heidel RE, Bradley YC. The impact of an antireflux catheter on target volume particulate distribution in liver-directed embolotherapy: a pilot study J Vasc Interv Radiol. 2015; 26(5):660-669.doi: 10.1016/j.jviv. 2015.01.029;
4. Keziah Cook, Deepshekhar Gupta, Yunjuan Liu, Chris Miller-Rosales, Fangzhou Wei, Edward Tuttle, Steven C. Katz, Richard Marshak & Alexander Y. Kim (2024) Real-world evidence of Pressure-Enabled Drug Delivery for trans-arterial chemoembolization and radioembolization among patients with hepatocellular carcinoma and liver metastases, Current Medical Research and Opinion, 40:4, 591-598, DOI: 10.1080/03007995.2024.2322057
5. TriSalus™ TriNav® Infusion System Instructions for Use
6. TriSalus™ TriNav® LV Infusion System Instructions for Use

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