STENTYS

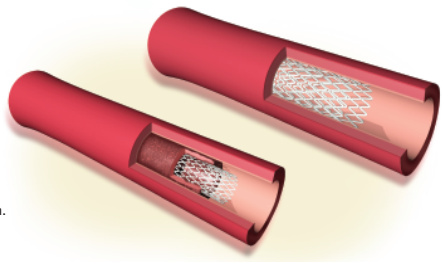
Based in Princeton, N.J., and Paris, STENTYS has developed a new generation of stents to treat acute myocardial infarction (AMI). Founded by **Jacques Séguin, M.D., Ph.D.**, (also founder of **CoreValve**, acquired by **Medtronic**) and **Gonzague Issenmann**, STENTYS received the CE mark for its flagship products in 2010. The STENTYS stent represents a **major breakthrough** compared to conventional stents when treating heart attack patients: it is ***self-apposing*** — i.e. it "fits snugly" into the contour of a blood vessel, behaving as a spring once implanted; its shape and diameter adapt to the anatomic changes of the coronary arteries during the post-AMI phase. By being in permanent contact with the vessel wall, the STENTYS stent avoids ***malapposition*** ("loosely" fit stent) observed with conventional stents. STENTYS has commenced its marketing activities in several European countries.

IN SEPTEMBER 2010 STENTYS announced positive results from an international clinical trial, the **APPOSITION II** study. This randomized trial compared the STENTYS ***self-apposing*** stent with a conventional market-leading stent in patients suffering a heart attack. The trial is the first to quantify one of the major risks associated with conventional treatment that leads to the patient experiencing a repeat infarction, i.e. stent ***malapposition***. APPOSITION II recruited 80 patients and was conducted in 6 European countries, between December 2009 and June 2010.

How it works: *Self-apposing* feature

1 The Stentys stent is implanted in the lesion (left illustration) where residual clot and spasm make the artery lumen appear smaller.

2 After resolution of the acute event, the Stentys stent has fully expanded (extreme right illustration) on its own to adapt to the new anatomy—with perfect apposition.



The APPOSITION II trial showed that, three days after AN AMI, 28% of patients treated with conventional stents displayed significant malapposition, meaning that the stent was not in contact with the artery wall. Malapposition puts AMI patients at significant risk of potential fatal complications such as implant blockage (in-stent thrombosis). In contrast, none of the patients treated with the STENTYS stent had malapposition. The APPOSITION II trial results demonstrated that the STENTYS stent eliminates malapposition and that it is therefore a safer solution than conventional stents for the treatment of heart attack patients.

"We are very excited that the primary endpoint of the APPOSITION II study was reached successfully. The STENTYS stents were all perfectly apposed whereas gross malapposition was observed in more than one in four patients treated with conventional stents. This is very important because malapposition is one of the key contributing factors causing stent thrombosis," said principal investigator **Stefan Verheye, M.D., Ph.D.**, Dept. of Cardiology, Middelheim Hospital, Antwerp, Belgium.

Breakthrough 'AMI' Treatment

Acute Myocardial Infarction

STENTYS *Self-Apposing* Stent

PRINCETON, N.J., and PARIS, March 17, 2011 — STENTYS S.A. (STNT.PA), a medical technology company that is commercializing a new generation of innovative stents to treat acute myocardial infarction (AMI), announced today the launch of the STENTYS stents in four additional European countries: Scandinavia, Spain, Switzerland and Poland.

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