The Next Generation of PE Care:

A Prospective Study of the AVENTUS Thrombectomy System with Autologous Blood Reinfusion



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(N=116, p<0.0001)

4.8 ± 5.5 mmHg

change in mPAP

(N=116, p<0.0001)



PIVOTAL STUDY DESIGN

PRIMARY OBJECTIVE

Evaluate the safety and efficacy of the AVENTUS Thrombectomy
 System for aspiration thrombectomy in subjects with acute
 pulmonary embolism

STUDY DESIGN

- Prospective, multi-center, single-arm, pivotal study
- Subjects were followed at 48 hours and 30 days

PRIMARY ENDPOINTS

Efficacy

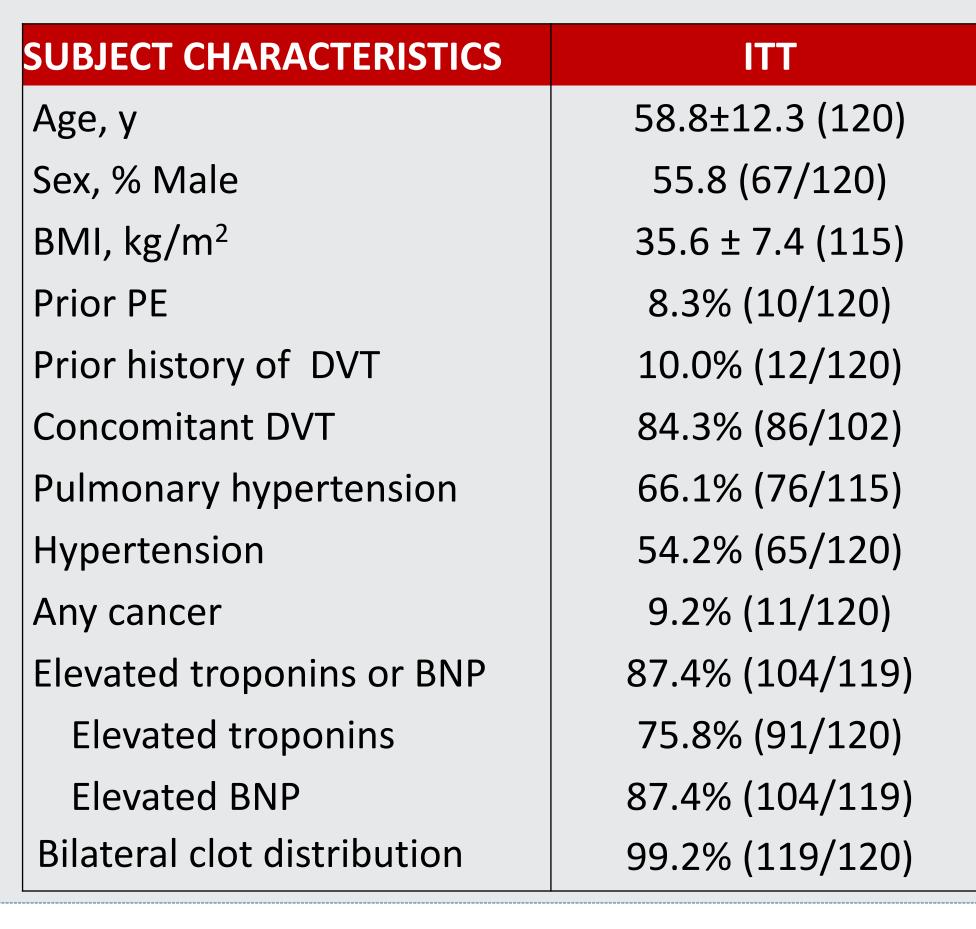
 Change in RV/LV ratio in subjects from baseline to 48 hours postprocedure

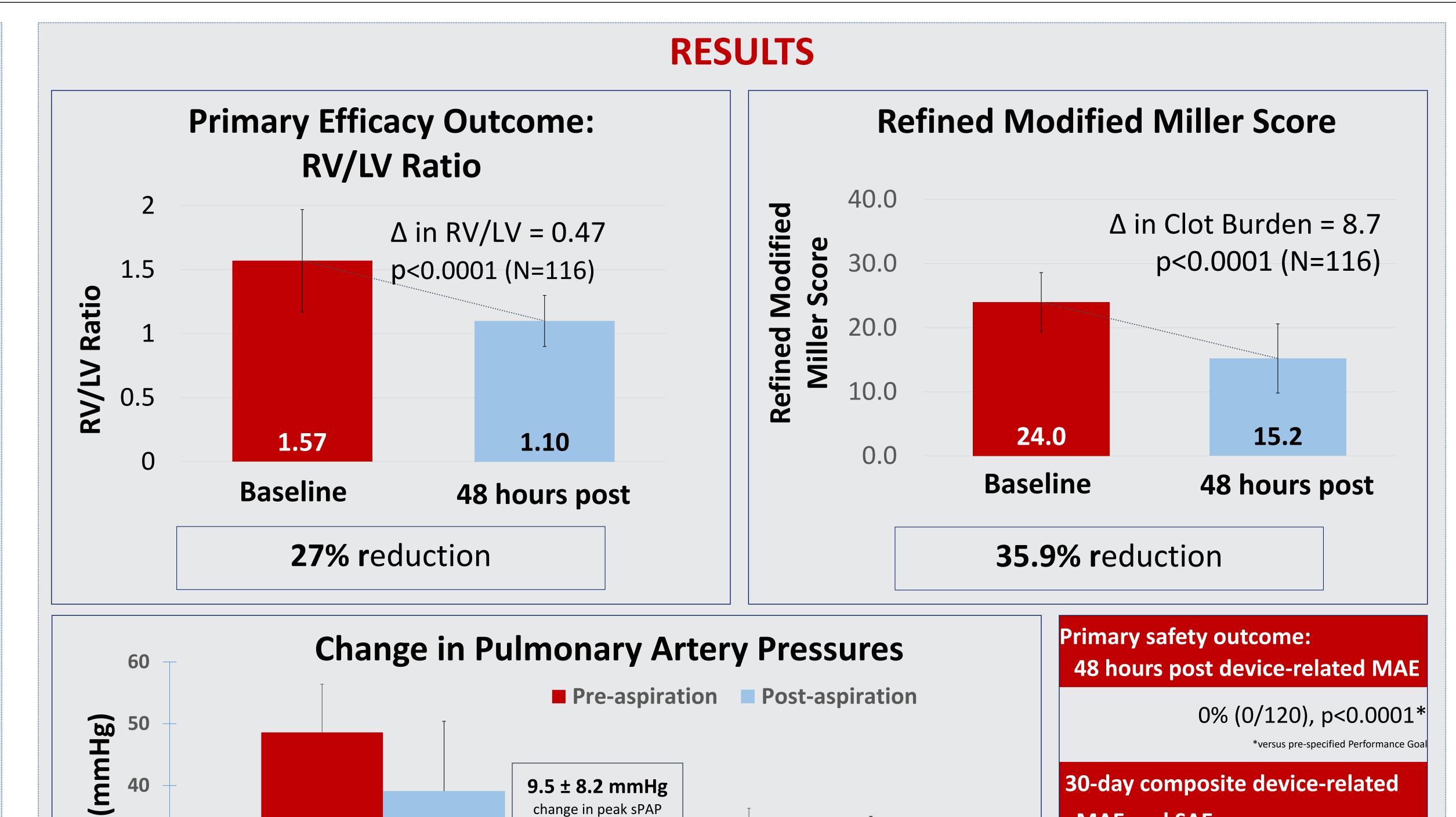
Safety

- Composite rate of ITT subjects having device related MAEs within 48 hours post-procedure, including:
- Death
- Major bleed
- Clinical deterioration
- Pulmonary vascular injury
- Cardiac injury

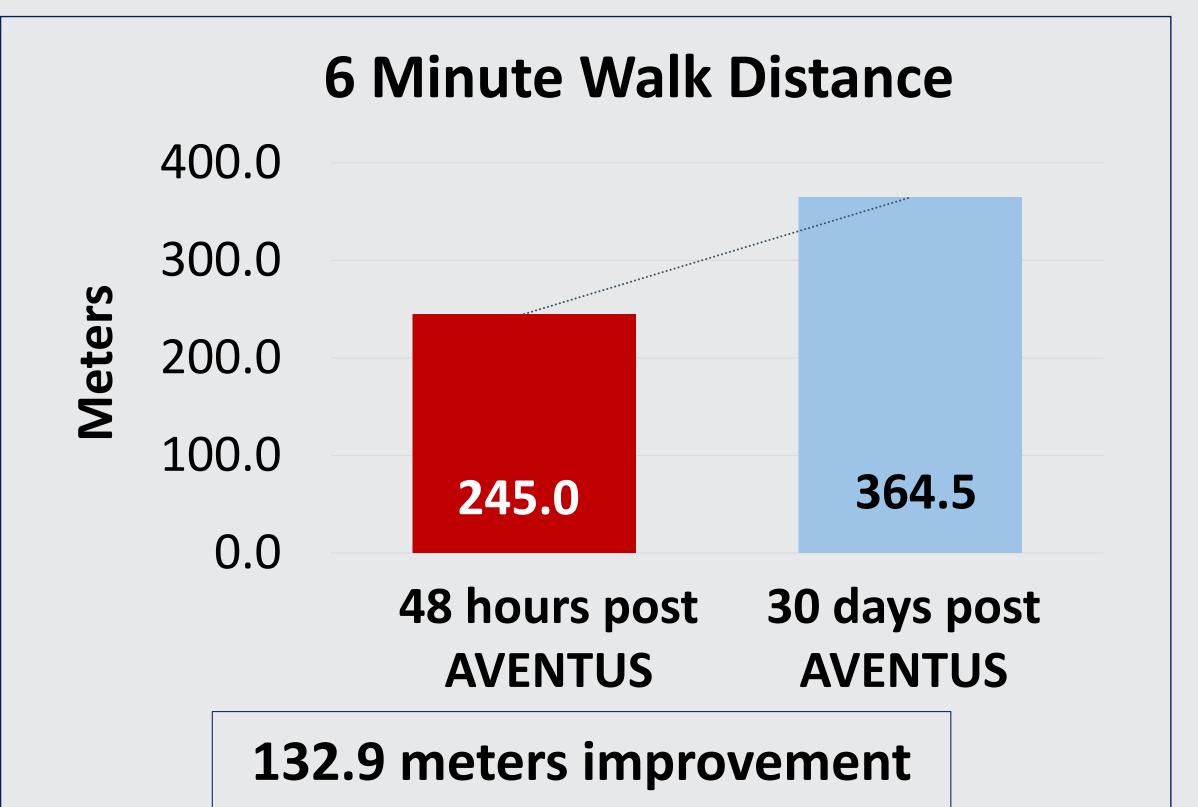
ENROLLMENT SUMMARY

- 120 ITT, 10 roll-ins
- 22 sites
- 49 unique users
- 71.4% IC
- 22.4% IR
- 6.1% VS



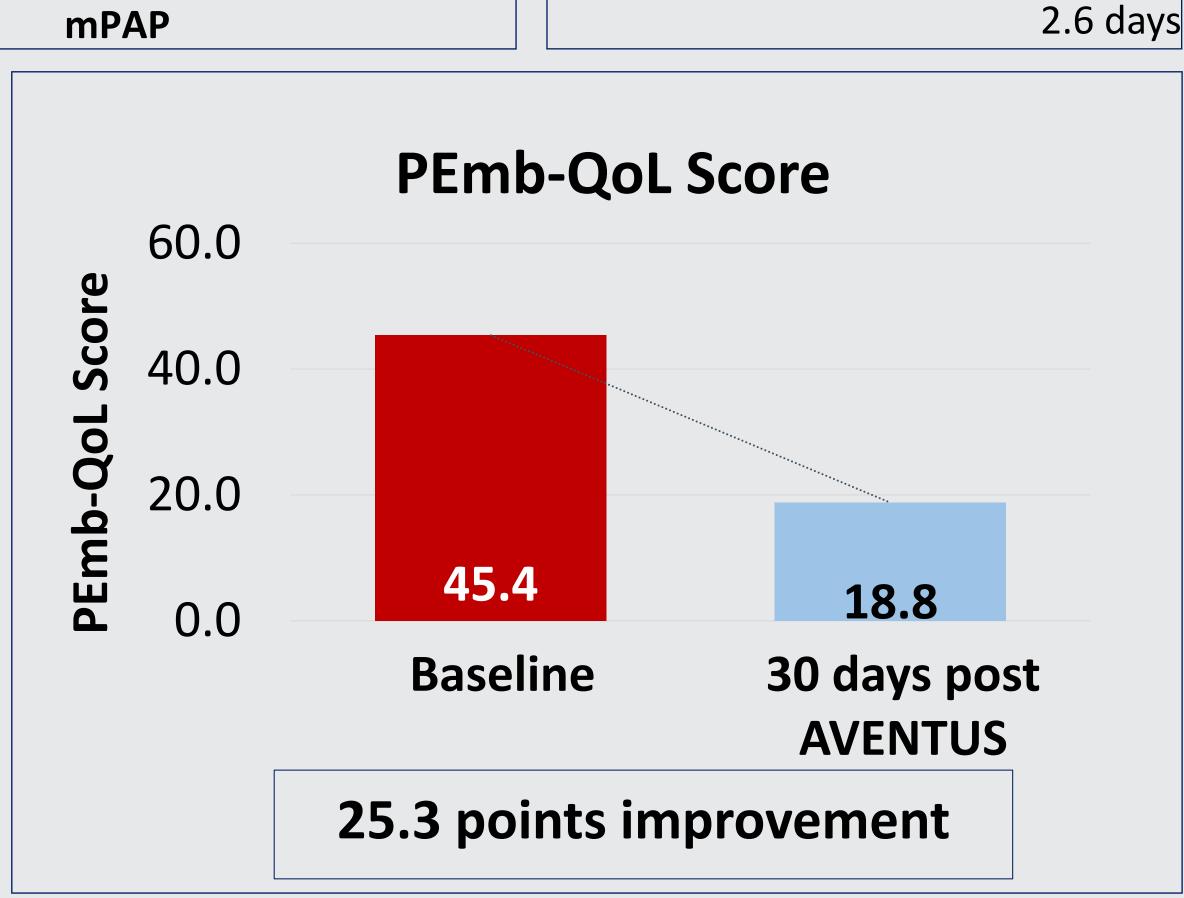


23.7



Peak sPAP

39.1



MAE and SAE

Catheter dwell time

Total hospital LOS

0% (0/120)

39.5 minutes

CONCLUSIONS

- The AVENTUS pivotal trial met its primary endpoints for efficacy and safety outcomes
- Clot was efficiently removed and blood was returned with no blood transfusions through 48 hours and short length of stay
- Functional status and subject-reported quality of life findings signaled directional improvement post-thrombectomy

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ABBREVIATIONS

RV/LV:right ventricle-to-left ventricle

MAE: major adverse event ITT: intention-to-treat

IC: interventional cardiology

IR: interventional radiology

VS: vascular surgery

sPAP: systolic pulmonary artery pressure

mPAP: mean pulmonary artery pressure

SAE: serious adverse event

PEmb-QoL: Pulmonary Embolism Quality of Life

REFERENCES

AVENTUS Trial Investigators. Novel aspiration thrombectomy and blood reinfusion system for acute intermediate-risk pulmonary embolism: AVENTUS trial results. *J Soc Cardiovasc Angiogr Interv*. 2025 Jul;4(7):103661. doi:10.1016/j.jscai.2025.103661.