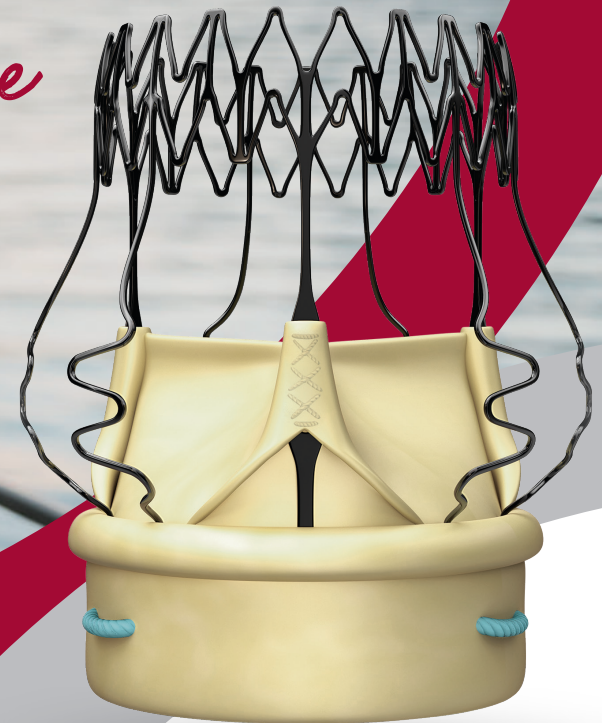




SUTURELESS AORTIC HEART VALVE

PERCEVAL PLUS LANCELOT

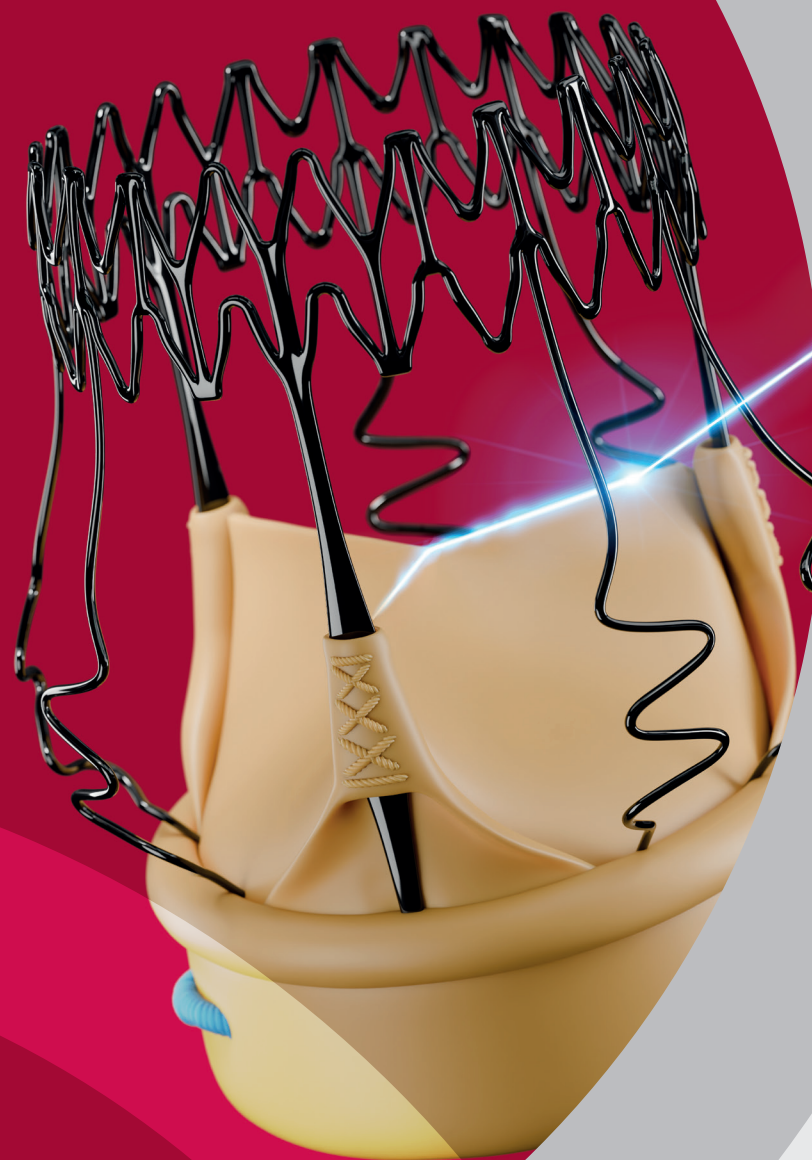
THE VALVE FOR A *lifetime*



CORCYM | PERCEVAL PLUS LANCELOT

SUTURELESS AORTIC HEART VALVE

PERCEVAL PLUS LANCELOT

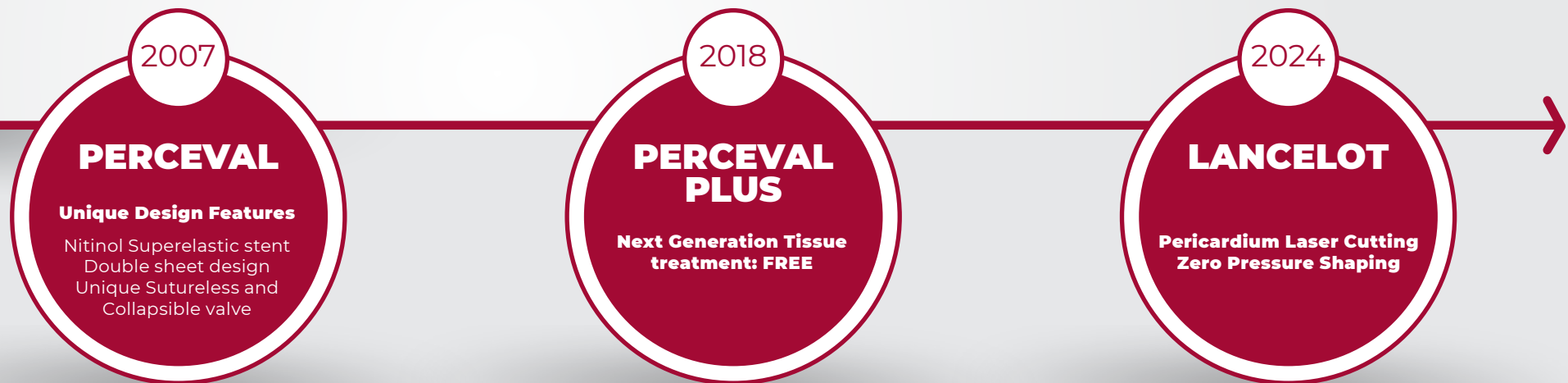


PERCEVAL PLATFORM: a Revolution in Evolution

Since its first clinical use in 2007, the Perceval platform has continuously evolved, guided by real-world experience, clinical evidence and the needs of Surgeons.

Today, Perceval represents a proven platform, designed to deliver reliable performance while supporting the patient's tomorrow.

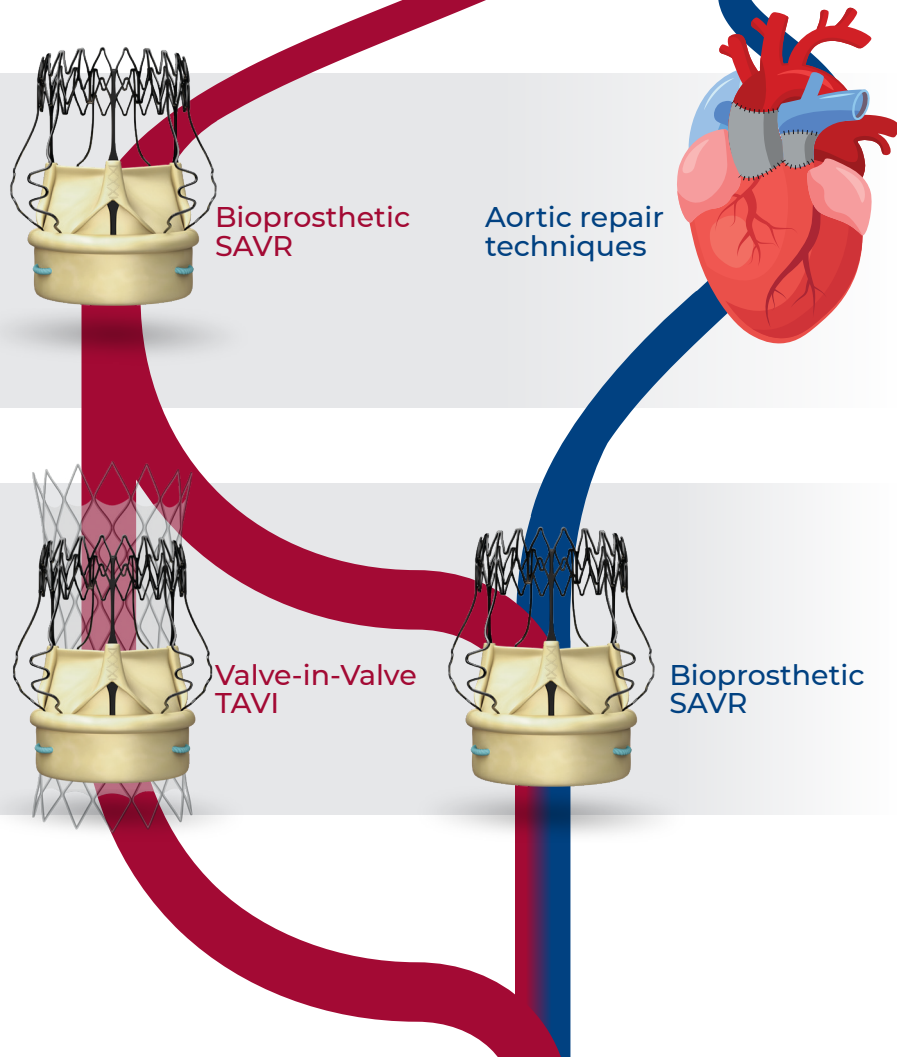
PERCEVAL platform is a revolution built through continuous evolution.



1

THE VALVE
FOR A *lifetime*





Your choice for today and tomorrow

Today, choosing a next-generation valve, like Perceval, means searching the best solution for a promise of **enhanced durability**.

This is leading more and more patients to choose these valves over conventional (biological or mechanical), as they are more aligned with the desire for a **better Quality of Life** and reduced medical interventions. As patients' life expectancy becomes longer, the therapy and the technology chosen for a patient today must also be **the right choice** for them **tomorrow**.

This is what defines **the valve for a lifetime**.

2

YOUR CHOICE FOR *today*



UNIQUE DESIGN

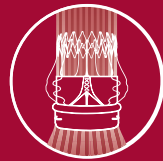
Thanks to the unique **sutureless** and **collapsible** design, Perceval Plus LANCELOT performs in any surgical scenario, standing as the best valve for endoscopy and robotics^{1,2}.



MADE TO LAST

FREE tissue reduces calcification by nearly **100%***.

Built on a Tissue Platform with more than 25 years of clinical experience, and an SVD of **0.1%** pt-yrs⁴.



EXCELLENT HEMODYNAMICS

The unique design allows **single-digit** mean gradients up to 5 years⁵, with further optimized performance thanks to LANCELOT advanced manufacturing processes.



IMPROVED QUALITY OF LIFE

+20 QoL score at 1 year due to reduced surgery impact which leads to a faster recovery⁶.

ERAS protocol can further improve these positive outcomes⁷.



Your choice for today

FREEDOM TO SHAPE THE FUTURE

FREE is a **next-generation tissue treatment** technology built on **over 25 years of clinical experience³**, providing a strong foundation for durability.

Through a targeted multi-step process, it acts on phospholipids and aldehydes - the main causes of tissue calcification - to significantly reduce calcification⁸. FREE also enables valve storage in an aldehyde-free solution, with negligible toxicity for the patient and eliminating the need for rinsing, thus simplifying the surgical workflow⁸. Clinical evaluations show that FREE achieves **nearly a 100% reduction in calcification***, confirming its high effectiveness and reliability.

*vs control group (Corcym data on file)

FREE addresses both causes of calcification: phospholipids and aldehydes

PHOSPHOLIPIDS REMOVAL

GLUTARALDEHYDE FIXATION AND STERILIZATION

ENHANCED ALDEHYDE NEUTRALIZATION

ALDEHYDE FREE STORAGE SOLUTION

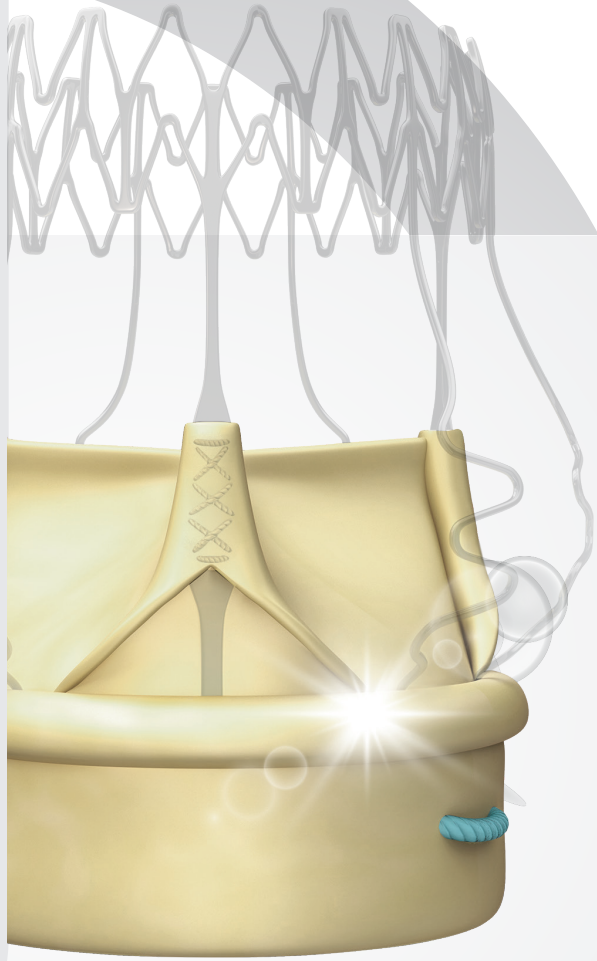
READY TO USE

nearly **-100%**
calcification*

-96%
phospholipid content*

≈0%
aldehyde toxicity[®]

READY TO USE



Your choice for today

DURABILITY YOU CAN TRUST

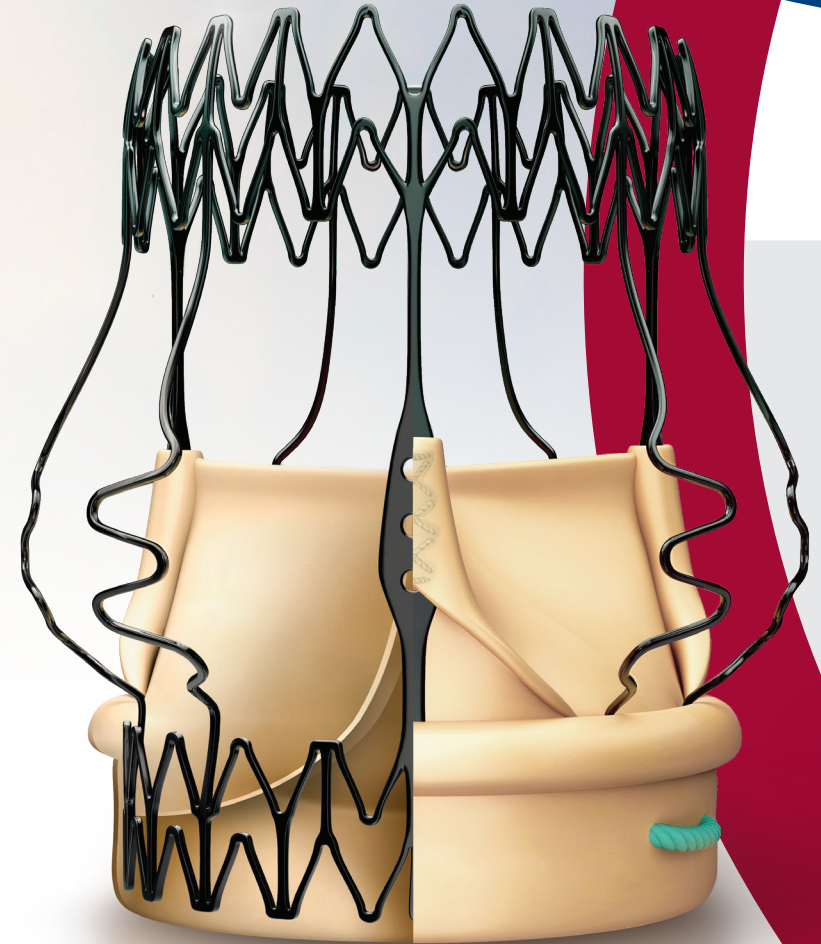
The Perceval Platform is designed to last.

In-vitro testing shows that the Perceval valve is **designed to last up to 50 years of simulated use³**, reflecting a design focused on long-term performance.

In the **20 years of clinical experience**, the trusted Perceval Platform has shown a linearized rate of SVD of **0.49% pt/yrs⁴** with a maximum follow-up of 15 years.

Perceval Plus further strengthens this evidence base, achieving an **SVD rate of 0.1% pt/yrs^{*,4}** - calculated according to **VARC-3 definitions** - thus improving durability outcomes across the platform.

Building on this legacy, **Perceval Plus LANCELOT** - the latest evolution of the platform - has introduced advanced manufacturing processes and refined design features to enhance the performance of sutureless AVR, reinforcing the platform's focus on long-term reliability and consistency over time.



*with a max follow-up of 5 years



0.1%
p-y
SVD

As per VARC-3 the most stringent criteria*

DESIGNED
TO LAST

50
YEARS³



Your choice for today

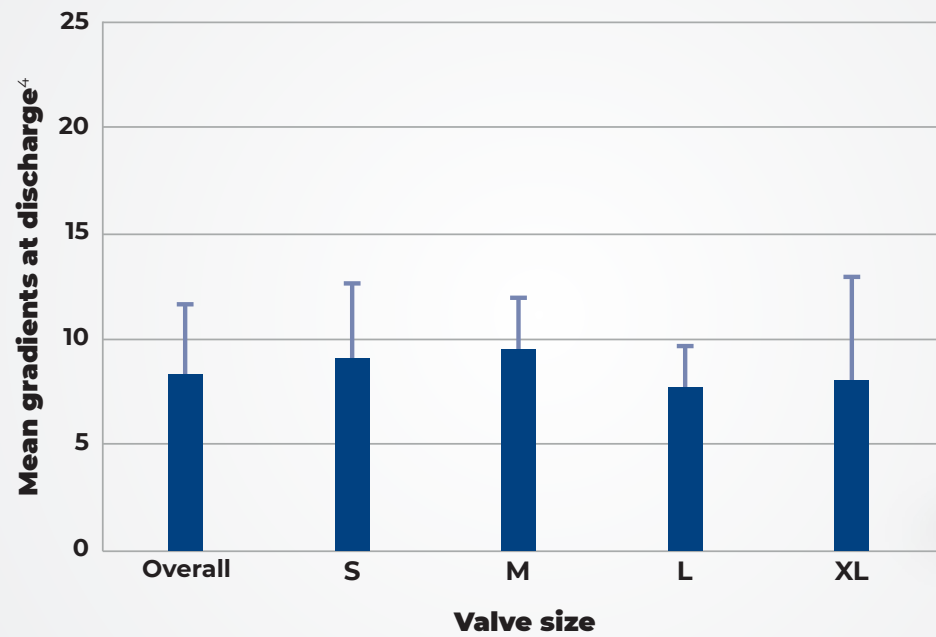
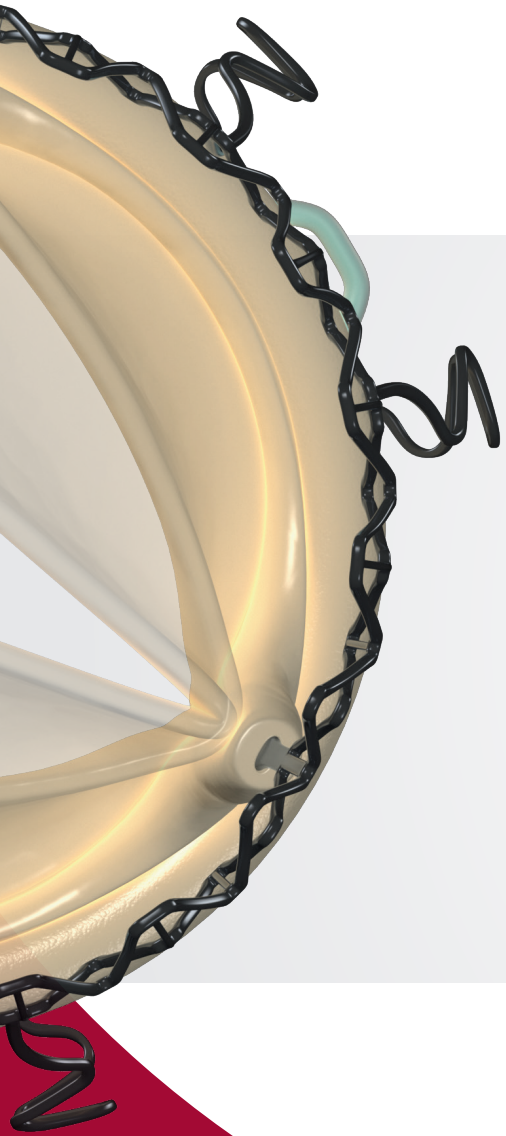
EXCELLENT HEMODYNAMICS

The Perceval platform has a unique design that has shown **single-digit mean gradients** up to five years of follow-up⁵.

The super-elastic stent self-expands in place ensuring optimal valve sealing⁹ and allowing the Perceval valve to follow the physiological movement of the aortic root during the cardiac cycle, mimicking the native valve^{5,10}.

Building on this foundation, Perceval Plus LANCELOT introduces advanced manufacturing processes, including zero-pressure shaping and laser cutting. These refinements are designed to further optimize valve performance, contributing to **lower gradients and higher EOA**.





LANCELOT
shows
single-digit
gradients in
all sizes

3

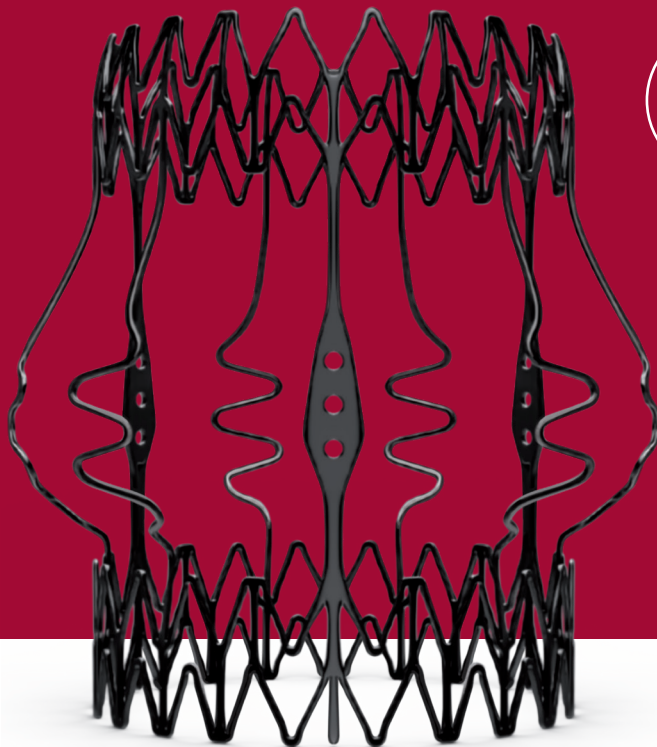
YOUR CHOICE
FOR *Tomorrow*



Choosing the right valve today also means planning for the needs of tomorrow, looking beyond the immediate surgical outcome and anticipating what the future may require.

The Perceval Platform is **designed to enable future reinterventions³**, either redo surgeries or Valve-in-Valve procedures, ensuring long-term continuity throughout the patient's lifetime journey, remaining safe and reliable for the next step.

That's why Perceval is the choice for tomorrow.



THE IDEAL DOCKING STATION FOR ViV

Perceval Plus LANCELOT is the only valve that **evenly and circumferentially expands**, for better hemodynamics and minimizes the risk of coronary obstruction^{11,12}.



EXCELLENT IN REDO SURGERY

Perceval Plus LANCELOT provides faster implantation and **excellent clinical outcomes** for all patients⁹, regardless of their risk profile, being a safe and effective alternative to traditional surgical prostheses or ViV when a third valve replacement is anticipated.

Your choice for tomorrow

THE IDEAL DOCKING STATION FOR VALVE-IN-VALVE

The Perceval platform has been designed to support future **Valve-in-Valve (ViV)** procedures, offering a reliable and predictable docking station when reintervention is required. Its structural characteristics provide **clear visibility**, enabling accurate positioning and procedural control during transcatheter valve implantation.

The Perceval valve expands evenly, allowing the transcatheter valve to open effectively, **recovering favorable hemodynamic performance**^{12,13} after ViV procedures. A clear identification of the **risk plane** supports procedural planning and helps mitigate potential complications.

Perceval's design also ensures a **safe valve-to-coronary distance**, minimizing the risk of **coronary ostia obstruction**¹² and supporting procedural safety in ViV settings.

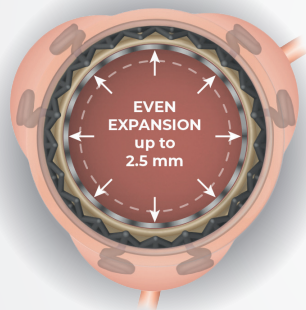
MORE THAN 30 PUBLISHED PAPERS support the feasibility and safety of Valve-in-Perceval procedures, confirming reproducible outcomes across different clinical experiences.





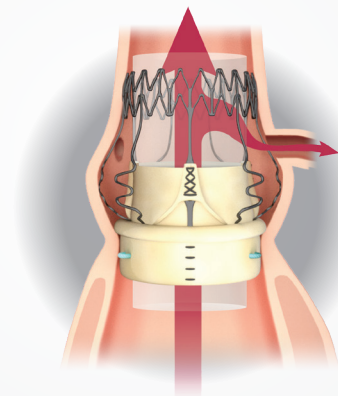
Clearly visible

Perceval stent is visible under CT and fluoroscopy for precise placement and alignment.



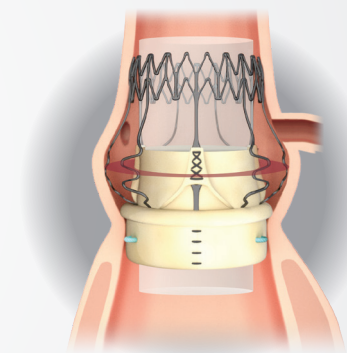
Resilience to Expansion

Nitinol stent allows Perceval inflow ring to expand up to 2.5 mm beyond nominal size.



Clear identification of the risk plane

Supports coronary ostia management and future coronary access.



Safe Valve-to-Coronary distance

Sinusoidal struts in the Perceval stent maintain safe VTC distance, minimizing coronary obstruction risk.



DEDICATED TO THE SURGEON OF THE *future*

CORCYM is dedicated to the Surgeon of the Future, who uses advanced technology and is focused on minimally invasive techniques.

CORCYM offers a full range of training and education programs, at all experience levels, to share best practices and deepen expertise.



Visit **CORCYM Academy**, our online training platform dedicated to Healthcare Professionals where you can see the Perceval Platform in action during many cases performed by some of our top users and attend Webinars:

www.corcym-academy.com

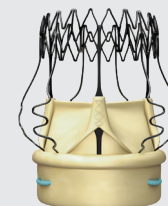
CORCYM
ACADEMY
EDUCATIONAL OFFER DEDICATED TO HEALTHCARE PROFESSIONALS



ORDERING INFORMATION

PRODUCT

Code	Description	USE
PVF-S	PERCEVAL PLUS size S	Single use
PVF-M	PERCEVAL PLUS size M	
PVF-L	PERCEVAL PLUS size L	
PVF-XL	PERCEVAL PLUS size XL	



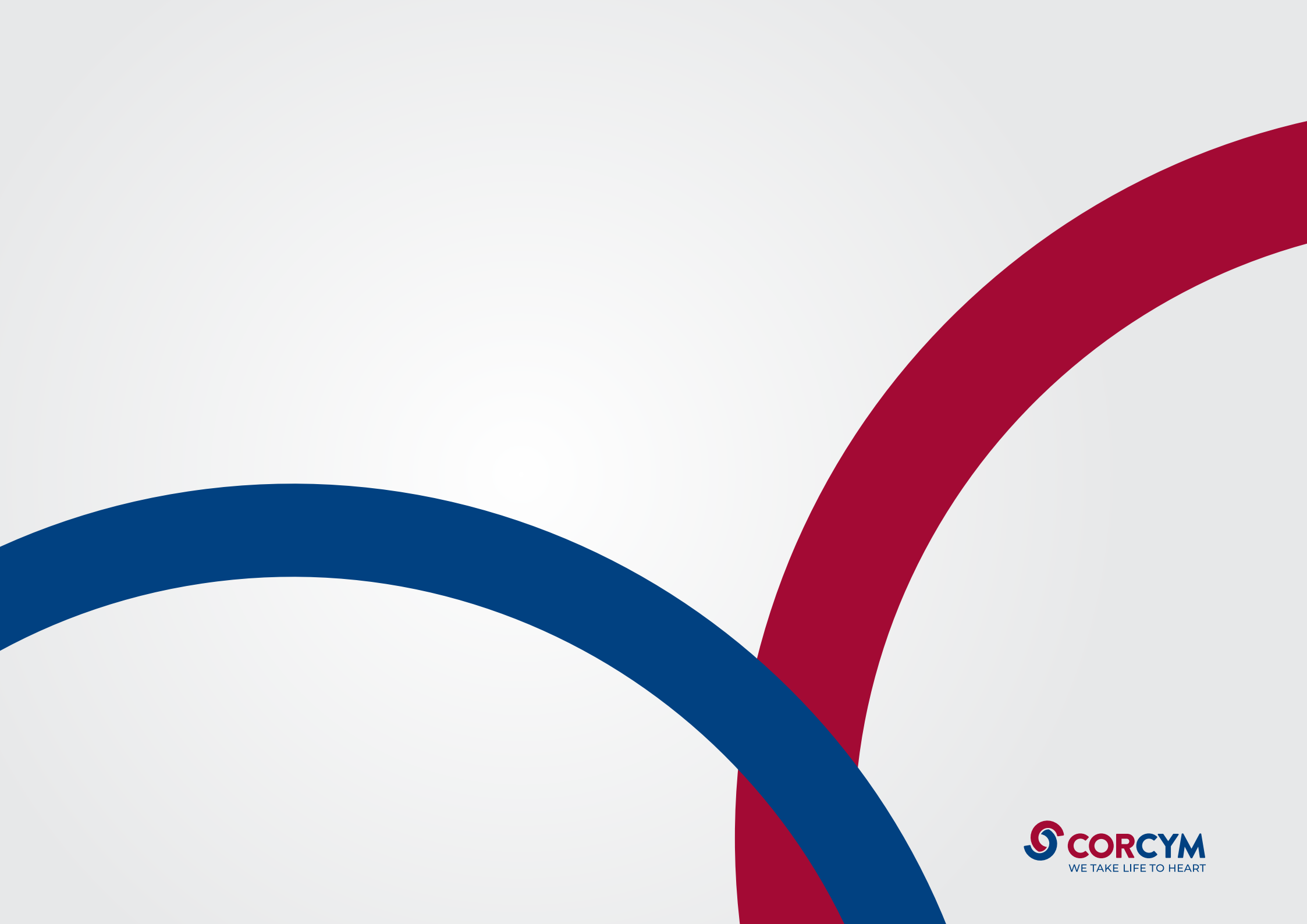
ACCESSORIES

Code	Description	Size	USE
ICV 1219	Sizer Set		Re-usable
PAK-S	RelyON PAK Accessories Kit Collapser System Delivery System Postdilation Catheter	S	Single use
PAK-M		M	
PAK-L		L	
PAK-XL		XL	
ICV1230	Empty Tray		Re-usable



REFERENCES

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2. Balkhy H.H. et al. - *Ann Thorac Surg,* 2020
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4. UZ Leuven experience - CORCYM data on file
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6. Suri R.M. et al. - *The Journal of Thoracic and Cardiovascular Surgery,* 2018
7. Engelman D.T. et al. - *JAMA Surg,* 2019
8. Meuris B. et al. - *J Thorac Cardiovasc Surg.* 2018
9. Glauber M. et al. - *Innovations* 2016
10. Solinas M. et al. - *Ann Cardiothorac Surg* 2020
11. Amabile N. et al. - *J Thorac Cardiovasc Surg.* 2016
12. Landes U. et al. - *EuroIntervention.* 2019
13. Mangner N. et al. - *Interactive Cardiovascular and Thoracic Surgery* 2018



INTENDED USE/INDICATIONS

EUROPE: The Perceval/Perceval Plus prosthesis is intended to replace a damaged native aortic heart valve or a malfunctioning aortic prosthesis via open- heart surgery in adult patients: suffering from aortic valve stenosis or steno-insufficiency; with a previously implanted aortic valve prosthesis that is no longer functioning adequately and requires replacement.

US: The Perceval/Perceval Plus bioprosthesis is indicated for the replacement of diseased, damaged, or malfunctioning native or prosthetic aortic valves

CANADA: Perceval Plus bioprosthesis is indicated for the replacement of diseased, damaged, or malfunctioning native or prosthetic aortic valves.

AUSTRALIA: Perceval Plus bioprosthesis is indicated for the replacement of diseased, damaged, or malfunctioning native or prosthetic aortic valves. Perceval prosthesis is indicated for the replacement of a diseased native or a malfunctioning prosthetic aortic valve via open heart surgery. The prosthesis is indicated in patients who meet the following criteria: 1) subjects of age \geq 65 years 2) subjects with aortic valve stenosis or steno-insufficiency.

KEY CONTRAINDICATIONS

Aneurysmal dilation or dissection of the ascending aortic wall; known hypersensitivity to nickel or cobalt alloys; ratio between the sinotubular junction and the annulus diameter greater than 1.3.

KEY WARNINGS

Do not under or oversize the prosthesis. This could result, in possible migration, excessive compression/rupture of the aorta, suboptimal expansion or valve folding that may lead to fatal arrhythmia or hemorrhage, regurgitation or altered hemodynamics. Severe LVOT hypertrophy may prevent optimal expansion of the inflow portion of the stent.

TOP POTENTIAL SIDE EFFECTS

Potential adverse events associated with cardiac valve replacement with a bioprosthesis and the related surgical procedure include: bleeding, cardiac conduction disorders, endocarditis, heart failure, neurological events, non structural dysfunction, structural valve deterioration, thromboembolism.

MRI conditional

For professional use. Instructions for Use are available upon request through the manufacturer's website. Not approved in all geographies. Consult your labeling.



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