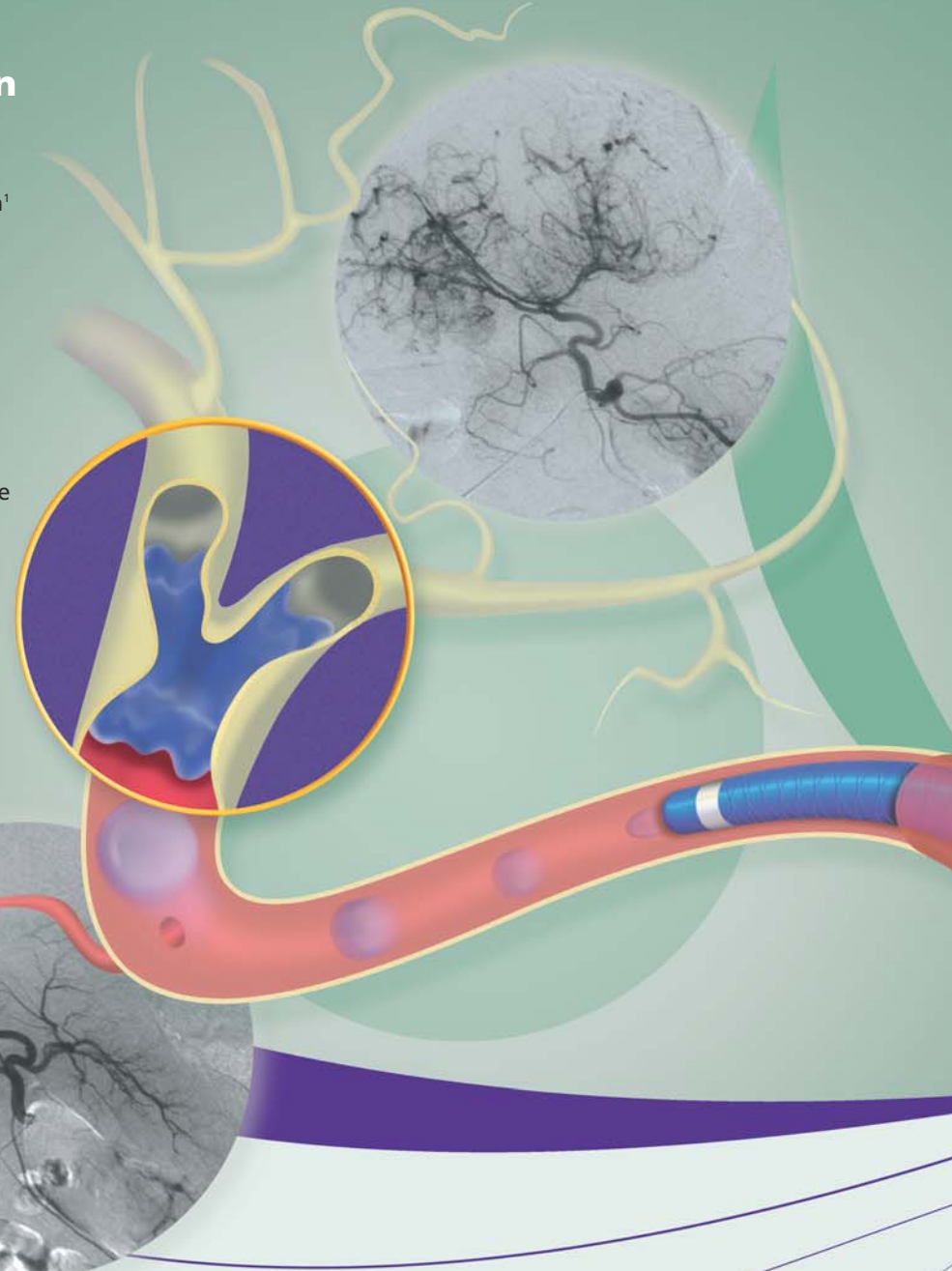


## The conformable solution to embolisation

- Designed for Hepatic Arterial Embolisation<sup>1</sup>
- Soft and deformable spheres which mould into the occlusion site anatomy
- Enlargement after delivery improves occlusion effectiveness<sup>2</sup>
- Unique fluid absorbing properties minimise tracking into smaller vessels beyond the targeted occlusion site



 **HepaSpheres**<sup>™</sup>  
EXPANDING MICROSPHERES  
Promoting Embolization Efficacy in Liver

 **BioSphere**<sup>®</sup>  
Medical

## The conformable solution to embolisation

### Precise occlusion site targeting

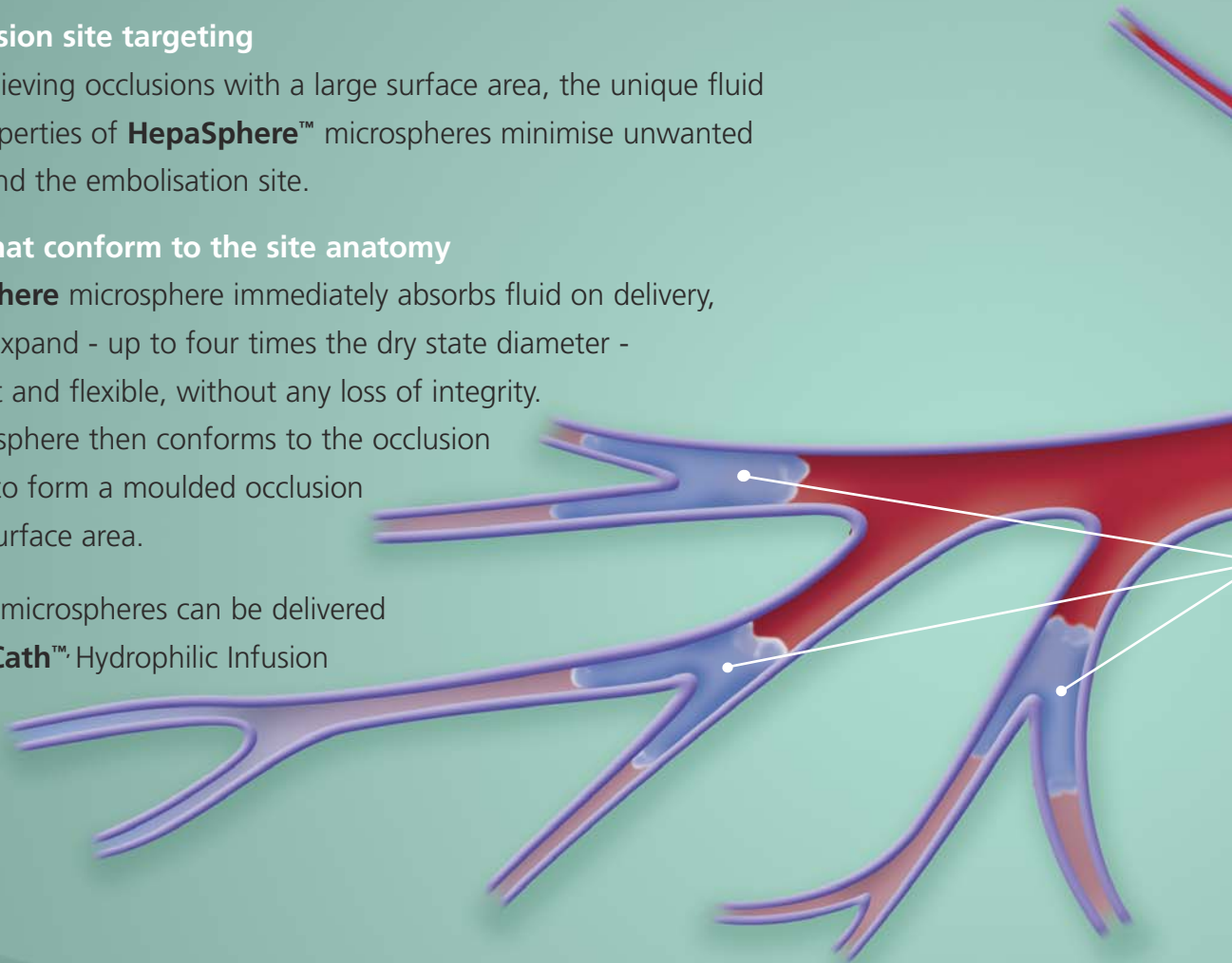
As well as achieving occlusions with a large surface area, the unique fluid absorbing properties of **HepaSpheres™** microspheres minimise unwanted tracking beyond the embolisation site.

### Occlusions that conform to the site anatomy

Each **HepaSpheres** microsphere immediately absorbs fluid on delivery, causing it to expand - up to four times the dry state diameter - becoming soft and flexible, without any loss of integrity.

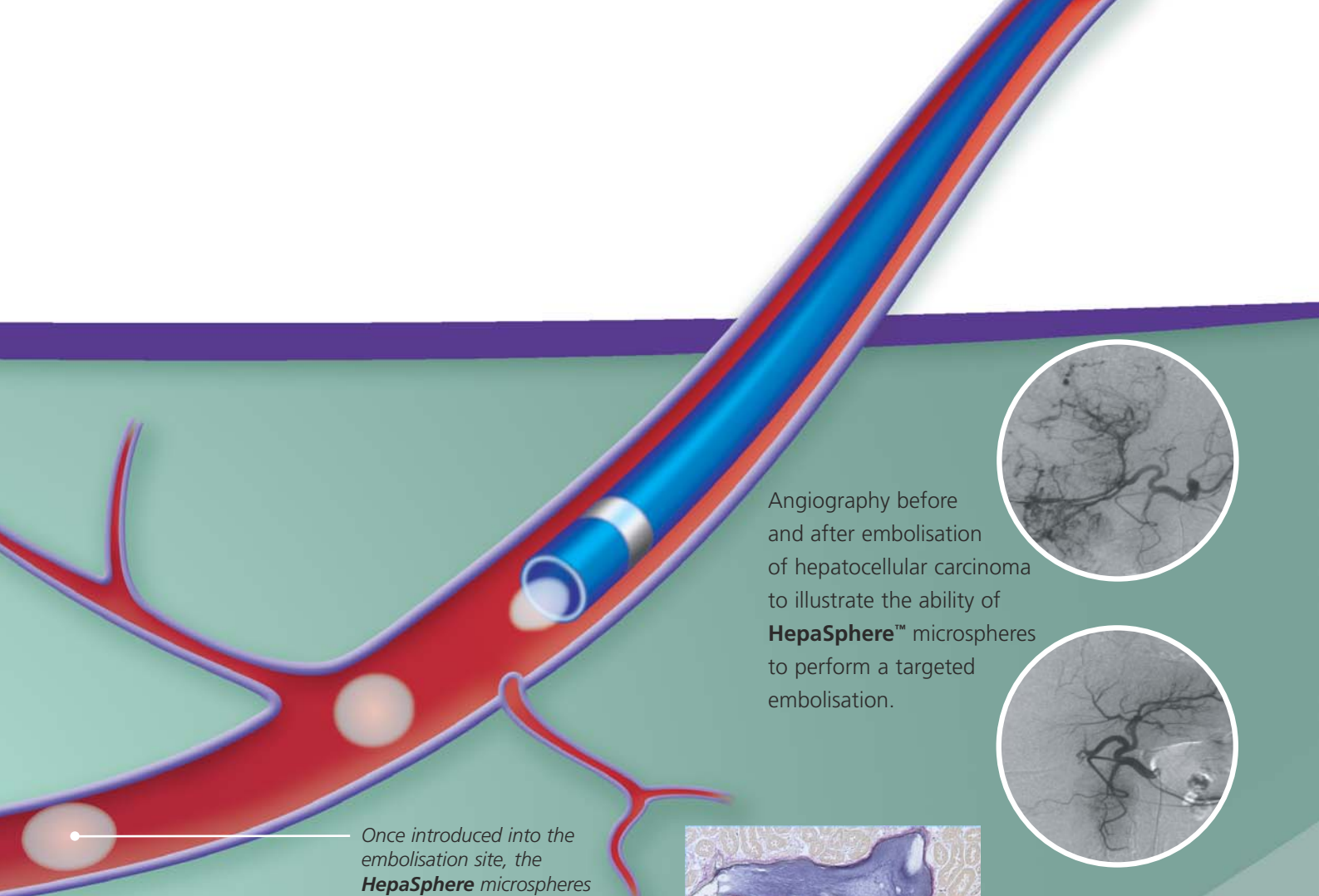
The enlarged sphere then conforms to the occlusion site anatomy to form a moulded occlusion with a large surface area.

**HepaSpheres** microspheres can be delivered using **Embo-Cath™** Hydrophilic Infusion Catheter.



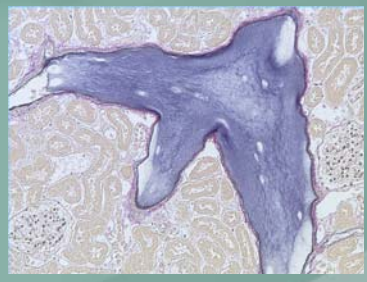
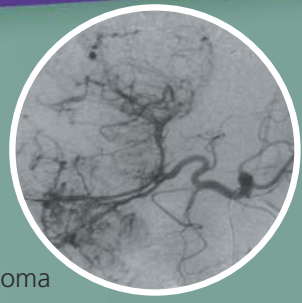
### HepaSpheres microspheres provide versatile therapy options

- **HepaSpheres** microspheres are designed for bland as well as chemo-embolisation.
- **HepaSpheres** microspheres are compatible and can be mixed with chemotherapeutic agents such as Ethiodol, Cisplatin, Epirubicin, Doxorubicin, Fluorouracil, Mitomycin etc.\*
- The swelling properties of the functionalized polymer used in **HepaSpheres** microspheres provides a high drug absorbing capability.



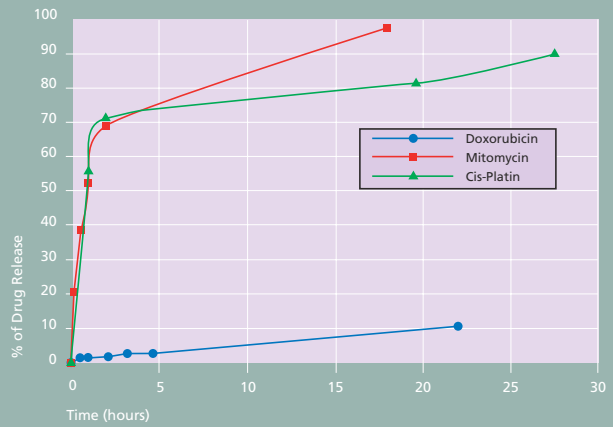
The **HepaSphere** microspheres then conform with the occlusion site anatomy without continuing to track into the smaller vessels beyond.

Angiography before and after embolisation of hepatocellular carcinoma to illustrate the ability of **HepaSphere**™ microspheres to perform a targeted embolisation.



Histology of a **HepaSpheres** microsphere showing their conformability.

Release Kinetics with HepaSpheres Microspheres in Common Chemotherapeutics (in-vitro model)\*



\* Laboratory tests indicate that **HepaSpheres** microspheres will absorb and slowly release Doxorubicin Hydrochloride.

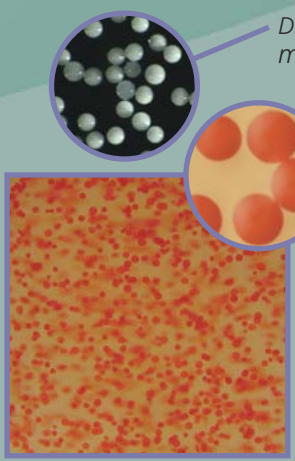
Data on file at BioSphere Medical, Inc.

Dry **HepaSpheres** microspheres

**HepaSpheres** microspheres after absorbing Doxorubicin




**HepaSpheres** microspheres can absorb up to 64 times their initial volume of an aqueous medium, enabling them to act as a drug reservoir.\*

The inset demonstrates the potential of **HepaSpheres** microspheres' drug-loading capabilities.



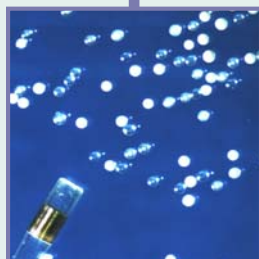
## Ordering Information

### HepaSphère™ Expanding Microspheres

Size range of dry particles (µm)	Size range when expanded (µm)	Colour code	Quantity (mg)	Order Number
50-100	200-400	 Yellow	50	V305HS
100-150	400-600	 Blue	50	V505HS
150-200	600-800	 Red	50	V705HS

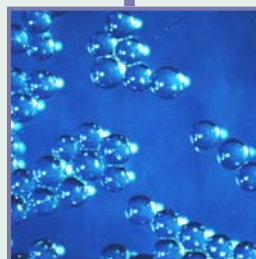
HepaSphère microspheres can absorb aqueous medium by up to 64 times their initial dry state volume, the expansion rate being mostly dependent on ionic concentration.

Dry state diameter



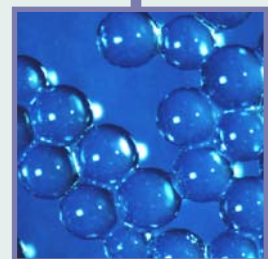
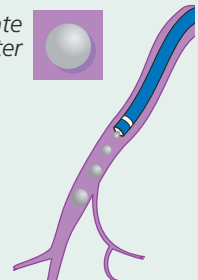
The HepaSphère microspheres are supplied as dry particles.

2x dry state diameter



When Ionic Contrast Media is added, the HepaSphère microspheres expand 2x their dry state diameter:  
**equal to 8x volume.**

4x dry state diameter



When in contact with blood or Non Ionic Contact Media (NaCl 0.9%) the HepaSphère microspheres expand to 8x their dry state volume:  
**equal to 64x volume.**

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(1) Transarterial Embolization for Large Hepatocellular Carcinoma with Use of Superabsorbent Polymer Microspheres: Initial Experience, K. Osuga et al. *JVIR* 2002, Vol. 13, pp.929-934

(2) Embolic Effects of Superabsorbent Polymer Microspheres in Rabbit Renal Model: Comparison with Tris-acryl Gelatin Microspheres and Polyvinyl alcohol, A.A. Khankan et al. *Radiation Medicine* 2004, Vol. 22, pp.384-390