

**PHILIPS**

**iFR**

Modality



Proven outcomes.<sup>1,2,3</sup>  
**Superior value.**<sup>1,2</sup>

# Proven outcomes.

More than  
**4500**  
patients

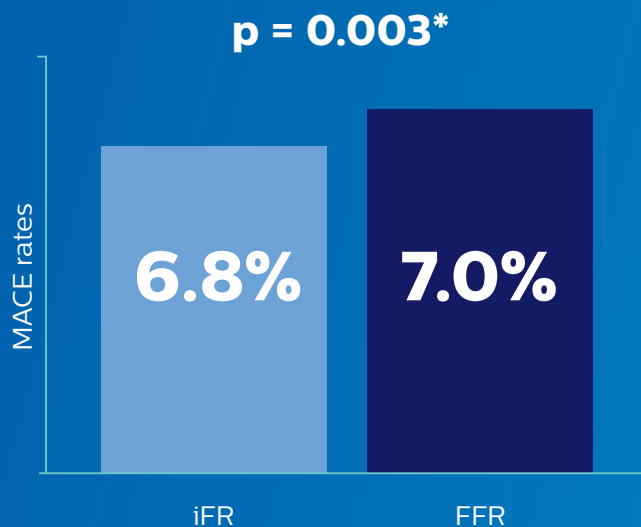
**2**  
prospective  
randomized  
controlled trials

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

**Consistent** patient outcomes using iFR guided strategy, as with FFR

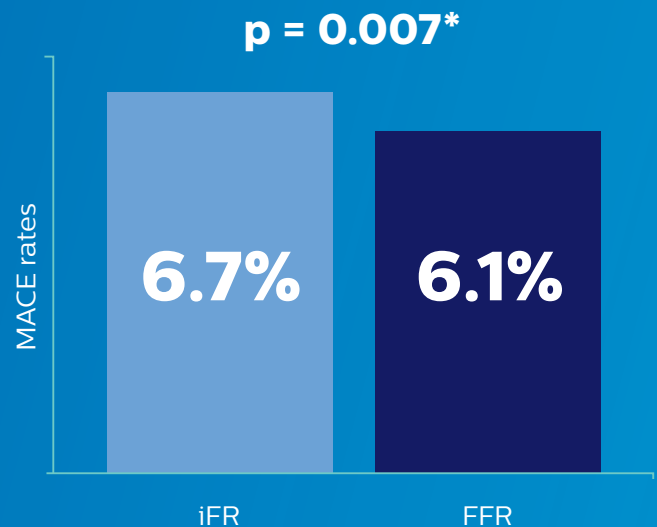
## DEFINE FLAIR

One year outcome results



## iFR Swedeheart

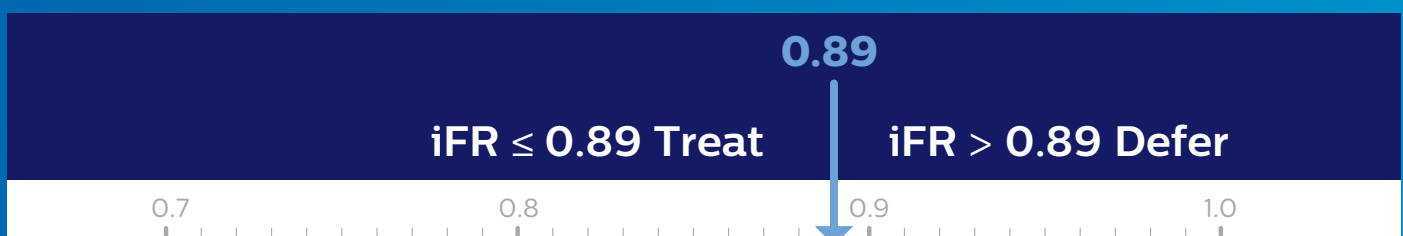
One year outcome results



\* p-values are for non-inferiority of an iFR-guided strategy versus an FFR-guided strategy with respect to 1-year MACE rates; pre-specified non-inferiority margins were 3.4% and 3.2% in DEFINE FLAIR and iFR Swedeheart, respectively

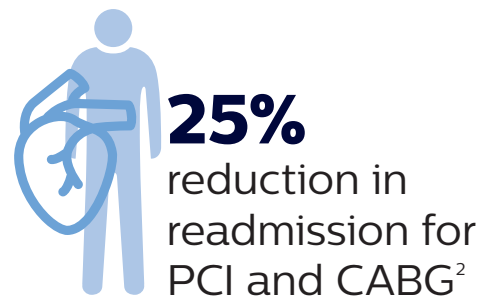
**A single dichotomous cut point, backed by data<sup>1,3,4</sup>**

- 0.89 iFR cut-point, backed by data



# Superior value.<sup>1,2</sup>

## Reduced costs per patient

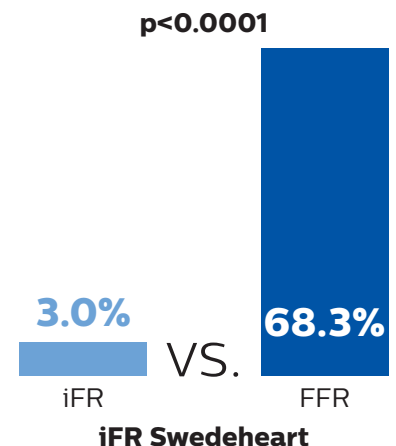
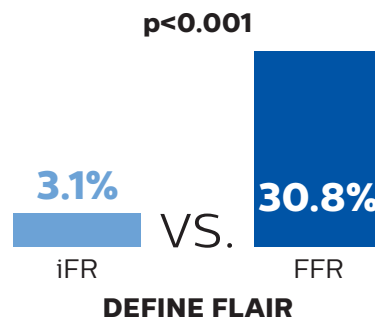


## Improved patient experience

iFR Swedeheart reported that with no hyperemic agent, you can achieve a

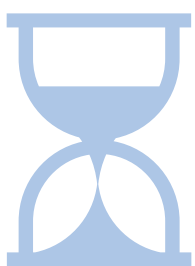
**95.7% reduction**

in patient discomfort using an iFR-guided strategy



DEFINE FLAIR reported a **90% reduction** in patient discomfort

## Less procedural time



**10% reduction**

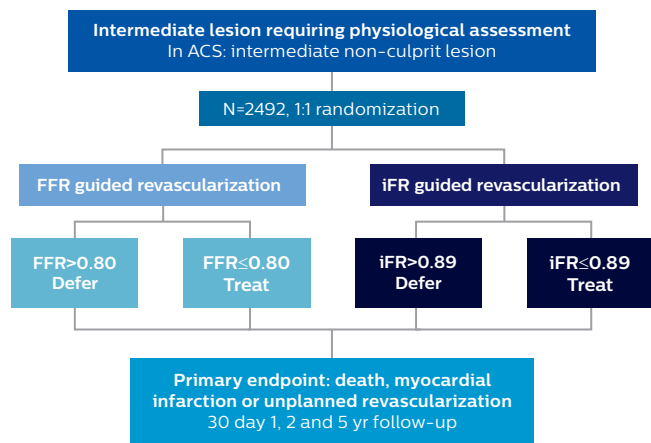
in procedure time using an iFR-guided strategy  
[p<0.01]



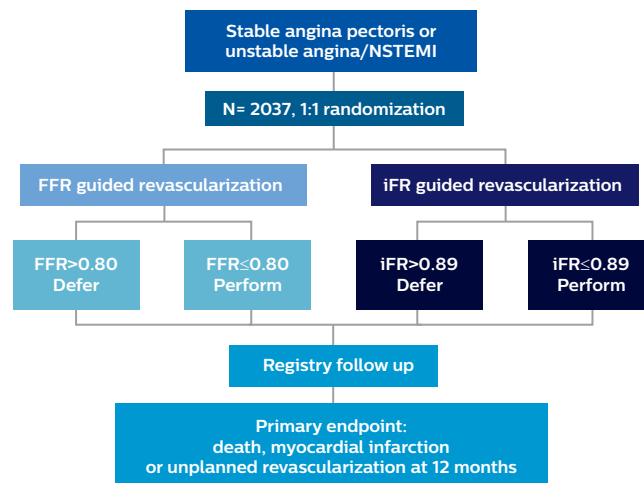
DEFINE FLAIR procedural time:  
**40.5 minutes** [iFR arm]  
vs. **45.0 minutes** [FFR arm]  
[p<0.001]

**Philips is dedicated to the advancement of physiology guided PCI.** Since the introduction of hyperemia-free iFR modality in 2014, iFR has been studied in nearly 15,000 patients and used in over 4,000 cath labs around the world.<sup>5</sup>

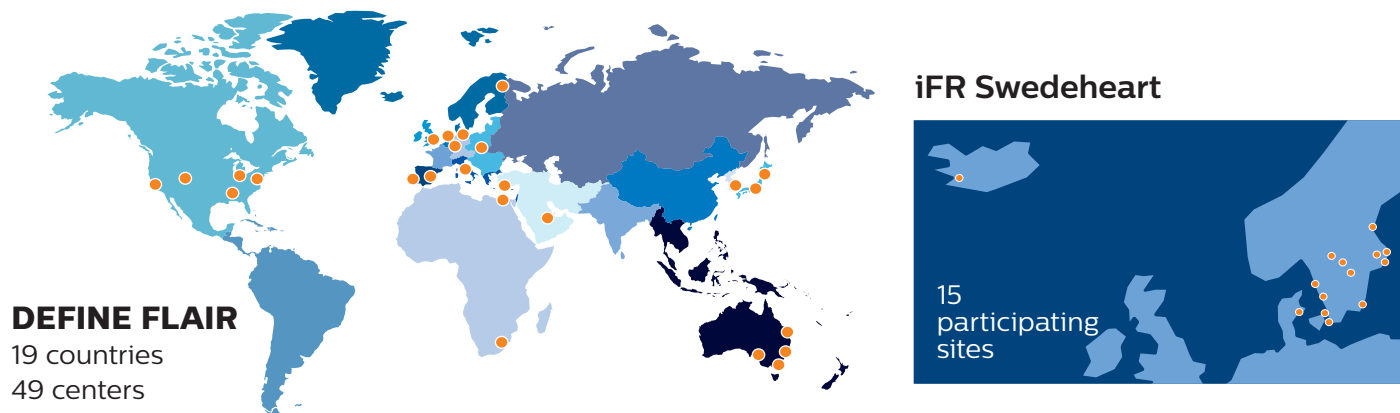
## DEFINE FLAIR



## iFR Swedeheart



## First two global studies of physiology



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. Patel M. "Cost-effectiveness of instantaneous wave-Free Ratio (iFR) compared with Fractional Flow Reserve (FFR) to guide coronary revascularization decision-making." Late-breaking Clinical Trial presentation at ACC on March 10, 2018.
3. 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;376(19):1813-18233.
4. An iFR cut-point of 0.89 matches best with an FFR ischemic cut-point of 0.80 with a specificity of 87.8% and sensitivity of 73.0%. (From ADVISE II, and iFR Operator's Manual 505-0101.23).
5. Data on file at Philips.

