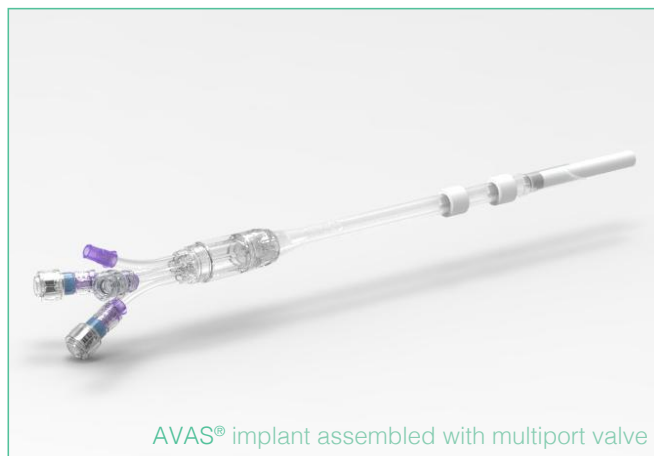


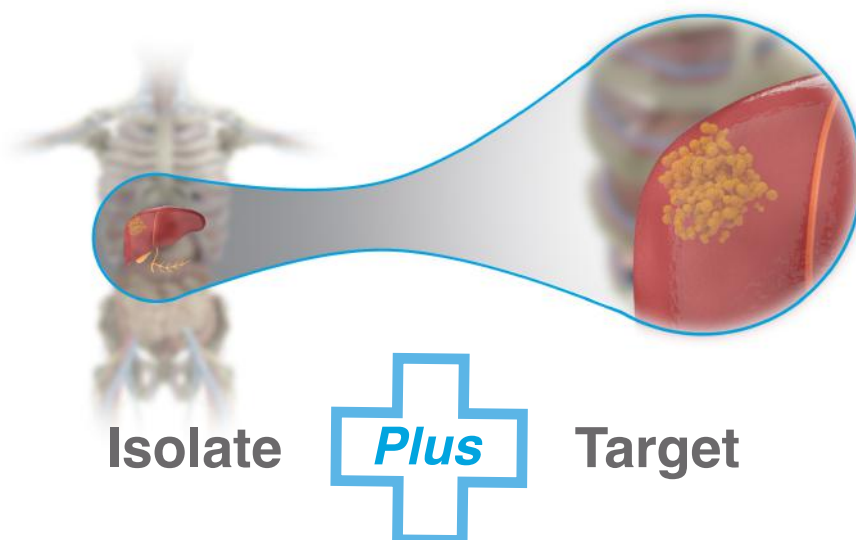
AVAS[®] — a new approach to the targeted delivery of chemotherapy

A major challenge in treating colorectal liver metastases is to deliver therapeutic doses of chemotherapy to tumour sites, preserve healthy cells and minimize chemotherapy induced side effects.

The AVAS[®] device aims to meet this challenge by enabling isolation of the liver and the direct intra-arterial infusion of chemotherapy such as oxaliplatin to the isolated liver.



How does AVAS[®] work?



AVAS[®] is an implantable arterial access device that facilitates frequent and repeated intra-vascular access over a period of 29 days.

The AVAS[®] Multiport Valve feature facilitates the simultaneous introduction of multiple balloon catheters to isolate, target and infuse chemotherapy, such as oxaliplatin directly to the liver.

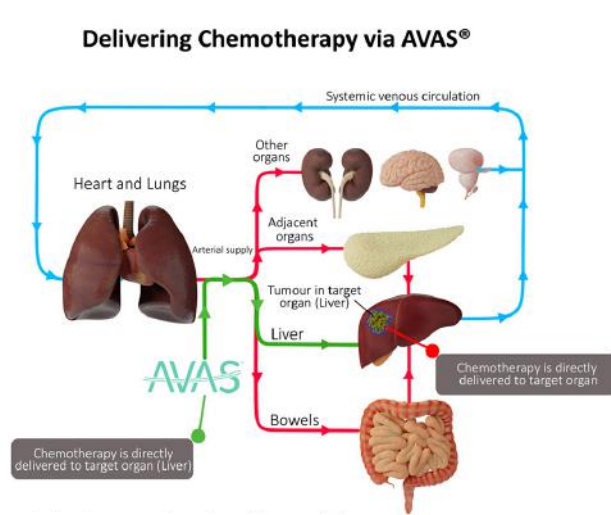
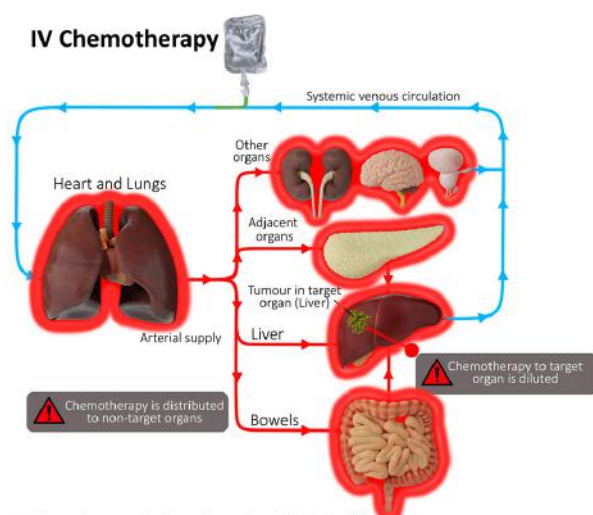
The oxaliplatin is held within the isolated liver for up to 20 minutes. This localises the oxaliplatin to the region of the tumours.

Addressing the challenge of IV chemotherapy

In the treatment of colorectal liver metastases, the intravenous (IV) route is the standard pathway of delivering chemotherapy to tumours. The chemotherapy circulates the entire body. As well as killing cancer cells, it damages healthy cells causing systemic side effects e.g. nausea, peripheral neuropathy and immunosuppression.

Intra-arterial chemotherapy using AVAS® offers an alternative approach to delivering chemotherapy.

The advantage of AVAS® is the ability to isolate and target the liver.



Intravenous delivery (IV) of chemotherapy

- This *non-targeted delivery approach* results in a dilution of dose reaching the liver as the chemotherapy circulates the entire body.
- Systemic circulation result in side effects that can cause treatment delays, dose reductions and termination of treatment.

Intra-arterial chemotherapy delivery via AVAS®

- This *targeted delivery approach* achieves a high focal dose of chemotherapy reaching the liver tumours.
- Reduction in treatment time of up to 60% for patients was achieved in a pilot study by Lane et al using AVAS®.¹

AVAS® benefits

- Targeted delivery of chemotherapy using AVAS® has demonstrated fewer side effects and improved tolerance to the treatment.¹
- Improved patient tolerance allows for more frequent treatment sessions over a shorter period.¹

Reference:

1. Rodney J. Lane, Nyan Y. Khin, Chris M. Rogan, John Magnussen, Nick Pavlakis, David M. Lane and Stephen Clarke. Safety and Feasibility of Repeatable Hepatic Vascular Isolation Chemotherapy: A Pilot Study. Ann Surg Oncol DOI 10.1245/s10434-016-5198-z

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