PHILIPS

iFR ***Co-registration***

Technology

Decide not just whether to treat, **but where to treat**

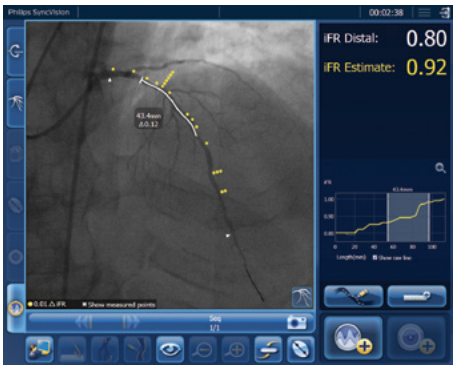
With iFR Co-registration there is no need for hyperemic drugs, no need for time consuming pullback devices and no need for guesswork. Available on the Philips IntraSight interventional applications platform.*

- Quickly identify locations of iFR drops to better understand diffuse vs. focal disease
- Plan your procedure with physiology and determine the potential impact of treatment on the patient's ischemia

See clearly

Understand focal versus diffuse disease. iFR Co-registration graphically displays the iFR drop along the angiogram, highlighting which portion of the vessel is ischemic.

Focal disease



Diffuse disease

Treat optimally

iFR Co-registration is calibrated for distance, so with a simple manual pullback you can make measurements on the angiogram and trend line.

Click and drag to quickly understand the potential impact of a stent on the patient's ischemia by reviewing the iFR estimate.

iFR has proven patient outcomes[1,2]

More than **4500** patients

2 prospective randomized controlled trials

Published in **The New England Journal of Medicine**

- An iFR-guided strategy is statistically comparable to an FFR-guided strategy for patient outcomes
- DEFINE FLAIR reported 1 year MACE rate of 6.8% in iFR arm, compared to 7.0% in FFR arm, p=0.003 (for non-inferiority)[1]
- iFR Swedeheart reported 1 year MACE rate of 6.7% in iFR arm, compared to 6.1% in FFR arm, p=0.007 (for non-inferiority)[2]

*Co-registration tools available within IntraSight 7 configuration via SyncVision

1. Davies JE, et al., Use of the Instantaneous Wave-free Ratio or Fractional Flow Reserve in PCI. N Engl J Med. 2017 May 11;376(19):1824-1834.
2. Gotberg M, et al., iFR-SWEDEHEART Investigators. Instantaneous Wave-free Ratio versus Fractional Flow Reserve to Guide PCI. N Engl J Med. 2017 May 11;37 (19):1813-18233.

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