Teleflex to Showcase its Interventional Portfolio Highlighting the MANTA® Vascular Closure Device and the Langston® Dual Lumen Catheters at the PCR London Valves 2019

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WAYNE, Pa., Nov. 11, 2019 (GLOBE NEWSWIRE) -- Teleflex Incorporated (NYSE: TFX), a leading global provider of medical technologies, will showcase its Interventional product portfolio including the MANTA® Vascular Closure Device and Langston® Dual Lumen Catheters at the PCR London Valves being held in London, United Kingdom on November, 17th – 19th, 2019.

Teleflex offers a growing portfolio of specialty-focused solutions designed to improve the health and quality of people's lives around the world. Our portfolio is known for innovative devices that simplify complex procedures and overcome common procedural challenges. Used by Interventionalists worldwide, our device-based solutions include the MANTA® Device and the Langston® Dual Lumen Catheters.

The CE Marked MANTA® Vascular Closure Device is the first commercially available biomechanical vascular closure device specifically designed for closure of large bore femoral arteriotomies following procedures utilizing devices or sheaths ranging in size from 10F to 18F (with maximum outer diameters up to 25F). In the SAFE MANTA® IDE Clinical Trial, the IDE-defined major complication rate occurred in 5.3% of patients and VARC-2 major vascular complication rate occurred in 4.2% of cases. This VARC-2 rate is lower than published rates for suture-mediated closure. (1,2,3,4)

Langston® Dual Lumen Catheters are angiographic catheters with a two-lumen coaxial design which enables simultaneous pressure measurements across the aortic valve. The precise pressure obtained using Langston® Pigtail catheters help clinicians compute the pressure gradient and subsequently the effective orifice area.

Clinicians worldwide rely on the quality and proven clinical utility of our interventional portfolio.

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 access, interventional cardiology and radiology, anesthesia, emergency medicine, surgical, urology 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 teleflex.com.

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

Forward-Looking Statements
Any statements contained in this press release that do not describe historical facts may constitute forward-looking statements. Any forward-looking statements contained herein are based on our management's current beliefs and expectations, but are subject to a number of risks, uncertainties and changes in circumstances, which may cause actual results or company actions to differ materially from what is expressed or implied by these statements. These risks and uncertainties are identified and described in more detail in our filings with the Securities and Exchange Commission, including our Annual Report on Form 10-K.

References:

1. Wood D, et al. Pivotal Clinical Study to Evaluate the Safety and Effectiveness of the MANTA® Percutaneous Vascular Closure Device: The SAFE MANTA® Study. Circulation: Cardiovascular Interventions. 2019 July. Vol 12, Issue 7.
a. Major complications defined as composite of i) vascular injury requiring surgical repair/stent-graft; ii) bleeding requiring transfusion; iii) lower extremity ischemia requiring surgical repair/additional percutaneous intervention; iv) nerve injury (permanent or requiring surgical repair); and v) infection requiring IV antibiotics and/or extended hospitalization
Study sponsored by Teleflex Incorporated or its affiliates.
2. Généreux P, et al. Vascular complications after transcatheter aortic valve replacement. J Am Coll Cardiol. 2012 Sept 18;60(12):1043-1052.
3. Lauten A, et al. Percutaneous left-ventricular support with the Impella 2.5®-assist device in acute cardiogenic shock: results of the Impella-EUROSHOCK-registry. Circ Heart Fail. 2013 Jan;6(1):23-30.
4. Data on file at Teleflex.

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