



## Teleflex announces Presentations about its UroLift® System treatment at the annual British Association of Urologists (BAUS) meeting

July 10, 2019

*The UroLift® System for the treatment of Benign Prostatic Hyperplasia (BPH) was the subject of three presentations at the Glasgow, Scotland-held urology event: a study of men with acute urinary retention; 4D surgical techniques for insertion of UroLift System implants and a single-centre study showing significant cost savings with the use of the UroLift System treatment compared with traditional surgery.*

WAYNE, Pa.--(BUSINESS WIRE)--Jul. 10, 2019-- Teleflex Incorporated (NYSE:TFX) today thanked its United Kingdom-based Physician Advocates for their Poster Presentations highlighting the UroLift® System, as well as real world proof of its cost effectiveness, at this year's BAUS meeting which finished on June 26<sup>th</sup>.

The first Presentation, by Dr. Mark Rochester\*, Consultant Urologist from Norfolk and Norwich University Hospital, shared promising, early results of the UroLift System treatment of BPH patients with acute urinary retention. Patients enrolled as part of this four-centre U.K. study are some of the first of such patients to have been treated with the UroLift System. Dr. Rochester said: "Patients with acute urinary retention are faced with extremely limited treatment options and have been previously excluded from sponsored Prostatic Urethral Lift [PUL/UroLift System] studies," said Dr. Rochester. "These results demonstrate that the UroLift System treatment can quickly and safely restore urinary flow in the majority of patients with acute urinary retention, providing this challenging patient population with a safe and effective alternative to long-term catheter management and invasive BPH treatment options."

A second U.K. single-centre study showcased at BAUS examined results from 50 patients all treated by Consultant Urologist Dr. Neil Barber\* of NHS Frimley Health Foundation Trust. The patients who received UroLift System implants had an obstructive median lobe or were treated using the 4D, or "stacking technique". Results of the study show statistically significant improvement in BPH symptoms, quality of life and preservation of sexual function for patients treated with the UroLift System, and were similar to the results reported in the pivotal L.I.F.T. and BPH6 studies. Dr. Barber said: "I used this new technique because, as in this reported initial experience, it can be used in men with all shapes of prostates including those men who would previously have been deemed unsuitable candidates for the UroLift System treatment such as those with obstructing median lobes."

Results of a six-month retrospective study, presented by Consultant Urologist Dr. Hemant Nemade of Northampton General Hospital NHS Trust, showed that the UroLift System treatment was more efficient than the current standard of care, Transurethral Resection of the Prostate (TURP). Dr. Nemade said: "We have shown that TURP is a costly and resource intensive procedure. In comparison, the UroLift System procedure reduces costs and increases efficiency, is easy to implement, and requires a shorter training time. Minimal infrastructure changes are needed in order to fully adopt it as a preferred option for most men with BPH".

The UroLift System will now benefit from support from the Government's Accelerated Access Collaborative (AAC) scheme to more rapidly increase its uptake in the NHS. The AAC scheme enables transformative products to reach patients as quickly as possible through streamlined regulatory and market access decisions.

EMEA General Manager, Interventional Urology, Mr. Matt Wiggins, said:

"Last September [2018], the UroLift System became one of the seven products across all specialisms that Accelerated Access Collaborative chose to support, enabling rapid increase in their uptake.

"This is in addition to the national and regional support funding mechanism that the UroLift System receives through the ongoing inclusion in the Innovation and Technology Tariff, a national scheme that NHS England created in order to help innovative treatments reach patients more quickly. The UroLift System will continue to benefit from the support of the Academic Health Science Networks who have direct responsibility for accelerating uptake locally.

"The big picture is that these Government support programmes for the UroLift System are now in their third year and are enabling urologists to offer this minimally invasive alternative to traditional surgery to more BPH patients in NHS hospitals than ever before."

Mr Wiggins added: "For patients, the UroLift System can be life changing. For clinicians, it is an enabling technology, allowing them to deliver benefits for NHS urology departments in terms of reducing overall costs and complications. It can save substantial numbers of bed days and hours of operating theatre time. The UroLift System potentially frees capacity for urologists to focus on critical cancer targets and waiting times, reducing delays in urgent and planned surgery."

The UroLift System is the only BPH treatment option shown to not cause new onset, sustained erectile or ejaculatory dysfunction.\*<sup>1-5</sup> It is a minimally invasive, true day case procedure which can be performed under local anaesthesia. It offers a rapid improvement in symptoms and a return to normal activity within days. Following treatment, patients can usually go home without the inconvenience and discomfort of a catheter."<sup>1,6</sup>

### About the UroLift® System

The FDA-cleared UroLift System is a proven, minimally invasive technology for treating lower urinary tract symptoms due to benign prostatic hyperplasia (BPH). The UroLift permanent implants, delivered during a minimally invasive transurethral outpatient procedure, relieve prostate obstruction and open the urethra directly without cutting, heating, or removing prostate tissue. Clinical data from a pivotal 206-patient randomized controlled study showed that patients with enlarged prostate receiving UroLift implants reported rapid and durable symptomatic and urinary flow rate improvement without compromising sexual function.\*<sup>1,5</sup> Patients also experienced a significant improvement in quality of life. Over 100,000 men have been treated with the UroLift System worldwide. Most common adverse events reported include hematuria, dysuria, micturition urgency, pelvic pain, and urge incontinence. Most symptoms were mild to moderate in severity and resolved within two to four weeks after the procedure. The Prostatic

Urethral Lift procedure using the UroLift System is recommended for the treatment of BPH in both the American Urological Association and European Association of Urology clinical guidelines. The UroLift System is available in North America, Europe, Asia, Australia and New Zealand and in Mexico and Puerto Rico. Learn more at [www.UroLift.com](http://www.UroLift.com).

#### **About Teleflex Interventional Urology**

The Teleflex Interventional Urology Business Unit is dedicated to developing innovative, minimally invasive and clinically effective devices that address unmet needs in the field of urology. Our initial focus is on improving the standard of care for patients with BPH using the UroLift System, a minimally invasive permanent implant system that treats symptoms while preserving normal sexual function. \*<sup>1,5</sup> Learn more at [www.NeoTract.com](http://www.NeoTract.com).

#### **About Teleflex Incorporated**

Teleflex is a global provider of medical technologies designed to improve the health and quality of people's lives. We apply purpose driven innovation – a relentless pursuit of identifying unmet clinical needs – to benefit patients and healthcare providers. Our portfolio is diverse, with solutions in the fields of vascular and interventional access, surgical, anesthesia, cardiac care, urology, emergency medicine and respiratory care. Teleflex employees worldwide are united in the understanding that what we do every day makes a difference. For more information, please visit [www.Teleflex.com](http://www.Teleflex.com).

Teleflex is the home of Arrow®, Deknatel®, Hudson RCI®, LMA®, Pilling®, Rusch®, UroLift® System and Weck® – trusted brands united by a common sense of purpose.

\*Dr. Neil Barber and Dr. Mark Rochester are paid consultants of Teleflex Incorporated.

References:

\*No instances of new, sustained erectile or ejaculatory dysfunction

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