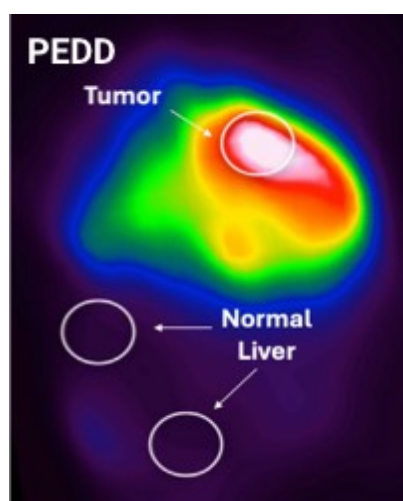


Improving the T:N ratio with TriNav

It is well understood that delivering more therapy to the tumor improves the response to TARE and TACE.¹ And for many patients, sparing healthy liver is just as important, particularly in those complex patients with higher disease burden and/or reduced liver function.

What does this mean for Interventional Radiologists planning their liver-directed therapy procedures? It means T:N ratio matters, particularly for the complex patient.

In both TARE and TACE procedures, maximizing the T:N ratio in liver directed therapy enhances outcomes.^{2,3,4,5,6} An impressive body of clinical evidence shows that the TriNav Infusion System, with its Pressure-Enabled Drug Delivery™ (PEDD™) approach, does just that.



When comparing PEDD to a traditional microcatheter, clinical data show:

- 24% increase in T:N ratio (n=61; p<0.001)⁷
- 89% vs 55% more particles in tumor (n=23; p=0.002)⁸
- 58% decrease in non-target embolization (n=9, p<0.05)⁹

Learn more about the studies demonstrating that TriNav enhances the T:N ratio.

[Click Here to Learn More About PEDD](#)

Indications

For Use The TriNav Infusion System is intended for use in angiographic procedures. It delivers radiopaque media and therapeutic agents to selected sites in the peripheral vascular system.¹⁰

Contraindications

TriNav is not intended for use in the vasculature of the central nervous system (including the neurovasculature) or central circulatory system (including the coronary vasculature).

Rx Only. For the safe and proper use of the TriNav Infusion System, refer to the Instructions for Use.

References

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10. TriSalus™ TriNav® Infusion System, Instructions for Use