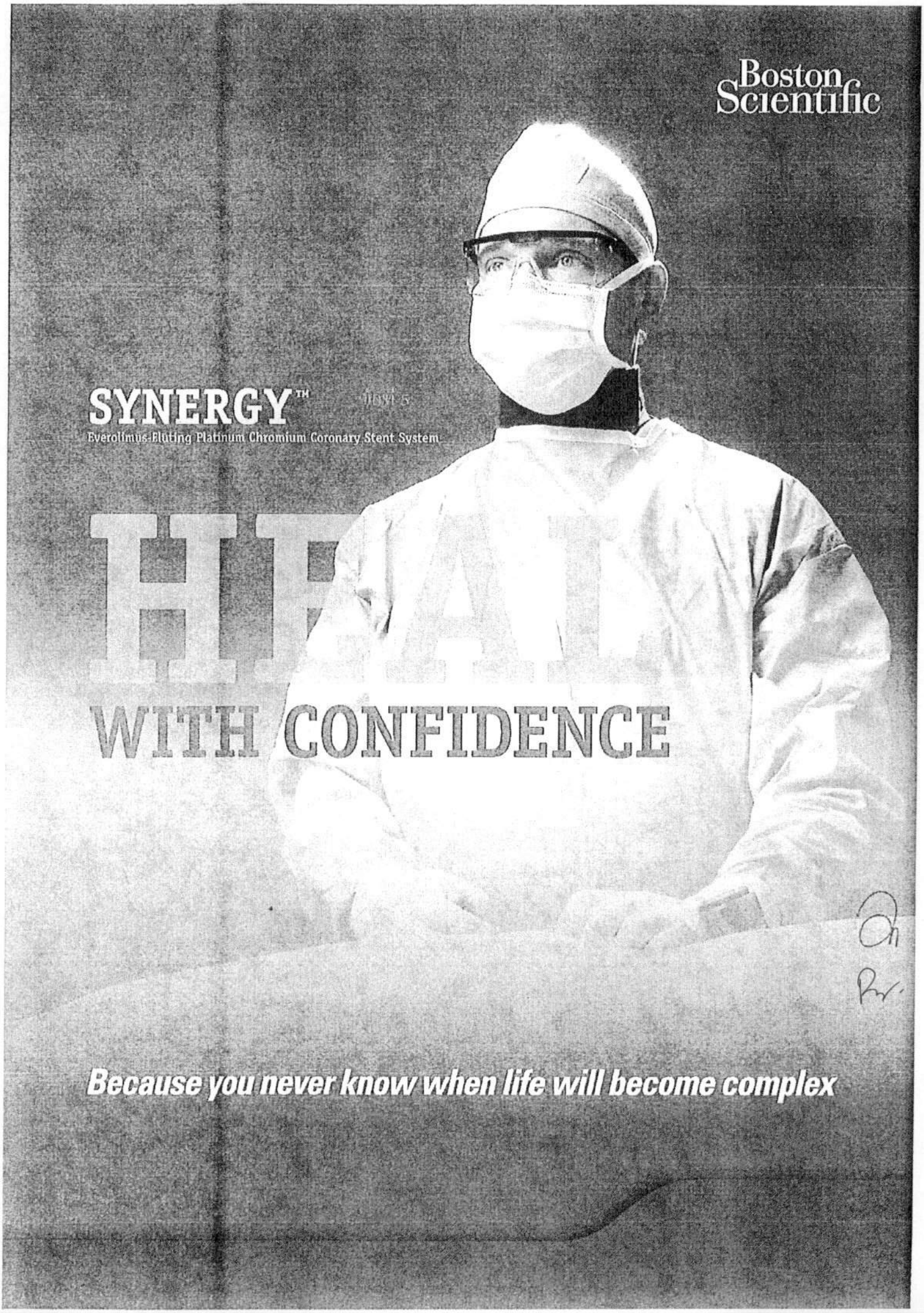

Boston Scientific
SYNERGY™
Everolimus-Eluting Platinum Chromium Coronary Stent System
WITH CONFIDENCE
Because you never know when life will become complex

SYNERGY™

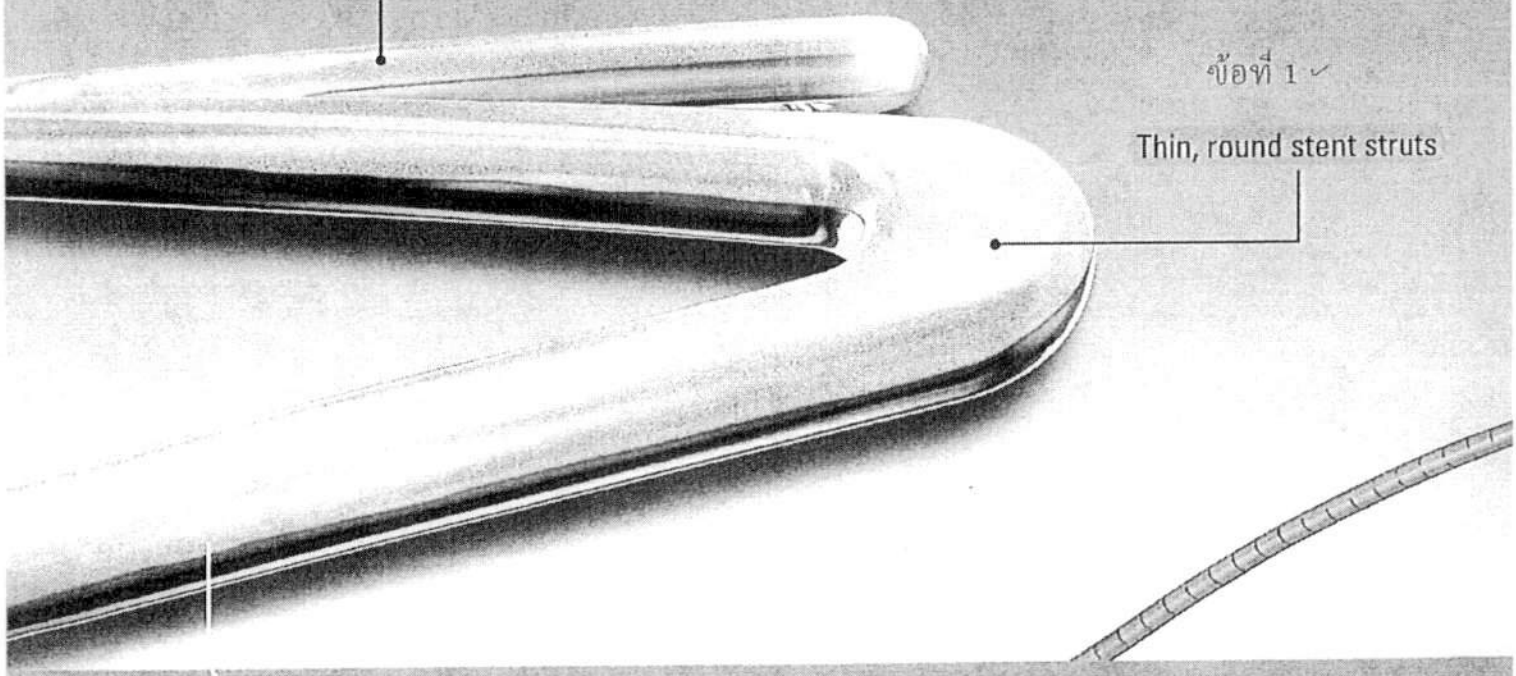
Everolimus-Eluting Platinum Chromium Coronary Stent System

Designed to HEAL

Attributes work together, synergistically, to promote optimal healing within the vessel[1]

ข้อที่ 4 ✓

Synchrony™ Bioabsorbable Polymer Coating is applied only to the abluminal side of the stent to stimulate healthy endothelialization



ข้อที่ 1 ✓

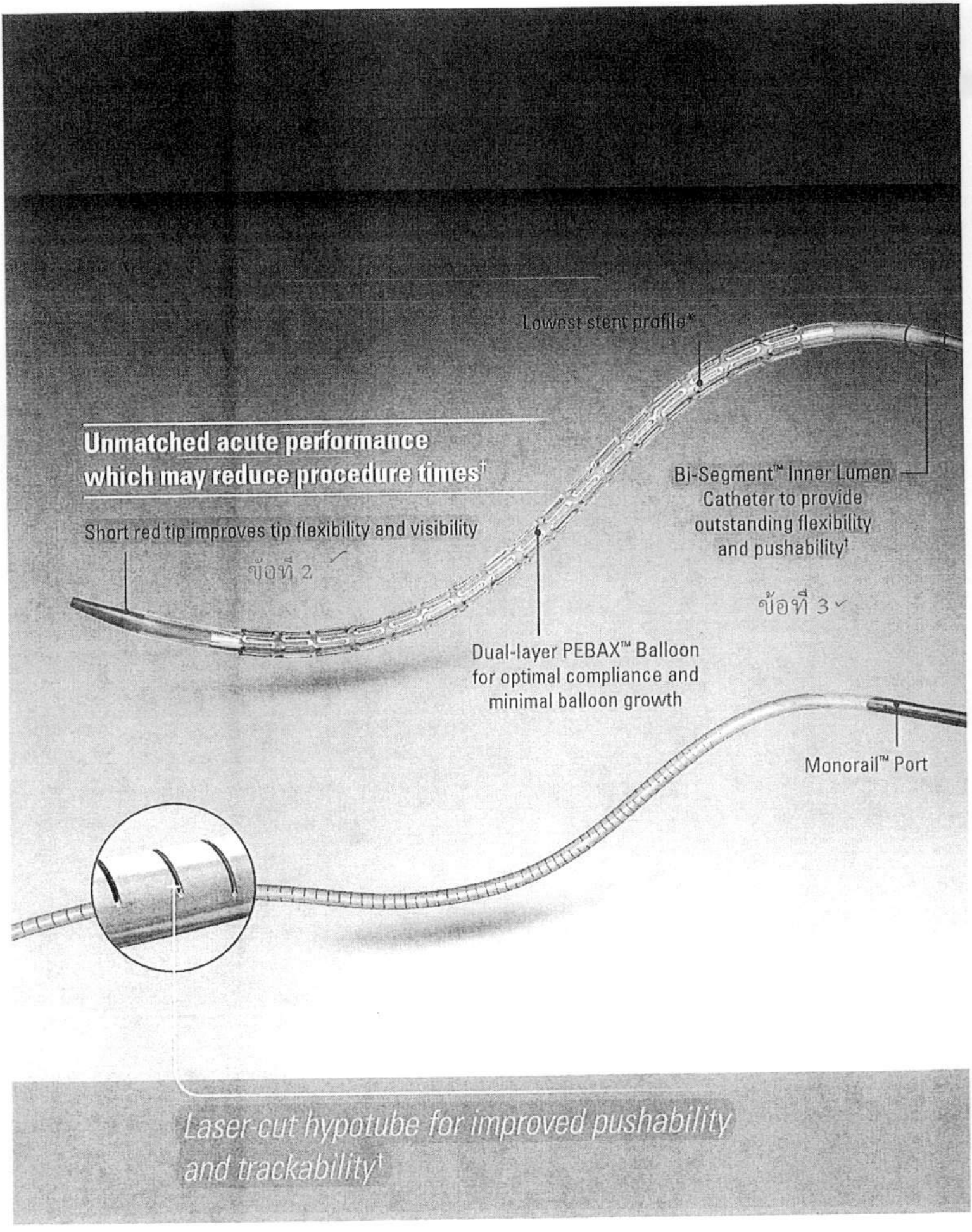
Thin, round stent struts

Polymer is gone when it's no longer needed, shortly after the drug is completely eluted at 3 months[2]

1. Eppihimer M, PhD. Impact of Polymer Type and Location on Stent Thrombogenicity and Endothelial Cell Coverage. *EuroPCR* 2013.
2. Chen YL, PhD., Foss A, PhD, Eppihimer M, PhD, et al. Characterization of In Vivo Poly(DL-lactic-co-glycolic acid) Bioabsorption from a Drug-Eluting Stent. *EuroPCR* 2012.

* Among Boston Scientific Corporation stents. Data on file at Boston Scientific Corporation.

† Data on file at Boston Scientific Corporation.


Lowest stent profile*
Unmatched acute performance which may reduce procedure times†
Short red tip improves tip flexibility and visibility
ข้อที่ 2
Bi-Segment™ Inner Lumen Catheter to provide outstanding flexibility and pushability†
ข้อที่ 3
Dual-layer PEBAX™ Balloon for optimal compliance and minimal balloon growth
Monorail™ Port
Laser-cut hypotube for improved pushability and trackability†

SYNERGY™

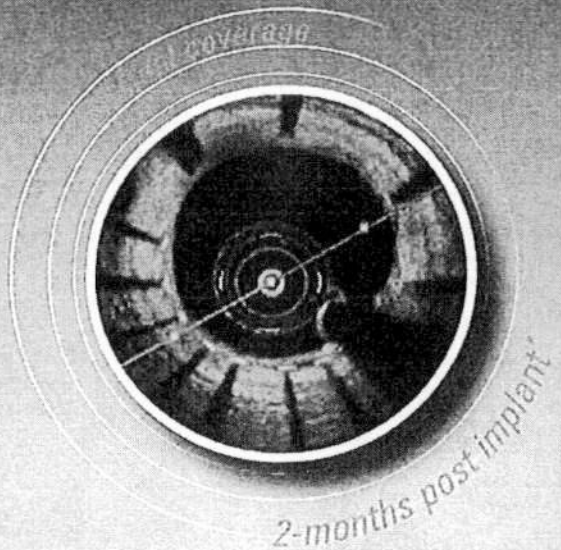
Everolimus-Eluting Platinum Chromium Coronary Stent System

Early Healing

In a complex patient

3-month DAPT labeling:

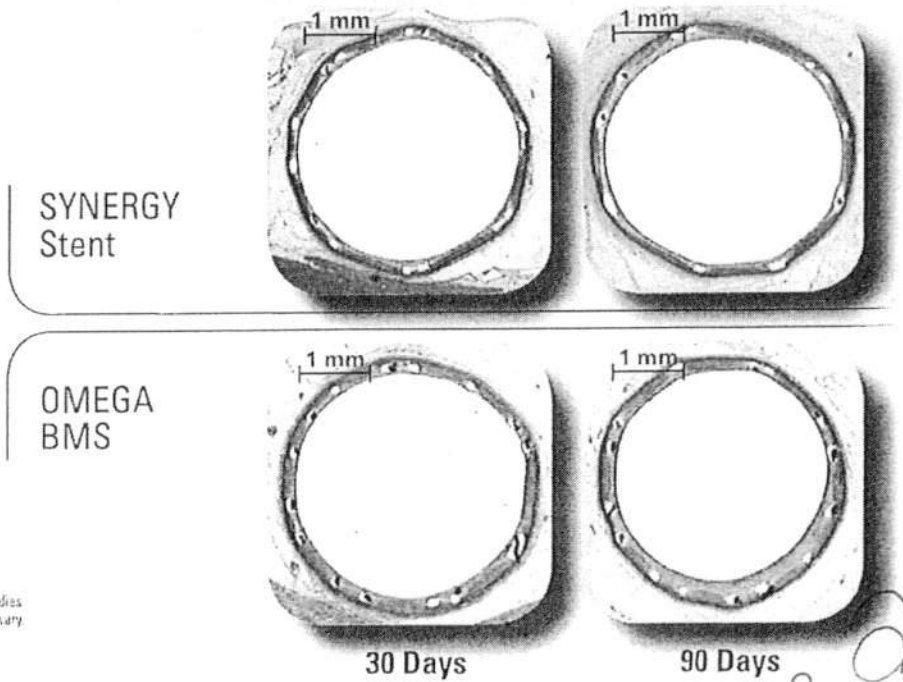
- *In selected patients, it may be reasonable to interrupt or discontinue $P2Y_{12}$ inhibitor therapy after 3 months†*
- *This reduction in DAPT could minimize medication costs, complications, and improve patient satisfaction*



In preclinical studies

Complete endothelialization by 30 days[3]

Similar vascular response to SYNERGY Stent and OMEGA™ Bare Metal Stent (BMS) at 3 months‡



3. Wilson G, MD. ACC 2011.

* Image provided by Jose M. De la Torre Hernandez, MD, PhD. Results from case studies are not necessarily predictive of results in other cases. Results in other cases may vary.

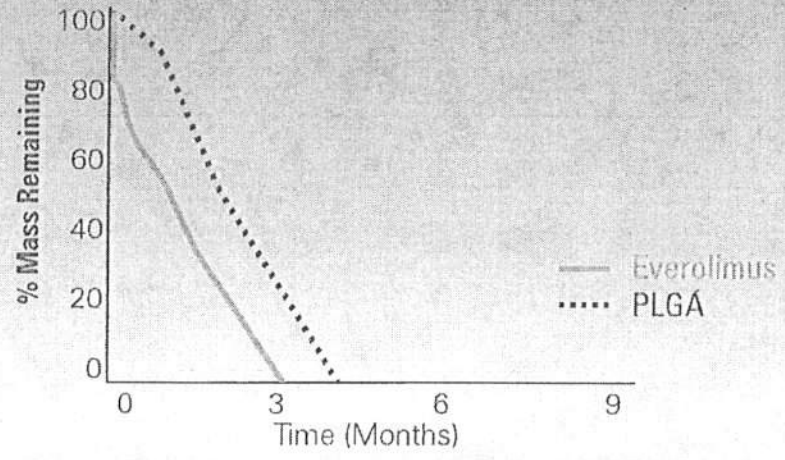
† See Directions for Use.

‡ Data on file at Boston Scientific Corporation.

Freedom from Long-Term Polymer Exposure

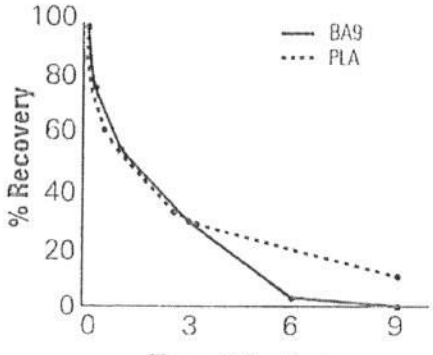
SYNERGY™ Stent offers peace of mind knowing that the polymer is gone shortly after the drug is completely eluted at 3 months[1]

Synchronous Drug Elution and Polymer Absorption*



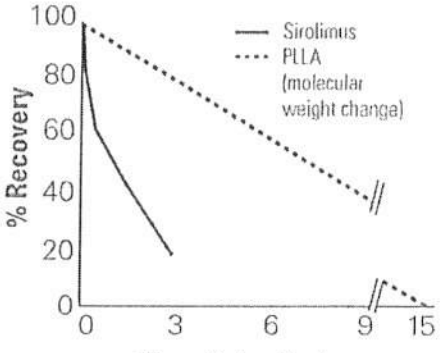
Polymer Absorption Rates in Perspective

Nobori™[3] and BioMatrix Flex™[4] Stents



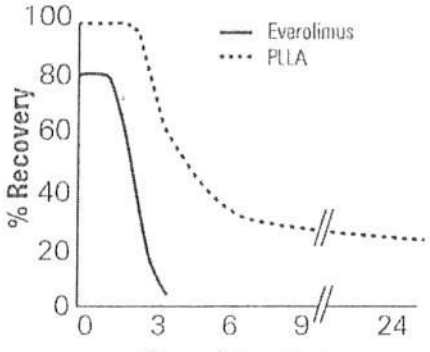
Absorption time > 9 months

Orsiro™[5] Stent



Absorption time > 15 months

Absorb™ BVS[4] Scaffold



Absorption time > 24 months

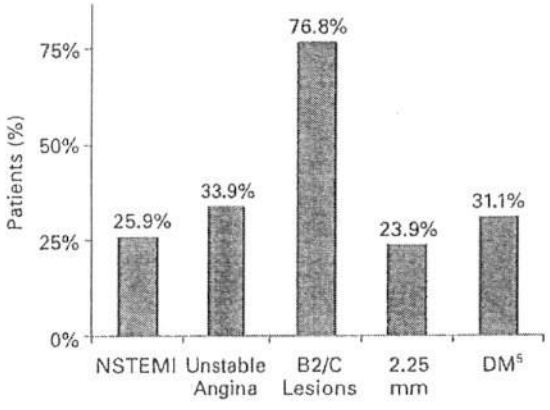
EVOLVE II Clinical Trial

SYNERGY™ STENT

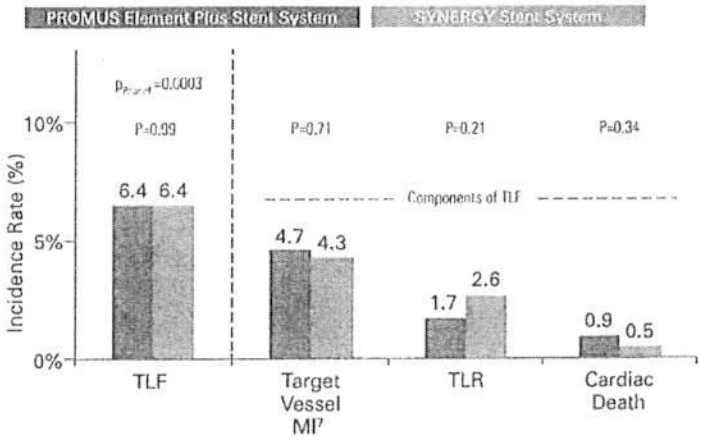
Broadest and most complex patient population ever studied in a U.S. Pivotal Trial

EVOLVE II Clinical Trial[4] Study Overview:
Patients (1,684) were randomized 1:1 to SYNERGY or PROMUS Element™ Plus Stent Systems with ≤3 native coronary artery lesions in ≤2 major epicardial vessels; lesion length ≤34 mm, RVD ≥2.25 to ≤4.0 mm, %DS≤ 50 to <100 (excluded LM disease, SVG, CTO, or recent STEMI)

EVOLVE II Clinical Trial A More Comers Study[4]

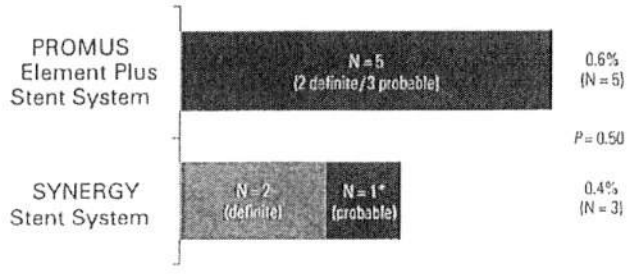


Primary Endpoint of Target Lesion Failure[6] (TLF) Met



ZERO definite ST events in SYNERGY arm after 24 hours[4]

Stent Thrombosis (ST) *(Definite/Probable)* Through 12-Months[4]



*Occurred on day 6. ST rates were equivalent when analyzed in an intent-to-treat or per protocol manner.

Acute (≤1 day) | Sub-Acute (2–30 days) | Late (30 days–1 year)

4. EVOLVE II Clinical Trial presented by Dean Kereiakes, MD at AHA 2014. 1,684 patients were randomized 1:1 to SYNERGY or PROMUS Element™ Plus Stent Systems. Graph shows TLF Per Protocol (PP) and MI, TLR, CD shown for the Intent-to-Treat (ITT) population. ITT TLF for SYNERGY Stent = 6.7%, and for PROMUS Element Stent = 6.4%, respectively (p=0.0005 for non-inferiority). The SYNERGY Stent is an investigational device and not for sale in the U.S. or Japan.

5. Medically-Treated Diabetes Mellitus

6. TLF: ischemia-driven TLR, MI related to the target vessel, or any cardiac death. To conclude non-inferiority, the primary endpoint was required to have been met in both intent-to-treat and per protocol patient populations.

7. Per protocol spontaneous MI is defined as rise and/or fall of cardiac biomarkers with one value >99th percentile of the URL + with evidence of myocardial ischemia. Peri-PCI MI is defined as one of the following: i) biomarker elevations within 48 hours of PCI (based on CK-MB >3X URL), ii) new pathological Q waves, or iii) autopsy evidence of acute MI.

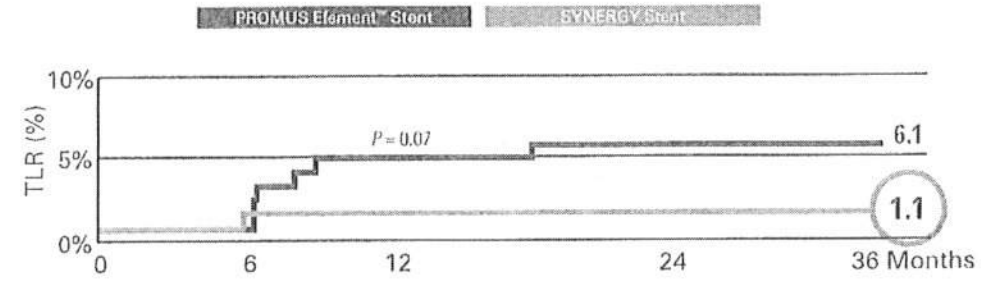
8. Meredith T, AM, MBBS, PhD. PCR 2014. Only the "full dose" SYNERGY Stent results are shown.

EVOLVE Clinical Trial
SYNERGY™ STENT

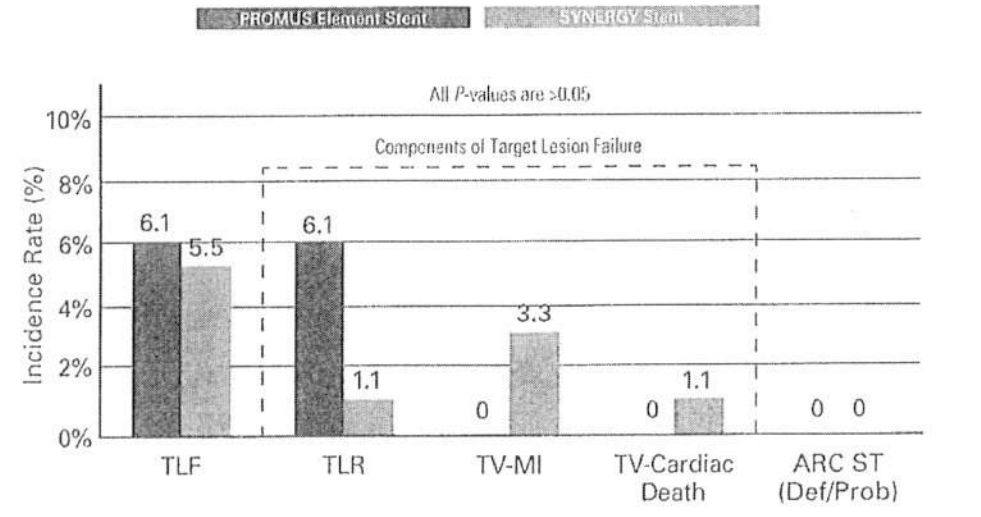
Outstanding Safety and Efficacy at 3-Years

Early and long-term data demonstrates exceptional results.[8]

0% TLR from 6 Months to 3-Years[8]



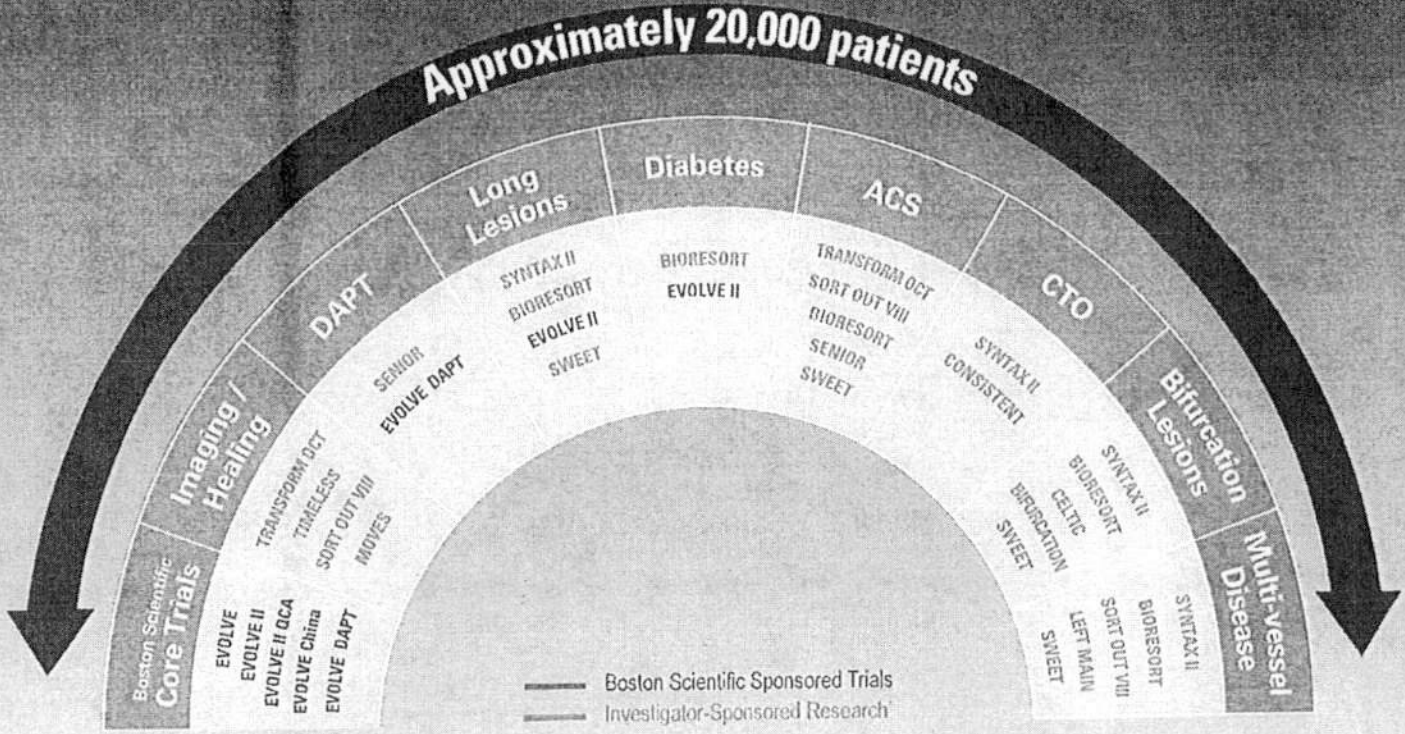
1.1% TLR and 0% ARC ST at 3-Years[8]



One NQWMI in the SYNERGY group was periprocedural. The remaining 2 NQWMI in the SYNERGY arm were considered unrelated to the study device: one at day 347 due to anemia and a major GI bleed, and one at day 364 subsequent to respiratory failure in a patient with severe COPD—enzymes were checked indicating that a NQWMI had occurred. The one death was of an unknown cause at day 472 and adjudicated as a Cardiac Death. Safety Population.

SYNERGY™ Stent Clinical Program and Research*

Addressing full spectrum of cardiovascular disease complexity



SYNERGY *Everolimus-Eluting Platinum Chromium Coronary Stent System*

MONORAIL™ CATHETER—PRODUCT ORDERING INFORMATION

ข้อที่ 6 ✓ ข้อที่ 6

ø (mm)	STENT LENGTH (mm) 8	12	16	20	24	28	32	38	Overexpansion Capabilities
2.25	H7493926208220	H7493926212220	H7493926216220	H7493926220220	H7493926224220	H7493926228220	H7493926232220	H7493926238220	3.50
2.50	H7493926208250	H7493926212250	H7493926216250	H7493926220250	H7493926224250	H7493926228250	H7493926232250	H7493926238250	3.50
2.75	H7493926208270	H7493926212270	H7493926216270	H7493926220270	H7493926224270	H7493926228270	H7493926232270	H7493926238270	3.50
3.00	H7493926208300	H7493926212300	H7493926216300	H7493926220300	H7493926224300	H7493926228300	H7493926232300	H7493926238300	4.25
3.50	H7493926208350	H7493926212350	H7493926216350	H7493926220350	H7493926224350	H7493926228350	H7493926232350	H7493926238350	4.25
4.00	H7493926208400	H7493926212400	H7493926216400	H7493926220400	H7493926224400	H7493926228400	H7493926232400	H7493926238400	5.75

* Boston Scientific is not responsible for the collection, analysis or reporting of the investigator-sponsored research output which is the sole responsibility of the investigators. Boston Scientific's involvement in investigator-sponsored research is limited to providing financial support for research that advances medical and scientific knowledge about our products.

CAUTION: The law restricts these devices to sale by or on the order of a physician. Indications, contraindications, warnings and instructions for use can be found in the product labelling supplied with each device. Information for the use only in countries with applicable health authority product registrations. Information contained herein is for distribution outside the US, France, and Japan only.

Boston Scientific
Advancing science for life™

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IC-222116-AD NOV2014

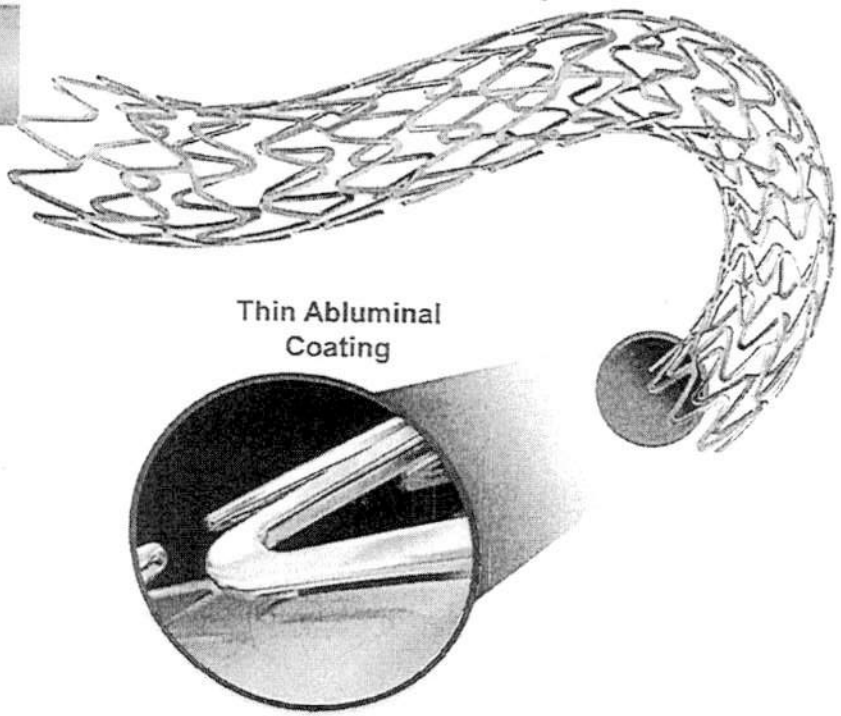
6

SYNERGY™ Everolimus-Eluting Stent
Product Summary

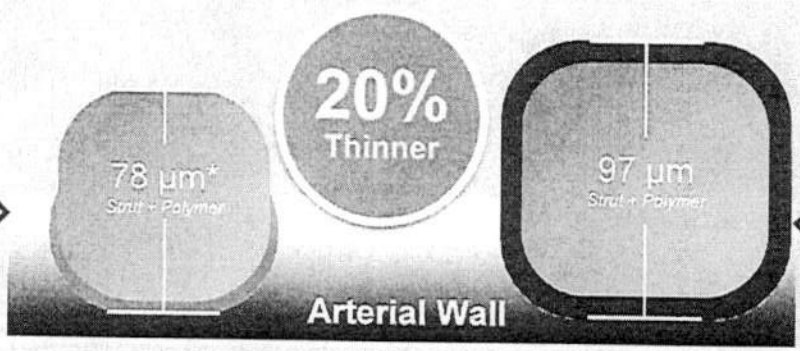
Boston Scientific
Advancing science for life™

Synchrony™ Bioabsorbable Coating

- Polymer is gone when no longer needed, shortly after completion of drug elution at 3 months(ข้อที่ 4)
- Applied to the abluminal side of the stent, designed for optimal healing
- Providing *Suppression* of neointimal growth at the arterial wall & *Promotion* of healing inside the lumen



SYNERGY Stent
Abluminal PLGA Bioabsorbable Polymer



Promus PREMIER™ Stent
Conformal PVDF Permanent Polymer

IC-558004-AB OCT2018

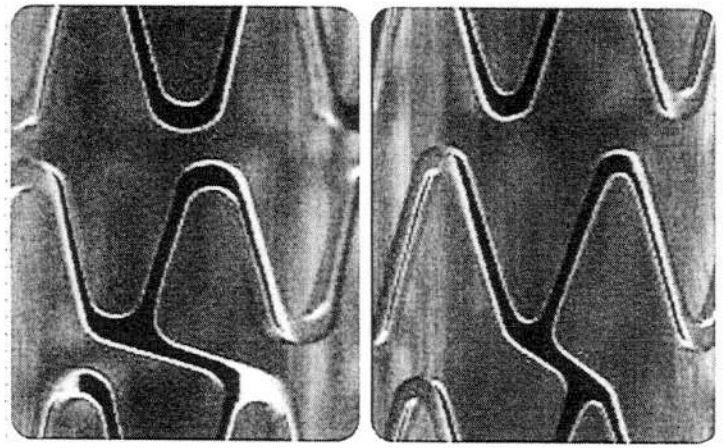
*Strut thickness for small vessel model is 0.0029" (74µm). Workhorse model is 0.0031" (79µm) and large vessel is 0.0032" (81µm). Boston Scientific data on file.

SYNERGY™ Stent System Enhanced Platform

Strength and Flexibility Where It Matters

Boston Scientific
Advancing science for life™

Connector Angle Comparison



Promus PREMIER™ Stent

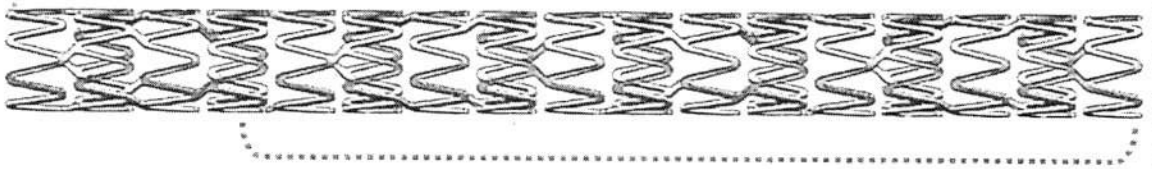
SYNERGY Stent

Strut thickness, peak radius and connector angles designed ***to improve crimping profile and deliverability over Promus PREMIER Stent***

Customized Stent Architecture

Additional connectors on proximal two segments

Robust proximal end for ***increased axial strength***[1]



2 connectors throughout body

Overall design maintains ***flexibility and conformability***[2] (ข้อที่ 1)

IC-558004-AB OCT2018 2

1 The Small Vessel and Workhorse sizes have 4 connectors on the two most proximal segments. The Large Vessel sizes have 5 connectors on the two most proximal segments.
2 Bench testing. 3.0 mm stents performed by Boston Scientific Corporation. Bench test results may not necessarily be indicative of clinical performance. Boston Scientific Data on File.

Boston Scientific

SYNERGY™ II

MONORAIL™

Everolimus-Eluting Platinum Chromium Coronary Stent System