

**SYNERGY™ SHIELD**  
Everolimus-Eluting Platinum Chromium  
Coronary Stent System



# A Legacy of Healing with Confidence



- The new standard for acute performance<sup>1</sup>
- Intentionally designed for short DAPT<sup>1</sup>
- Proven in complex patients<sup>2</sup>



<sup>1</sup> Kirtane, A.J. et al. Primary Results of the EVOLVE Short DAPT Study. *Circulation: Cardiovascular Interventions*. 2021 Mar, 14:e010144

<sup>2</sup> Walsh, S.J. et al. Intravascular healing is not affected by approaches in contemporary CTO PCI: The CONSISTENT CTO Study. *JACC: Cardiovasc Interv*. 2020; 13(12):1448-1457

# ➤ The New Standard for Acute Performance

**SYNERGY SHIELD delivers, even in tight, complex lesions.**

Customized stent architecture provides strength where needed and flexibility when it matters most.

- Low Profile\* with Thin 74µm strut design<sup>1</sup>
- Exceptional conformability
- Optimized axial & radial strength

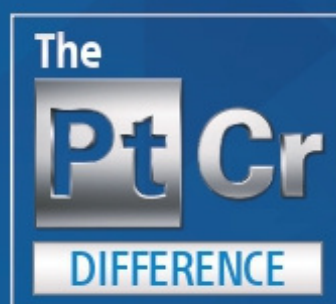
- Low crossing profile for navigation of tight lesions

- Extra proximal connectors for greater axial strength

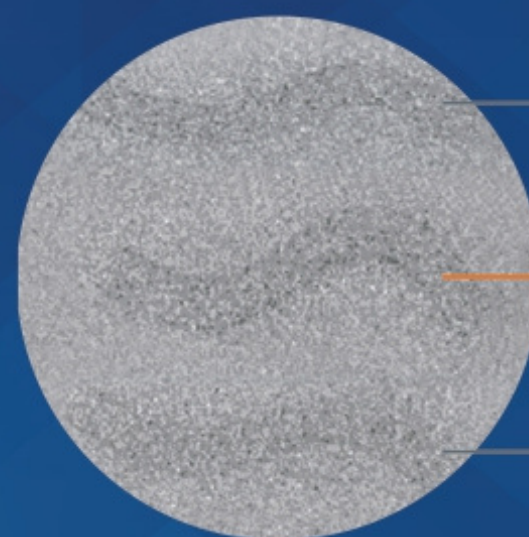
- Exceptional overexpansion up to 5.75 mm\*

- Optimized strut width and thickness provides excellent radial strength\*

- Designed for flexibility\*  
Short red tip and 2-connector stent design



Built with a proprietary Platinum Chromium alloy, specifically designed for coronary DES. The foundation of SYNERGY SHIELD stent performance, including best-in-class visibility.<sup>2</sup>



Resolute Onyx™  
PP-DES  
CoNi

SYNERGY SHIELD™  
BP-DES  
PtCr

XIENCE Sierra™  
PP-DES  
CoCr

\* Reference data on file at Boston Scientific

<sup>1</sup> SYNERGY SHIELD strut thickness for small vessel model is 74µm, Workhorse model is 79µm and large vessel is 81µm. Boston Scientific data on file.

<sup>2</sup> "High Incidence of Inaccurate Stent Placement in the Treatment of Coronary Aorto-Ostial disease": <https://www.invasivecardiology.com/articles/high-incidence-inaccurate-stent-placement-treatment-coronary-aorto-ostial-disease>

## ➤ Intentionally Designed for Short DAPT

Three design features function synergistically to allow for early healing:

- Thin, abluminal, fast-absorbing bioabsorbable polymer<sup>1</sup>
- Synchronous Drug Elution and Polymer Absorption<sup>1\*</sup>
- Thin, rounded PtCr struts<sup>2</sup>

### Patients are Unique. Shorten DAPT with Confidence.

We know every patient needs individualized care. Boston Scientific is leading the way in supporting short DAPT studies with SYNERGY in a variety of patient populations and DAPT durations.

**0-Month**  
in stable patients<sup>3</sup>  
➤ **ASET**

**1-Month**  
in HBR patients<sup>4</sup>  
➤ **POEM**

**1-Month**  
in elderly patients<sup>5</sup>  
➤ **SENIOR**

**3-Month**  
in HBR patients<sup>6</sup>  
➤ **EVOLVE Short DAPT**

**4-Month**  
in Left Main PCI<sup>7</sup>  
➤ **IDEAL Left Main**

\* The polymer is gone when no longer needed. The everolimus drug is fully eluted after 3 months and the PLGA polymer is fully absorbed 1 month later.

Freedom from  
Long-Term  
Polymer Exposure

## ➤ Proven in Complex Cases

The SYNERGY Stent Platform has been studied and indicated across various patient and lesion complexities, addressing the full spectrum of cardiovascular disease complexity.



- Studied in 35k+ patients
- Consistently low ST and TLF rates out to 5 years<sup>8</sup>

1 Wilson GJ, et al. The SYNERGY biodegradable polymer everolimus-eluting coronary stent: Porcine vascular compatibility and polymer safety study. Catheter Cardiovas Interv. 2015; 86:E247-E257.

2 Soucy N, Feygin J et al. EuroIntervention. 2010 Nov;6(5):630-7.

3 Kogame N, et al. Aspirin-Free Prasugrel Monotherapy Following Coronary Artery Stenting in Patients With Stable CAD. J Am Coll Cardiol Interv. 2020 Oct;13(19):2251-2262. <https://doi.org/10.1016/j.jcin.2020.06.023>

4 Pivato CA, et al. J Am Heart Assoc. 2022;11:e023454. DOI:10.1161/JAHA.121.023454

5 Varenne, O et al. Drug-eluting stents in elderly patients with coronary artery disease (SENIOR): a randomised single-blind trial. The Lancet. 2017 Nov;1 [https://doi.org/10.1016/S0140-6736\(17\)32713-7](https://doi.org/10.1016/S0140-6736(17)32713-7)

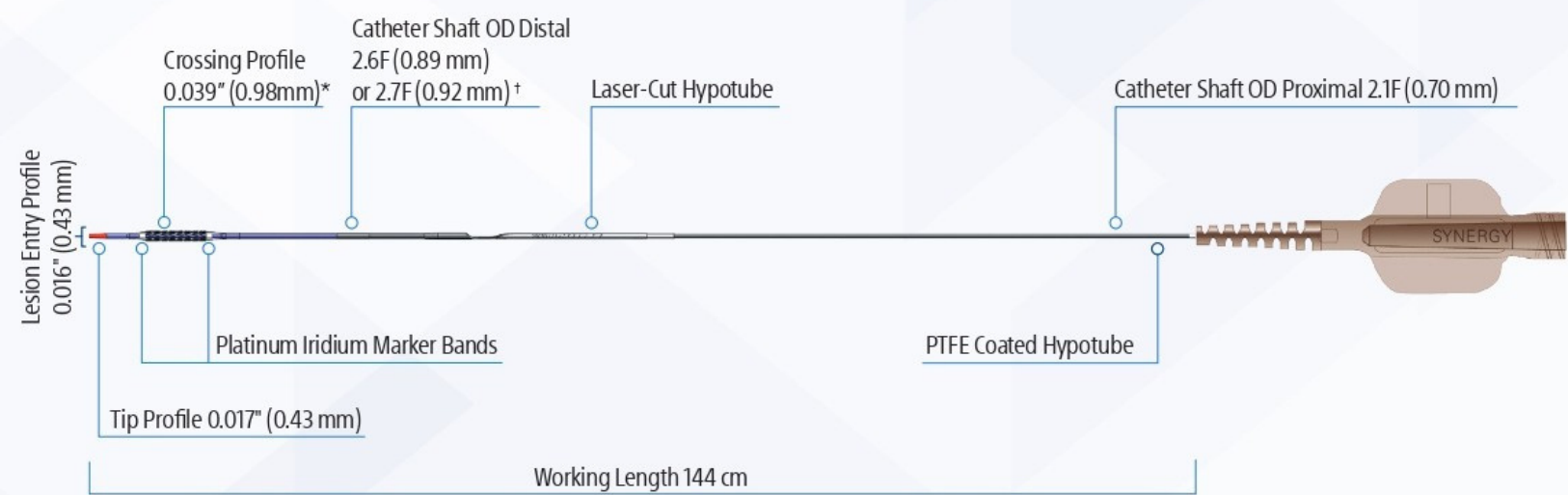
6 Kirtane, A.J. et al. Primary Results of the EVOLVE Short DAPT Study. Circulation: Cardiovascular Interventions. 2021 Mar, 14:e010144 <https://doi.org/10.1161/CIRCINTERVENTIONS.120.010144>

7 Van Geuns, R.J. et al. Bioabsorbable polymer drug-eluting stents with 4-month dual antiplatelet therapy versus durable polymer drug-eluting stents with 12-month dual antiplatelet therapy in patients with left main coronary artery disease: the IDEAL-LM randomised trial. EuroIntervention, 2022 Mar DOI: 10.4244/EU-D-21-00514

8 Meredith, I.T. et al. Final five-year clinical outcomes in the EVOLVE trial: a randomised evaluation of a novel bioabsorbable polymer-coated, everolimus-eluting stent. EuroIntervention, 2018;13:2047-2050 DOI: 10.4244/EU-D-17-00529

# Ordering Information

| Stent Length (mm) |                |                |                |                |                |                |                |                |                | Overexpansion Capabilities |
|-------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------------------|
| Ø (mm)            | 8              | 12             | 16             | 20             | 24             | 28             | 32             | 38             | 48             |                            |
| 2.25              | H7493966608220 | H7493966612220 | H7493966616220 | H7493966620220 | H7493966624220 | H7493966628220 | H7493966632220 | H7493966638220 |                | 3.50                       |
| 2.50              | H7493966608250 | H7493966612250 | H7493966616250 | H7493966620250 | H7493966624250 | H7493966628250 | H7493966632250 | H7493966638250 | H7493966648250 | 3.50                       |
| 2.75              | H7493966608270 | H7493966612270 | H7493966616270 | H7493966620270 | H7493966624270 | H7493966628270 | H7493966632270 | H7493966638270 | H7493966648270 | 3.50                       |
| 3.00              | H7493966608300 | H7493966612300 | H7493966616300 | H7493966620300 | H7493966624300 | H7493966628300 | H7493966632300 | H7493966638300 | H7493966648300 | 4.25                       |
| 3.50              | H7493966608350 | H7493966612350 | H7493966616350 | H7493966620350 | H7493966624350 | H7493966628350 | H7493966632350 | H7493966638350 | H7493966648350 | 4.25                       |
| 4.00              | H7493966608400 | H7493966612400 | H7493966616400 | H7493966620400 | H7493966624400 | H7493966628400 | H7493966632400 | H7493966638400 | H7493966648400 | 5.75                       |
| 4.50              |                | H7493966612450 | H7493966616450 | H7493966620450 | H7493966624450 | H7493966628450 | H7493966632450 |                |                | 5.75                       |
| 5.00              |                | H7493966612500 | H7493966616500 | H7493966620500 | H7493966624500 | H7493966628500 | H7493966632500 |                |                | 5.75                       |



\* Measurement applies to the 2.50 mm diameter stent system.  
† Dependent on diameter and length.

CAUTION: The law restricts these devices to sale by or on the order of physician. Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device. products shown for INFORMATION purposes only and may not be approved or for sale in certain countries. This material not intended for use in France. 2023 Copyright © Boston Scientific Corporation or its affiliate. All rights reserved.

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