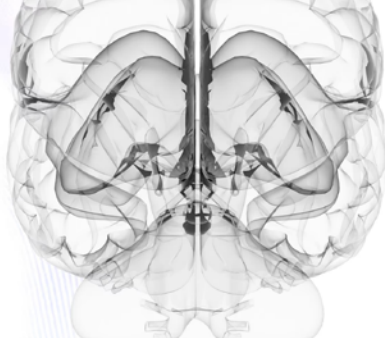




INSPIRE-A: Gold standard DSA series continues to inspire confidence in Artisse™

Artisse™ continues to earn physician trust through consistent safety and efficacy in aneurysm care.

A snapshot reflecting everyday clinical practice

Unlike a randomised trial, the **INSPIRE-A Registry** captures all patients treated according to routine procedures of the hospital, giving a true picture of performance.

- 477 patients enrolled
- Independent Core Lab and Clinical Events Committee oversight
- Data oversight by a Key Opinion Leaders-led steering committee
- No selection bias = real-life results, real confidence



Figure 1 Artisse™

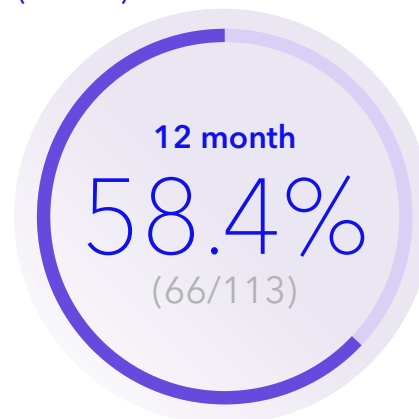
Key takeaways

Gold standard DSA cohort

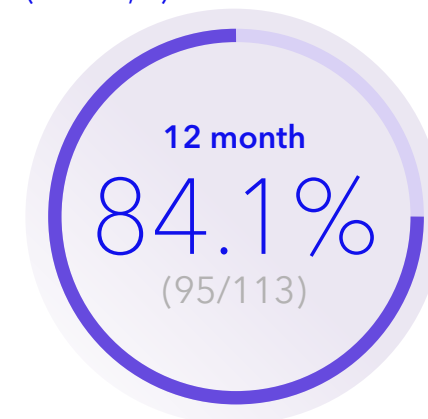
Demonstrates consistency with broader INSPIRE-A data across key performance indicators for safety and efficacy.

Patients with DSA at 12 months, N = 113

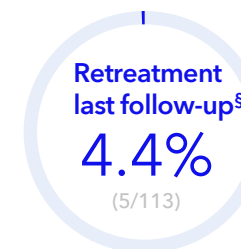
Complete Occlusion (Class I)



Adequate Occlusion (Class I, II)



Treatment durability



Procedural outcomes

Artisse™ is easy to deploy and adapts well to each case.

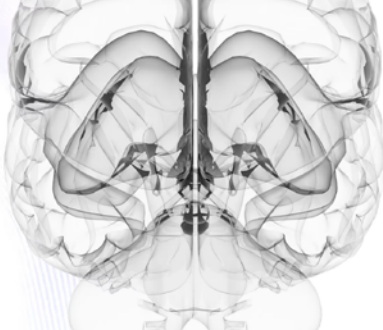
Devices implant vs opened	Satisfactory placement	Conformability
89.7% (113/126)	98.2% (111/113)	97.3% (110/113)

Safety profile

0.9% (1/113)

Major stroke in treated vascular area or neurological death

Major stroke on POD 0, assessed by the CEC as APT related due to absence of pre-procedure APT, likely thromboembolic in nature. mRS 2 at 180-day and at 1-year. Death 0% (0/113).



INSPIRE-A: Gold standard DSA series

Additional details

Cumulative fluoro time (min)

22.3 ± (17.46)

≤ 3 Resheathings per device

99.1% (111/112)

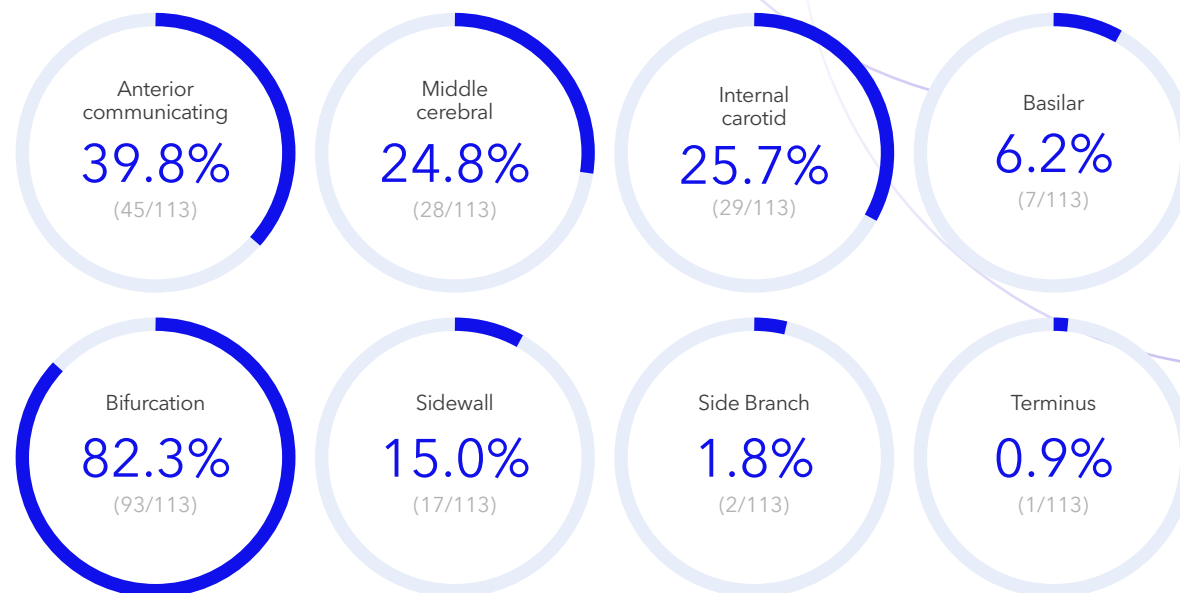
≤ 3 Detachment attempts per device

96.3% (104/108)

Aneurysm characteristics

Addressing the need to simplify treatment, 82.3% were bifurcation aneurysms across 4 key locations.

Aneurysm location



Index procedure characteristics

TRA is associated with lower incidence rate of access site complications versus TFA.¹

Radial access

57% (64/113)

Unruptured

100% (113/113)

† Defined as evidence of change in aneurysm occlusion status from complete occlusion to residual aneurysm/neck on DSA imaging compared to previous DSA

§ All retreatment occurred between post operative day 410 to 567

1. Internal Medtronic Clinical Study Report D00358316: Safety and Performance of Radial versus Femoral access in Neurointervention. Data as of 21st of April 2026, reflecting only the key outcomes for the DSA follow-up cohort. INSPIRE-A is an ongoing registry and more follow-up data is currently being collected. This is not the final dataset.

Prof. V. Costalat, (2026, Sept 2). INSPIRE-A registry: 12-month DSA follow-up with Artisse™. Data presented at the Medtronic-sponsored symposium during ESMINT 2026, Marseille, France.

This material should not be considered the exclusive source of information; it does not replace or supersede information contained in the device manual(s). Please note that the intended use of a product may vary depending on geographical approvals. See the device manual(s) for detailed information regarding the intended use, the (implant) procedure, indications, contraindications, warnings, precautions, and potential adverse events. For MRI-compatible device(s), consult the MRI information in the device manual(s) before performing an MRI. If a device is eligible for eIFU usage, instructions for use can be found at Medtronic's website, manuals.medtronic.com. Manuals can be viewed using a current version of any major internet browser. For best results, use Adobe Acrobat® Reader with the browser. Medtronic products placed on markets comply with legislation (if applicable) on medical devices. For any further information, contact your local Medtronic representative and/or consult Medtronic's websites.