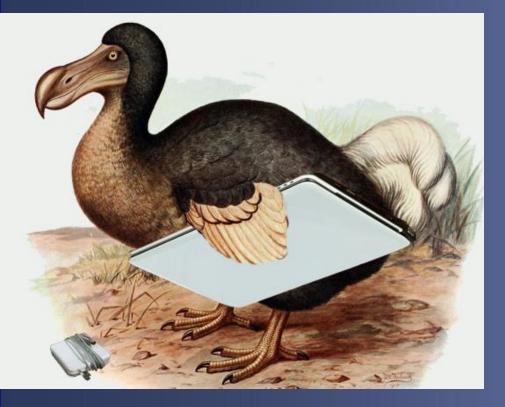
New Technology From Bench to Clinical Practice

Alexandra J Lansky, MD

Yale University School of Medicine University College of London



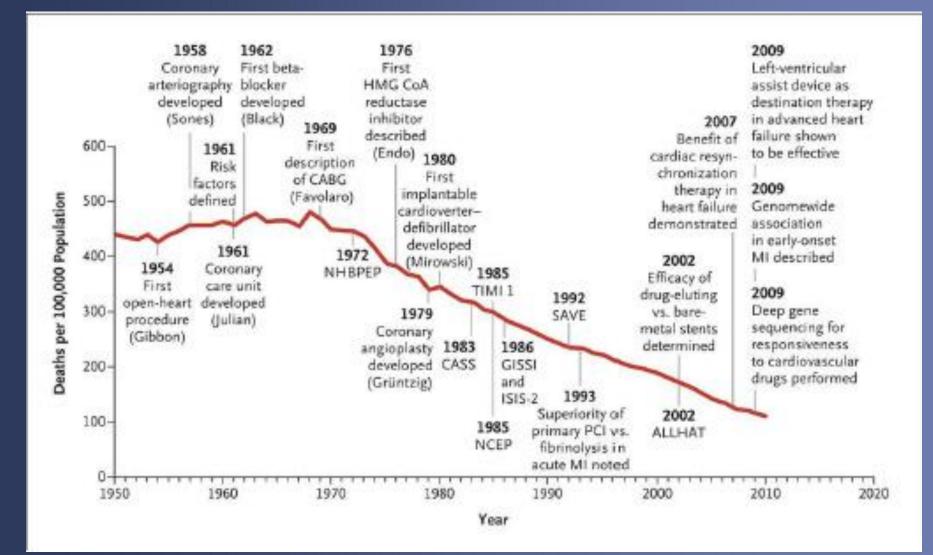
Innovation is inevitable... Do you want to part of it?



It is not the strongest species that survives, nor the most intelligent, but rather the one most adaptable to change. ---- Charles Darwin



Decline in CV mortality relative to Scientific Advances





Medical Innovation

30 yrs of iterative AMI therapies

- progressive improvements in "core" product performance
- incremental (continuous) or radical (discontinuous)
- comprises most
 technology advances

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Sustaining Technologies Technology Progress

 <10 yrs of breakthrough TAVI therapy
 new market applications
 with improved performance, rapidly supplants standard conventional technology
 more risky, but can change treatment paradigms

Disruptive Technologies

Christensen CM; The Innovators Dilemma, 1997



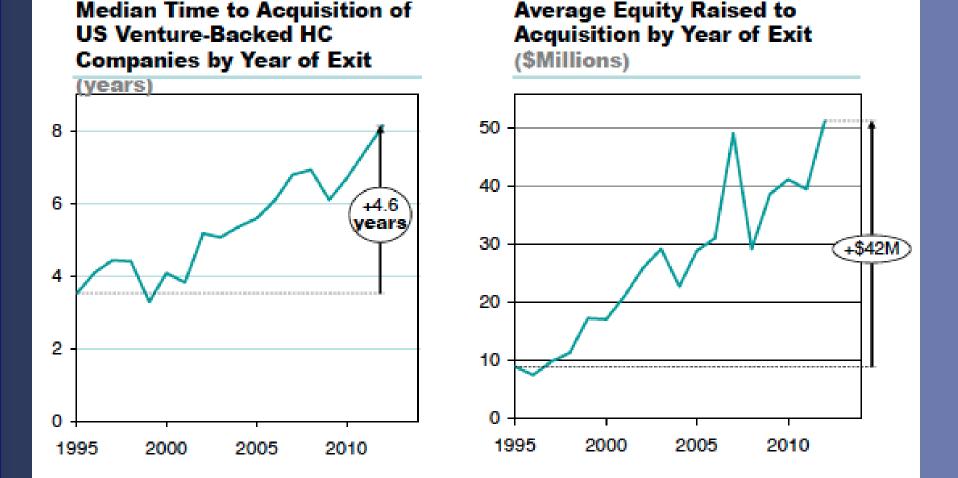
Medical Device Development Costs have Increased...

- Greater Evidence Requirements
 - Regulatory pathway; Reimbursement, Physicians, Patients
- Greater Emphasis on Safety
 - More Bench testing
 - More Preclinical Testing
 - Larger Clinical trials, better outcomes

Greater Emphasis on Economic Benefit
 YCRG
 National or 3rd party Payers
 Yale Cardiovascular Research Group



Time and Cost to Build Companies has Grown Time to exit VC backed device co has doubled at 4x investment



VentureSource; August 2012

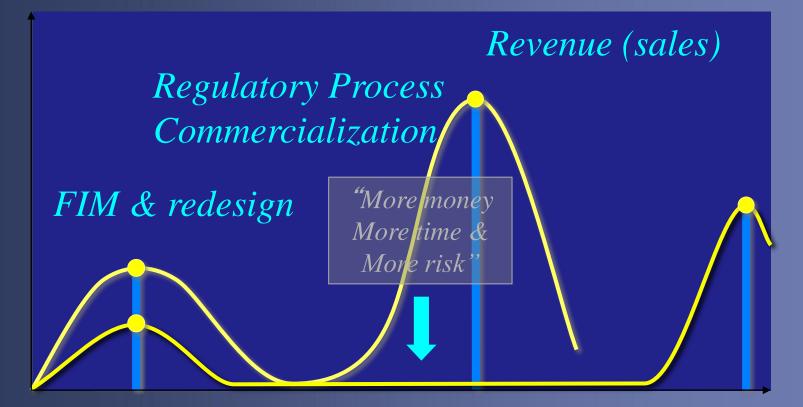
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Medical Device Cycle

Changing Landscape



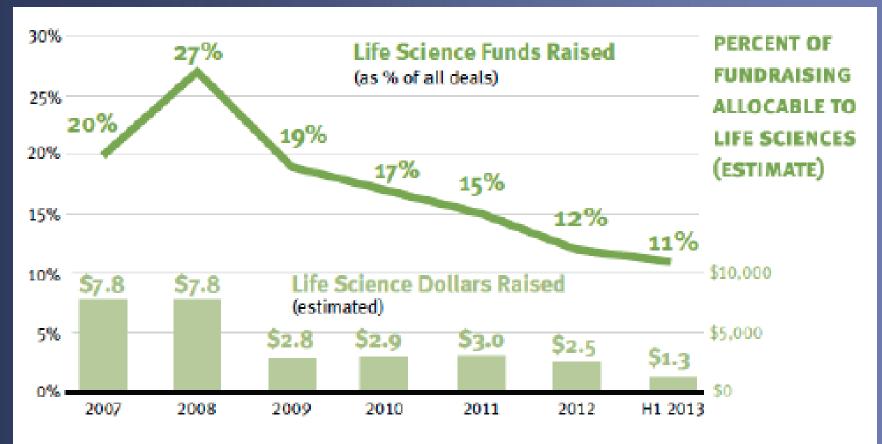
Time

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Revenue/Value



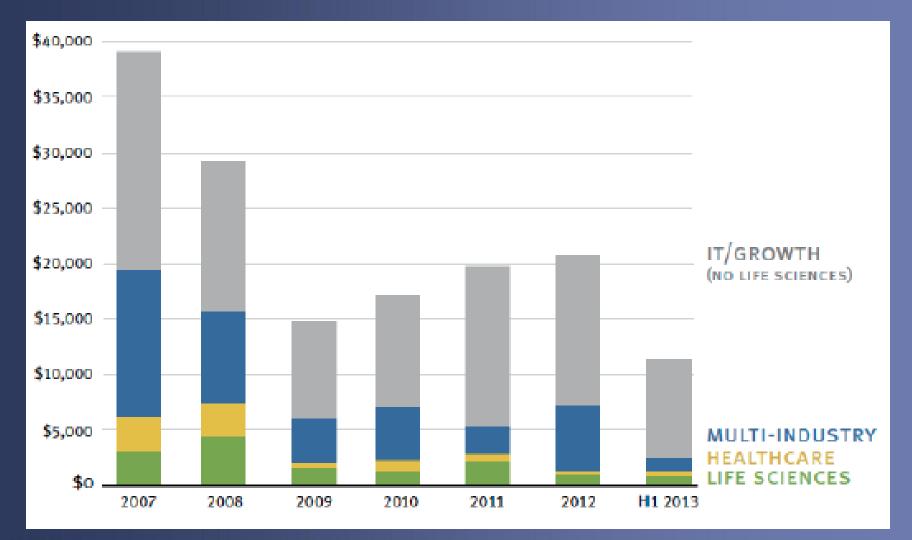
LifeScience VC Funds Trends



Source: Dow Jones; Fenwick & West Analysis



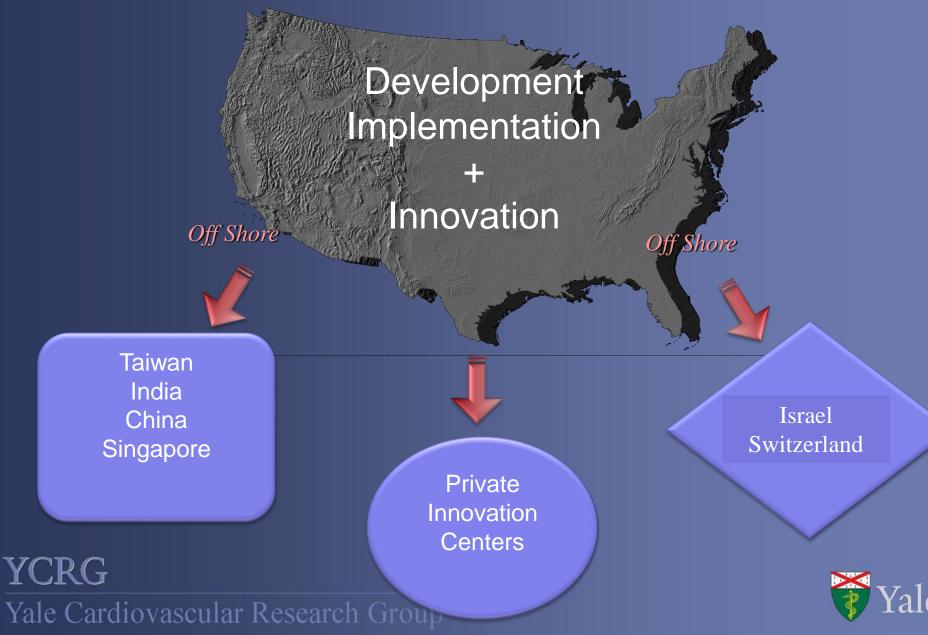
VC Fundraising by Sector



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MedTech of the past

MedTech of today

- Technology that improved healthcare
- Focused on the physician as the decision maker
- Good margins supporting R&D and sales
- Funding of internal high risk R&D
- Early stage investments in external high risk technologies
- Venture money readily available

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- Decreases in reimbursement rates
- Hospital best pricing, "Bundling"
- Restricted use of premium devices
- "Finding efficiencies", "Restructuring", "reducing risk"
- Modest early stage organic R&D investment
- Less investment in early stage companies
- Less venture money available



The Game Has Changed....



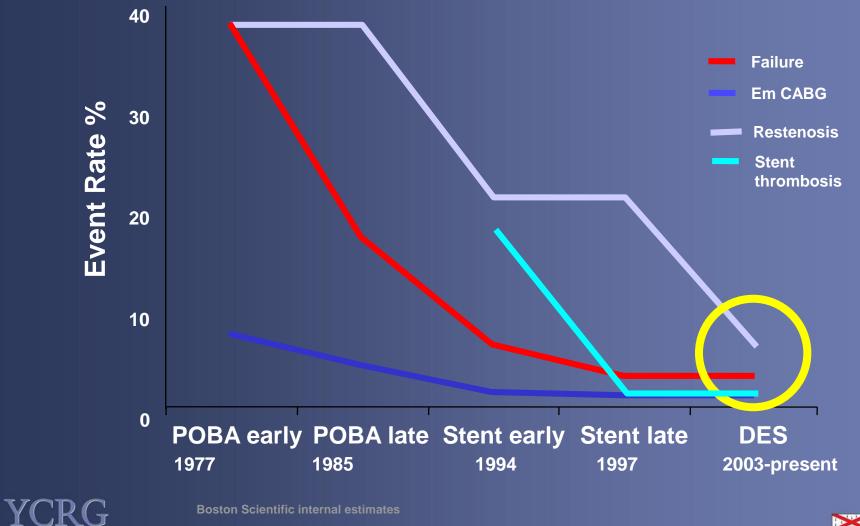
"its not good enough to be better. You must be cheaper



Some Procedural Trends...

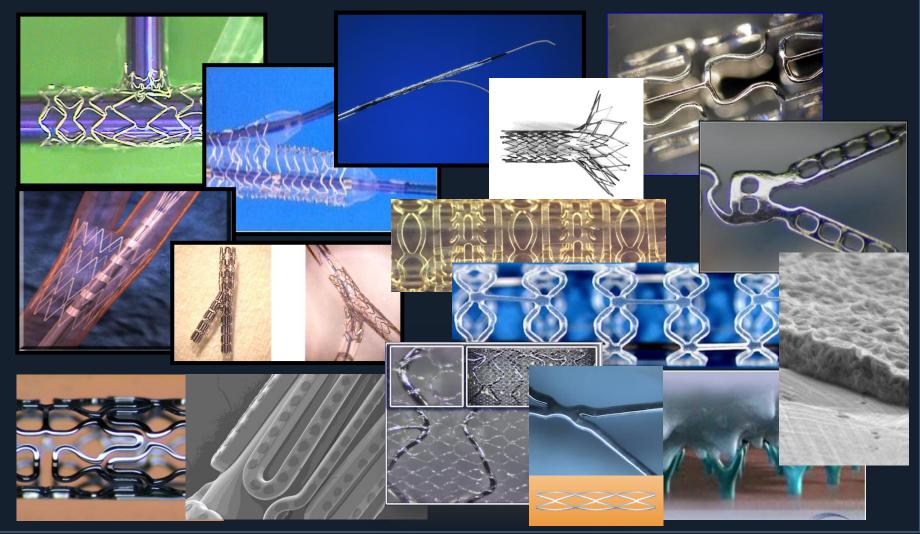


PCI: Incremental Improvements



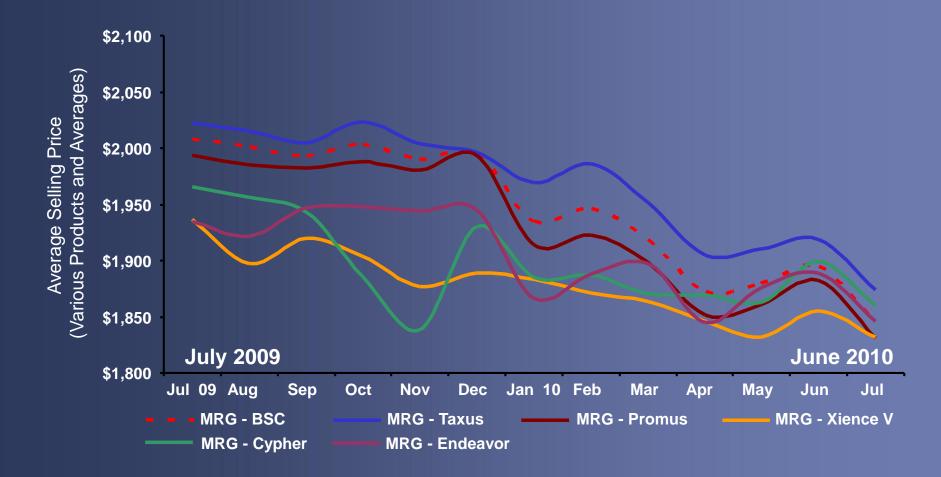


The DES Technology Explosion





DES Average Selling Price (US) Price Erosion



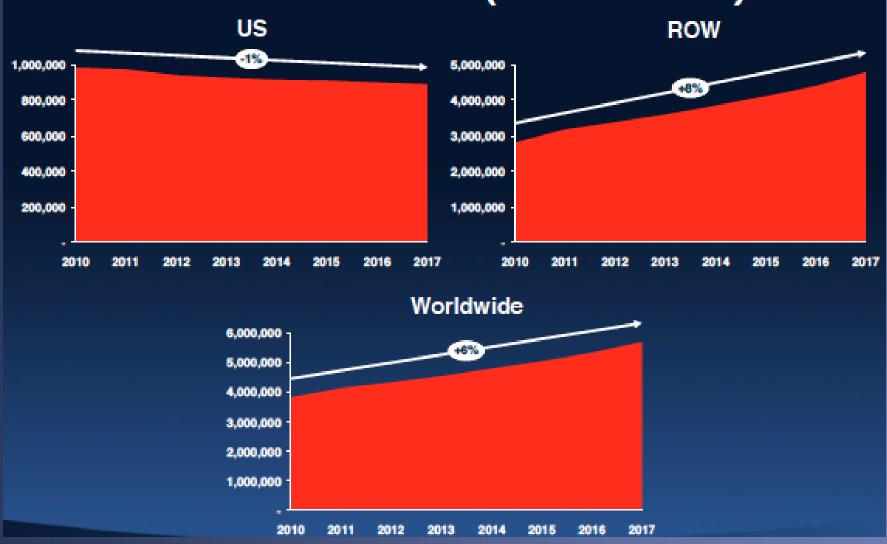
Boston Scientific Internal Estimates

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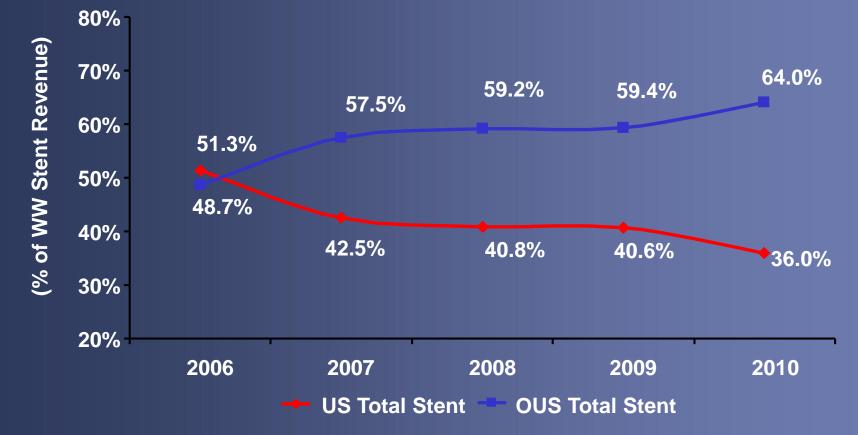
🏹 Yale

PCI Procedures (20010-2017)





World Wide Stent Market (DES + BMS) Revenue



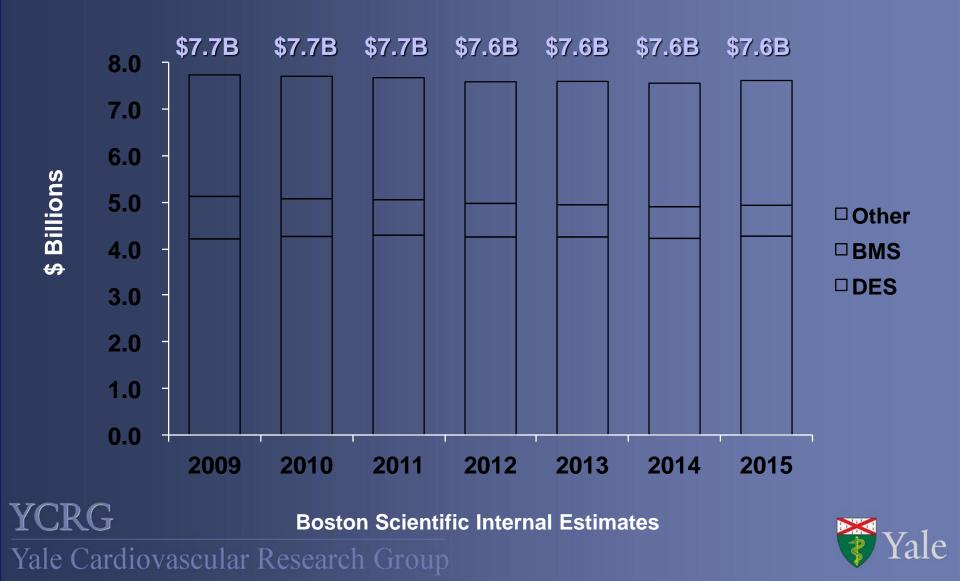
Sources: MRG Synergy, MRG Marketrack, Earnings Calls, Industry sources



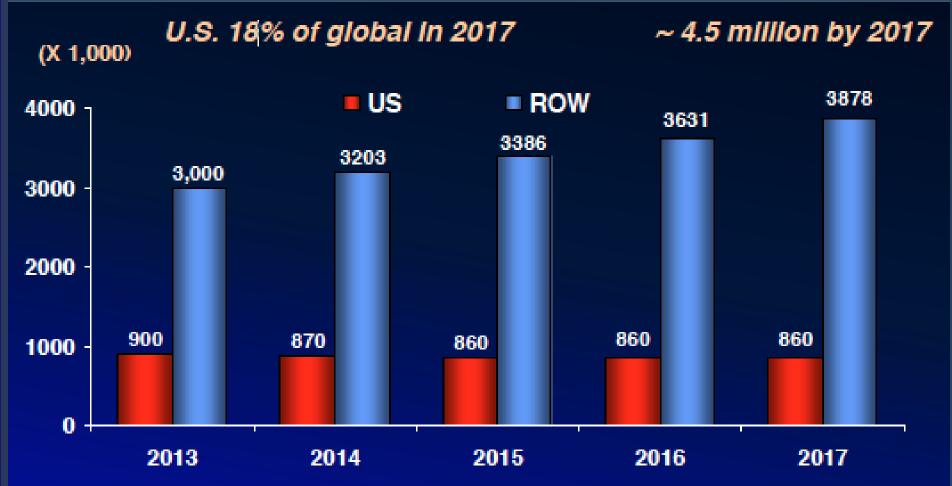
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IC WW Market Revenues Static



PCI Procedures Growth from 2013 - 2017



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PCI Revenue (\$ millions) Growth from 2013 - 2017

U.S. 23% of global in 2017 ~ \$6.3 billion by 2017 (\$ millions) ROW 5000 -1000 -

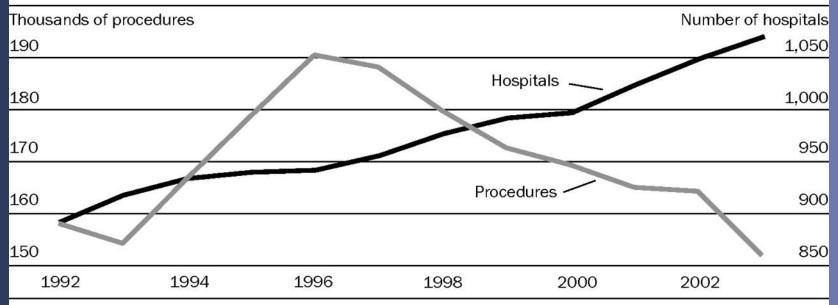
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Annual Number Of Coronary Artery Bypass Graft (CABG) Procedures And Number Of Hospitals Performing CABG In The United States, 1992–2003.

EXHIBIT 1

Annual Number Of Coronary Artery Bypass Graft (CABG) Procedures And Number Of Hospitals Performing CABG In The United States, 1992–2003



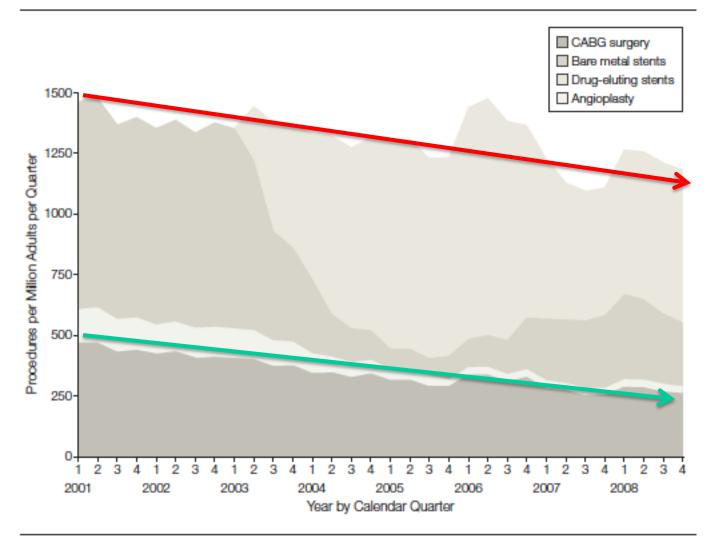
SOURCE: Authors' analysis based on Medicare data.

NOTES: The number of CABG procedures are the total number of Medicare CABG claims submitted every year during the period of the analysis nationwide. The number of CABG hospitals are all hospitals performing Medicare CABG during the year. Number of procedures relates to the left y axis and is shown by the gray line; number of hospitals relates to the right y axis and is shown by the gray line; number of hospitals relates to the right.

Wilson C T et al. Health Aff 2007;26:162-168



Figure 1. Revascularization Procedure Rates of CABG Surgery, Bare Metal Stents, Drug-Eluting Stents, and Angioplasty per Million Adults per Quarter Between 2001 and 2008

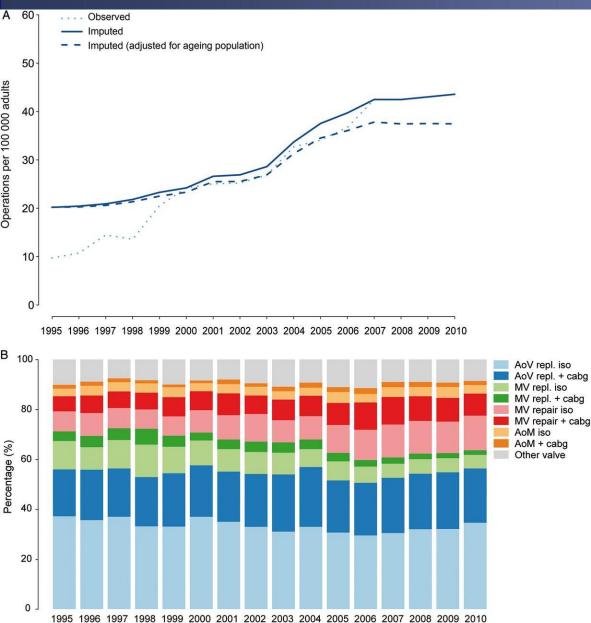


CABG indicates coronary artery bypass graft.

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Annual number and distribution of type of valve surgery from 1995 to 2010 in Netherlands.



Siregar S et al. Eur J Cardiothorac Surg 2014;46:386-397



The New Innovation Ecosystem

- Healthcare cost challenges continue to increase
- Regulatory and clinical expectations continue to increase, increasing cost
- More involved and informed patients increase expectations
- Reduced investment risk taking
- Greater emphasis on cost effectiveness





Doom and Gloom?

Catalyst for Change! New Opportunities



The New Challenge is Cost Effectiveness...



- Reduce hospitalization stays
- Reduce complications in hospital
 - Facilitate conversion from in/out pt. Rx
 - Reduce readmissions
- Improve patient compliance

The Goal: Same day discharge after major cardiac procedure... and eternal life! YCRG Yale Cardiovascular Research Group



Understanding Macro Trends to Focus R&D Efforts

Value-Based Healthcare

Trend toward value-oriented healthcare means companies need to focus on creating value for the customer and related stakeholders

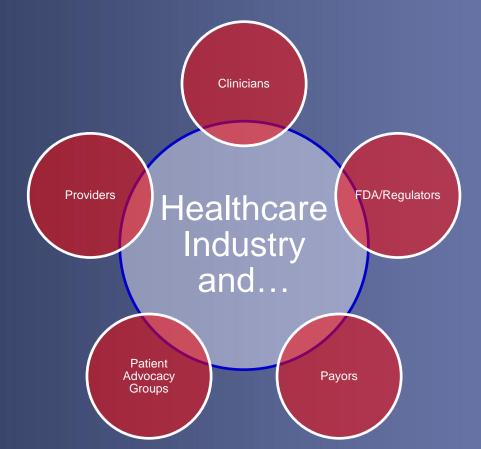
Delivering Complete Solutions

As a result, R&D efforts and collaborations are focused more on **providing a complete service or solution** and less on a new breakthrough product

Patients, Physicians, Payors and other stakeholders are becoming more sophisticated, requiring R&D groups to find ways to innovate in ways that address these needs

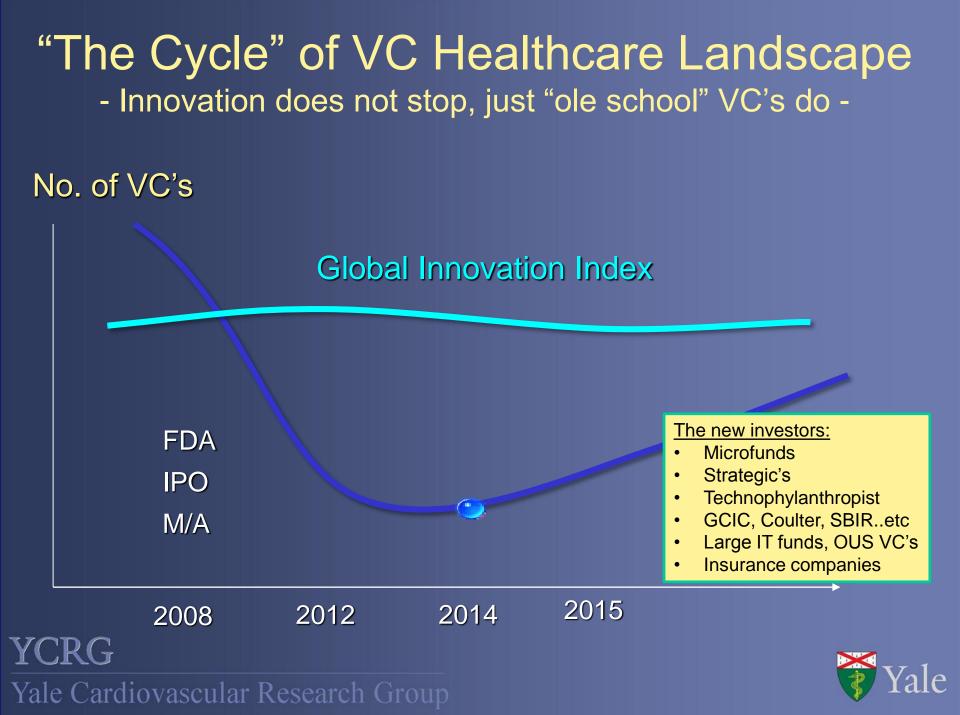


Future Will Demand More Up-Front Collaboration Between a Range of Stakeholders

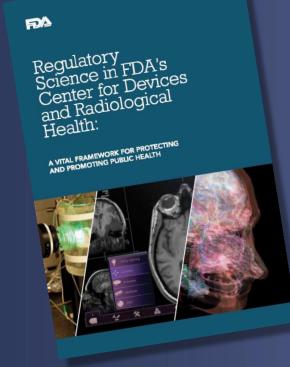


We must ensure we keep the channels of communication open and supportive in order to harmonize requirements and continue bringing innovative products to the marketplace





FDA Enlightenment Regulatory Science



FDA Strategic Plan, August 2011 Advancing Regulatory Science at FDA

The science of developing new tools, standards, and approaches to assess the safety, efficacy, quality, and performance of FDA-regulated products

- Benefits patients by speeding the rate of important technologies reaching market
- Reduces time and resources needed for device development, assessment, and review. For example:
 - Can lead to quicker, more efficient device approvals
 - Can decrease the size and duration of pre-market clinical trials

Faster, Safer, More Cost-effective

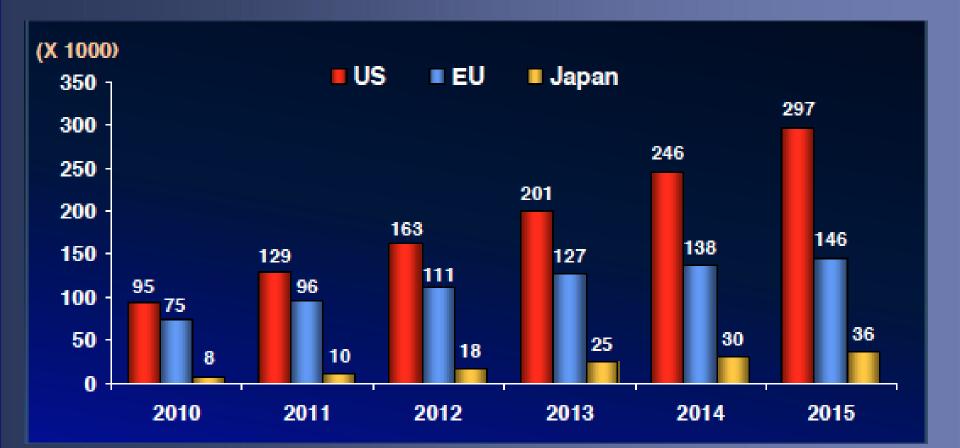
🏹 Yale

New Innovation Opportunities

Areas of Growth

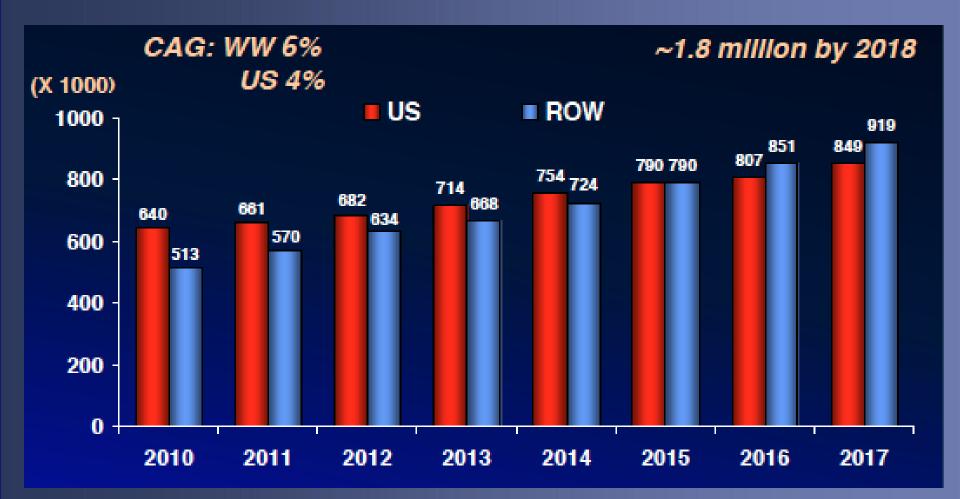


Invasive FFR Procedures Growth from 2010 - 2017





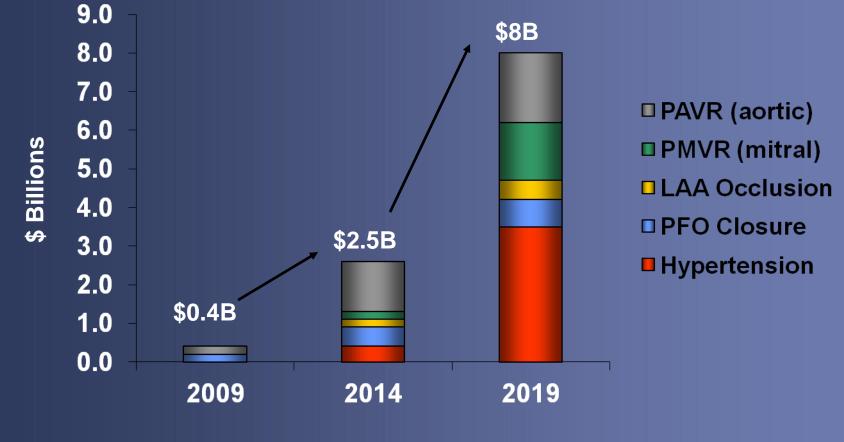
Peripheral Vascular Procedures Growth from 2010 - 2017



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The Future Growth of IC Markets Driven by New Segments



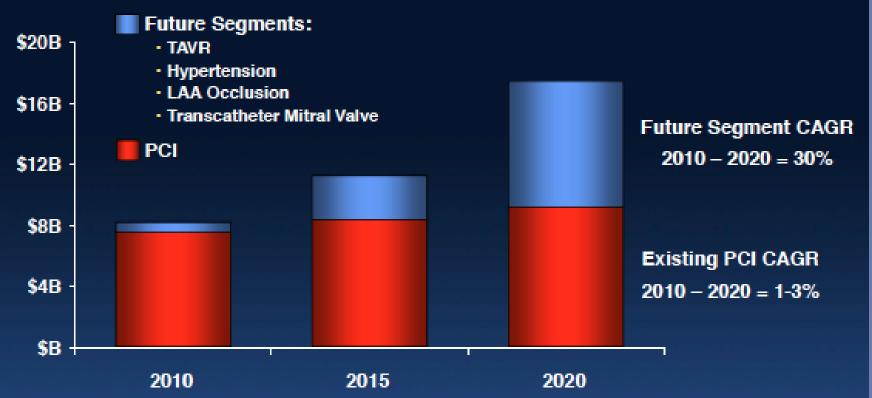
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WW Cardiology Market Trends

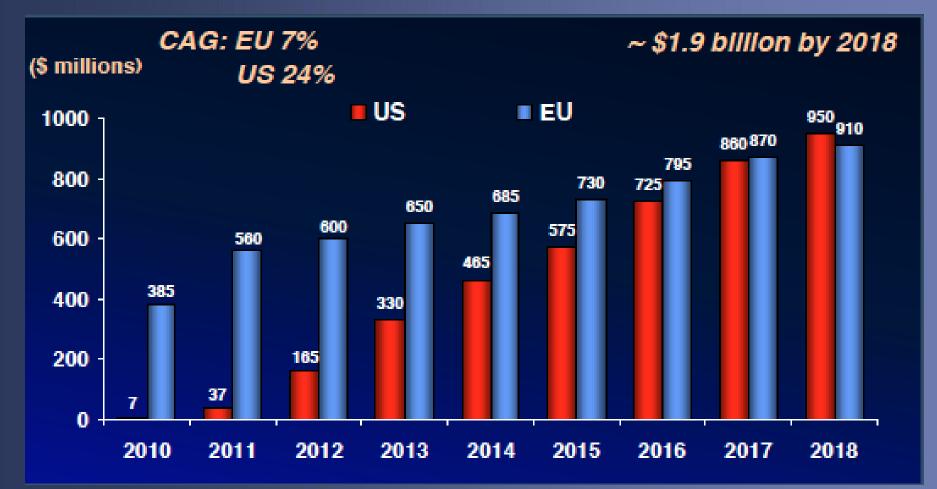


- New market segments may exceed PCI market size by 2020
- Emergence of future segments relies on technology and clinical data
- OUS markets will lead and exceed the size of US markets





TAVR Revenue (\$millions) Growth (2010-2018)

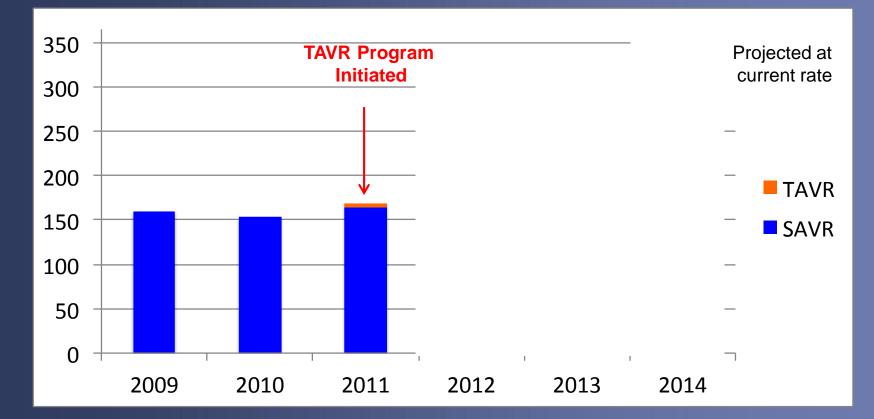


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Impact of TAVR on SAVR Volume at Yale

(Total SAVR: including SAVR only, CABG/SAVR, and SAVR + other valve)

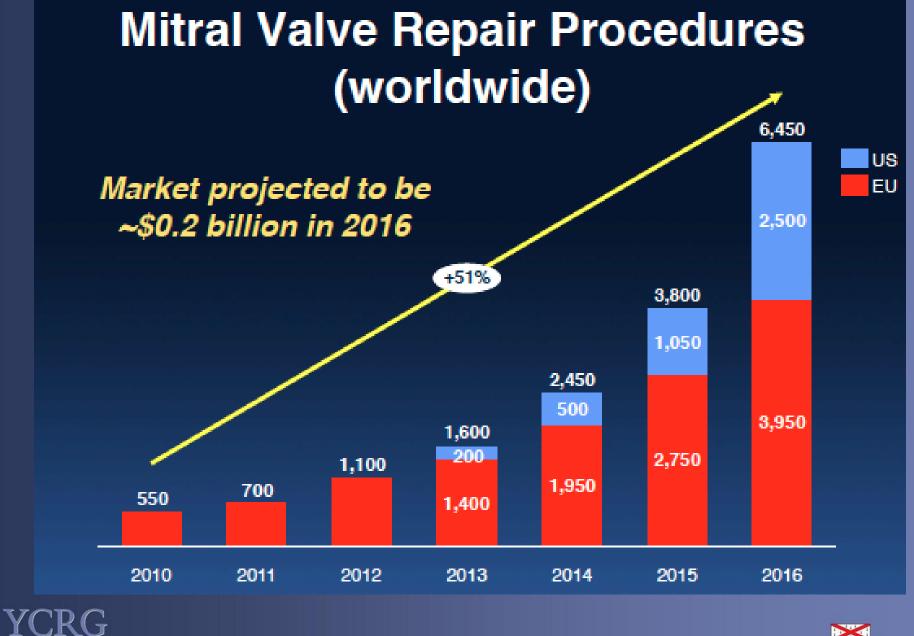


2013 represented over a 40% increase in total AVRs as compared to prior 3 year average

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Yale Cardiovascular Research Group

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Rules of Engagement: Heart Team



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Future Opportunities

Congestive Heart Failure



Heart Failure A Growing Global Concern

Prevalence and Incidence

- 5.1M US heart failure patients in 2010¹
- 15 M EU heart failure patients in the ESC 51-member countries²
 - Overall 2-3% prevalence²

Mortality

- For AHA/ACC stage C/D patients diagnosed with HF:
 - -30% will die in the first year. 3-5
 - 60% will die within 5 years.⁵

Readmission

- 25% at 30 days
- -50% at 6 months

HF prevalence in the US is projected to increase 46% from 2012 to 2030, resulting in > 8M people ≥ 18 years of age with HF.⁶

- YCRG₄₃ Yale Cardiovascular Research Group
- 1. AHA 2014 Statistics at a Glance, 2014
- 2. The European Society of Cardiology, ESC HF Guideline, 2008
- 3. Curtis et al, Arch Intern Med, 2008.
- 4. Roger et al. JAMA, 2004.
- 5. Cowie et al, EHJ, 2002.
- 6. Heidenreich PA et al. Circ Heart Failure 2013.



Next Big Breakthrough New CHF Therapies

- Sensors to monitor therapy
- LV remodeling devices
- Contractility Modulation
- Micro VADS
- Inter-atrial shunt implants





Percutaneous Ventricular Restoration



Treatment Goal

Improved hemodynamics by

- Partition scar
- LV Volume reduction
- LVED pressure redcution
- Restors LC Conical shape
- Preserves tortional contraction
- No arrhythmias



CardioMEMS[™] HF System

Simple PA artery implant Continous PA pressure monitoring (RF powered, no battery) PA measures transmitted to MD



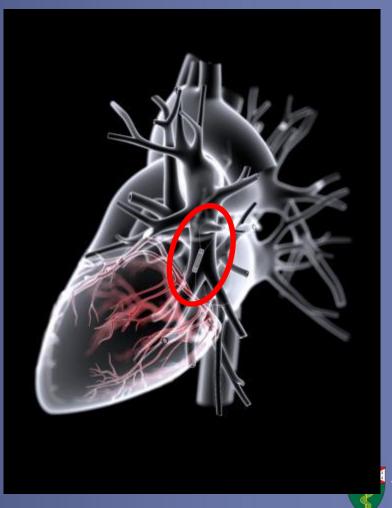
CHAMPION Trial 550 Randomized pts with HF

- 30% reduction in rehospital at 6 mos
- 38% reduction in hops over entire trial period

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Target location for pulmonary artery pressure sensor



Future Opportunities

Digital Healthcare

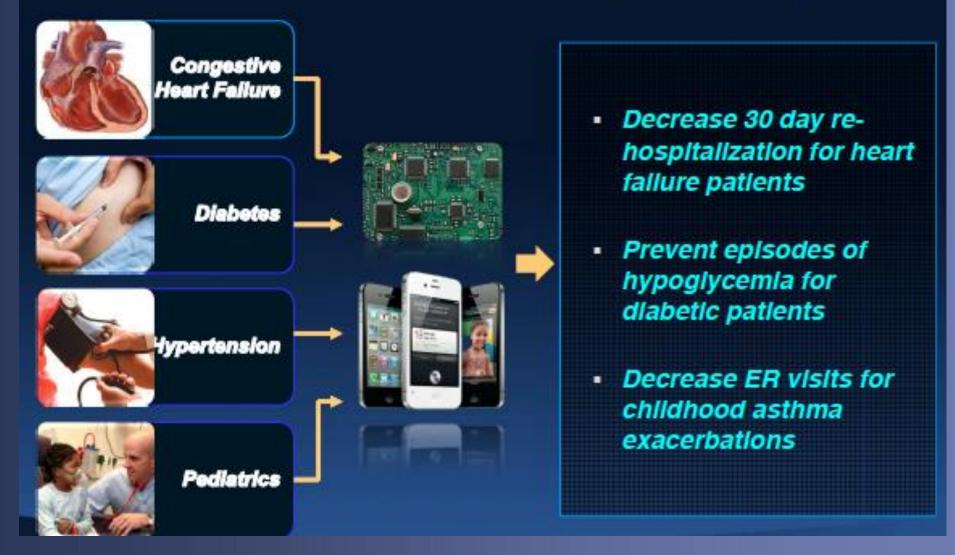


From Fitness to... Chronic Disease Management





Consumer Paths...will be patient paths





New Realities of Innovation

- Accept the fact that the innovation ecosystem has changed FOREVER – "Adapt and Evolve" embracing more minimally invasive therapies
- The physician scientist and academic community must re-organize emphasizing multi-disciplinary cooperation, better communication, and accept industry as welcome and indispensable partners driving innovation
- Regulatory hurdles –have become global (US, China, Japan, even EU is getting tougher)
- Financial constraints are global—Affect physician salaries, hospital reimbursement and industry revenues



New Realities of Innovation

- FDA pathways are opening up
 — more communication, early feasibility program, more flexible pathways
- Extension of therapies to chronic disease emphasizing compliance, early detection, out-patient management of common disease with yet un met needs and solutions
- Focus on health economic imperatives –create new opportunities for innovation by integrating healthcare and IT



Time for a make over?



