



TARGET

SALES GUIDE & KEY TALKING POINTS

WHO TO TARGET - Interventional Cardiologists who...

<p>Use a polymer jacket wire:</p> <ul style="list-style-type: none"> – Asahi Fielder® XT – Boston Scientific CHOICE PT – Boston Scientific PT Graphix – Abbott Whisper 	<p>Physicians using these wires:</p> <ul style="list-style-type: none"> – Use a wire with a polymer jacket to achieve superior trackability – Are using wires with a greater distal tip weight than Izanai – Treat complex lesions and perform complex PCIs – Are comfortable using wires that are lubricious due to a hydrophilic coating or polymer jacket
<p>Use one of the below as a first-pull wire:</p> <ul style="list-style-type: none"> – Abbott BMW – Asahi ProWater – Asahi Sion Blue 	<p>Physicians using these wires:</p> <ul style="list-style-type: none"> – Do not use Extra Floppy as their workhorse wire (do not cannibalize your existing business!) – Will value Izanai's Nitinol tip that provides enhanced tip retention and durability <ul style="list-style-type: none"> » Potentially lead to the use of less wires per case saving procedural time and money – Will find Izanai's true 1:1 torque response superior to their current wire – Will see the value in lubricious coating for superior trackability distally and in tortuosity (without the use of a polymer jacket!) – Like the low distal tip weight compared to other hydrophilic wires (.6g distal tip weight)
<p>Perform complex PCIs and treat complex lesions</p>	<p>This physician will:</p> <ul style="list-style-type: none"> – See the value in a lubricious coating for superior trackability distally and in tortuosity (without the use of a polymer jacket!) – Have the need for an escalation wire or secondary wire in buddy wire or bifurcation cases – Appreciate a secondary wire that can be easily distinguished from the primary wire

TALKING POINTS

FEATURE	CLINICAL BENEFIT	CONVERSATION STARTERS
Nitinol core-to-tip design	<ul style="list-style-type: none"> – Nitinol core-to-tip design enables superior durability, which may reduce number of wires used per case¹⁻⁴. – Could result in fewer wire exchanges saving procedural time and cost – Excellent rail support designed for deliverability of other devices 	<ul style="list-style-type: none"> – How often do you have to exchange wires? How much time are you spending in a case changing out wires? – How many wires are you typically using per case on average? – Do you often encounter a damaged tip during or after a case?
Hydrophilic Coating	<ul style="list-style-type: none"> – Provides enhanced trackability for distal lesions or tortuous anatomy, without the use of a polymer jacket, maintaining safety – Greater lubricity compared to hydrophobic wires – Aids in the crossability of complex lesions 	<ul style="list-style-type: none"> – What wire(s) are you using as your primary workhorse wire? – What other wire(s) will you use if you need to escalate to another wire? – How often are you treating distal lesions or encountering tortuous anatomy? – Is trackability an important feature in your wire to you?
.6g low distal tip weight	<ul style="list-style-type: none"> – Low weight, flexible tip design may reduce perforations – Maintains gold standard of care for workhorse wire tip weight (.6g - .8g) – Lower distal tip weight than wires that utilize polymer jackets 	<ul style="list-style-type: none"> – What wire(s) are you using as your primary workhorse wire? – What other wire(s) will you use if you need to escalate to another wire?
White proximal shaft option	<ul style="list-style-type: none"> – Simple identification of secondary wire for bifurcation cases or buddy wires 	<ul style="list-style-type: none"> – Do you often find yourself using more than 1 wire in a case? – How do you tell the difference between multiple wires used in the same case?



OBJECTION HANDLING

OBJECTION	RESPONSE	ACTION/TOOLS TO USE
This is a higher-cost option compared to other competitive wires	<ul style="list-style-type: none"> – Small, additional cost when you consider total procedure cost or the need to use multiple wires – Durable tip enables multi-vessel procedures – Potential to reduce the need for wire exchanges due to superior durability (Nitinol core-to-tip design⁵) 	<ul style="list-style-type: none"> – Runthrough NS Family Portfolio Brochure (PM-06855) – Dr. Secemsky, Cath Lab Digest publication (PM-07623) – Crossing Severely Stenotic and Tortuous Complex Lesions with Ease
I don't want to use a hydrophilic wire due to safety reasons	<ul style="list-style-type: none"> – Izanai maintains a low distal tip weight of 0.6g and a flexible tip design which may reduce the risk of perforations – Low-weight, flexible nitinol tip engineered for easy prolapse – Durable nitinol tip provides superior tip durability and may reduce wire use per case¹ 	<ul style="list-style-type: none"> – Runthrough NS Family Portfolio Brochure (PM-06855) – Dr. Secemsky, Cath Lab Digest publication (PM-07623) – Crossing Severely Stenotic and Tortuous Complex Lesions with Ease
My current polymer jacket wire/ hydrophilic wire I use is good enough	<ul style="list-style-type: none"> – Izanai has the potential to reduce the need for wire exchanges due superior durability (Nitinol core-to-tip design¹⁻⁴) – 1:1 torque control for optimal steerability – White shaft variation available for simple identification of secondary wires 	<ul style="list-style-type: none"> – Runthrough NS Family Portfolio Brochure (PM-06855)
I already use Runthrough Extra Floppy, why do I need this wire?	<ul style="list-style-type: none"> – Runthrough Izanai is another tool available to you to help tackle complex coronary disease. When your typical wire is not enough in the most complex of cases, Izanai may provide that extra trackability and durability required to successful access and cross challenging lesions. – Izanai is available in blue and white for simple identification of secondary wires (for your buddy wire and bifurcation needs) 	<ul style="list-style-type: none"> – Runthrough NS Family Portfolio Brochure (PM-06855) – Runthrough NS Family Portfolio One Sheeter (PM-06417)

TARGETING/POSITIONING

PORTFOLIO TARGETING OVERVIEW		PORTFOLIO POSITIONING OVERVIEW
Previous Runthrough or Competitive Guidewire User (Does NOT use Extra Floppy): <ul style="list-style-type: none"> – Izanai Blue - position as frontline wire; in cases where you may need a little more than your everyday workhorse wire (i.e. additional lubricity for distal reach or angulated and torturous anatomy) – Izanai White - secondary wire option for simple identification of buddy wire or bifurcation cases – Runthrough Hypercoat - wire escalation option for access & crossing of complex lesions and distal reach 		Runthrough Extra Floppy: <ul style="list-style-type: none"> – Everyday workhorse wire; works in everyday most cases
Current Runthrough Extra Floppy Only User: <ul style="list-style-type: none"> – Izanai White - position as frontline wire option or secondary wire option; use to capture competitive share of current secondary wire – Runthrough Hypercoat - wire escalation option for access & crossing of complex lesions and distal reach 		Runthrough Izanai: <ul style="list-style-type: none"> – Frontline Finesse: combination of a frontline wire & buddy wire; designed for angulated, distal and tortuous anatomy & calcified lesions
Current Runthrough XF & HC User: <ul style="list-style-type: none"> – Izanai White - position as frontline wire or buddy wire option; to use in conjunction with Extra Floppy; for cases where they may not use Extra Floppy leverage this as an option to capture competitive usage 		Runthrough Hypercoat: <ul style="list-style-type: none"> – Use in complex lesions and anatomy; for calcified, stenotic lesions where more push force may be needed (1g tip weight)

Reference:

1. Sharma S. The RUNTHROUGH® NS Guidewire: Lessons after 2,000 uses. Cath Lab Digest. 2008;16(9). 2. Goldberg S, Moses J, Parashara D, Rutherford B, Sharma S. Guidewires – Expert Round Table; Radcliffe Cardiology. US Cardiology. 2008;5(1):34-38. 3. De Gregorio J. Experience with a new workhorse guidewire. Cath Lab Digest. 2007;10:56-58. 4. Sharma S. Experience with a New Guidewire: The Terumo RUNTHROUGH® NS. Cath Lab Digest. 2008;3:62-63. 5. Data on File

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