Boston Scientific

Boston Scientific Announces Schedule For Presentations At Upcoming TCT 2014

Data Will Focus on Areas of Significant Unmet Patient Need, Including Coronary Artery Disease and Aortic Valve Disease

MARLBOROUGH, Mass., Sept. 10, 2014 /PRNewswire/ -- Beginning Saturday, Boston Scientific Corporation (NYSE: BSX) will present data that reinforce the company's commitment to advancing science for life and to developing innovative therapies in interventional cardiology. The company will share results from more than a dozen clinical studies at the 26th Transcatheter Cardiovascular Therapeutics (TCT) meeting, the annual scientific symposium of the Cardiovascular Research Foundation, being held this year in Washington, D.C. from September 13-17.

Coronary artery disease, the most common type of heart disease, is prevalent and expensive - each year approximately 380,000 Americans die from coronary artery disease costing the U.S. approximately $108 billion for services, medications and lost productivity[i]. As a result, there is a continuing need for new therapies and technologies to meet this growing global problem.

"Boston Scientific is dedicated to exploring how our technologies can lead to value-driven solutions for patients with cardiovascular disease," said Keith Dawkins, M.D., global chief medical officer, Boston Scientific. "The data we will share further support the body of evidence demonstrating the clinical value of Boston Scientific solutions that assist interventional cardiologists to meet the changing needs of their patients."

Schedule of Key Data Presentations

Boston Scientific data will be presented during oral sessions and as posters. All programs are Eastern Daylight Time and will be held at the Walter E. Washington Convention Center.

Poster Presentations: Saturday, September 13: 5:00 p.m. – 7:00 p.m., Lower Level, Hall A

Aortic Valves

- Poster presentations of findings from the REPRISE clinical program to evaluate transcatheter aortic valve replacement for severe symptomatic aortic stenosis using the repositionable Lotus™ Valve System
  - REPRISE I, two-year outcomes
  - REPRISE II, one-year outcomes
  - Lotus Valve System vs CoreValve® – comparison of echocardiographic results
  - One-year CT

Coronary Artery Stents

- Poster presentations from clinical and preclinical studies involving multiple stent platforms
  - PLATINUM Small Vessel and Long Lesion Trial; four-year outcomes
  - TAXUS® Element™ Post-Approval Surveillance Study (TE-PROVE); two-year outcomes
  - ION™ Paclitaxel-Eluting Platinum Chromium Coronary Stent System U.S. Post-Approval Registry; two-year outcomes
  - Atherosclerotic Model Impact of Bioresorbable Polymer on the Time Course of Para-Strut Inflammation in Comparison to BMS and Durable Polymer DES

Resistant Hypertension

- Preclinical study of the Vessix Reduce™ Renal Denervation System safety profile through six months

Drug-coated Balloons (DCB)

- Preclinical data for DCB
  - Preclinical pharmacokinetic (PK) and vascular response
  - Preclinical comparative neointimal inhibition

Oral Presentations: Monday and Tuesday, September 15-16

Aortic Valves

- Professor Ian T. Meredith, Ph.D. will present REPRISE II one-year outcomes on Monday, September 15 at 3:55 p.m., Level 2, Room 202 A/B

Left Atrial Appendage Closure (LAAC) Devices

- Vivek Y. Reddy, M.D. and David R. Holmes Jr., M.D. will present the first report of the five-year PROTECT-AF and Extended PREVAIL results, including meta-analysis and implications, on Monday, September 15 at 3:15 p.m., Level 1, Room 146A
- Matthew J. Price, M.D. will present data relating to avoidance of major bleeding with WATCHMAN™ LAAC Device compared with long-term oral anticoagulation, on Monday, September 15 at 5:40 p.m., Level 1, Room 146A
- George Hanzel, M.D. will present findings from a comparison of imputed placebo versus observed ischemic stroke rates in the WATCHMAN™ Trials, on Tuesday, September 16 at 1:48 p.m., Level 1, Room 103A

Coronary Artery Stents

- David E. Kandzari, M.D. will present primary endpoint results from the PROMUS Element™ Plus U.S. Post-Approval Study (PE Plus PAS), on Tuesday, September 16 at 1:10 p.m., Level 1, Room 103A

Featured Speaker: Monday, September 15 at 3:15 p.m.

The Future of Renal Denervation

- Keith Dawkins, M.D. will be joined by Felix Mahfoud, M.D., Krishna Rocha-Singh, M.D., and hypertension specialist Michael A. Weber, M.D. to discuss the current clinical landscape and provide insights into the future horizons for the field of renal denervation. (Booth #1400 in the Exhibit Hall)

In addition to attending the data presentations and featured speaker sessions, conference attendees are invited to visit the Boston Scientific booth (#1400) in the Exhibit Hall, which will be open from 9 a.m. to 5 p.m. Sunday and Monday, September 14 and 15 and from 9 a.m. to 2 p.m. on Tuesday, September 16.

In the U.S., the SYNERGY™ Stent System and the WATCHMAN™ Left Atrial Appendage (LAA) Closure Device are investigational devices, limited by federal (U.S.) law to investigational use only, and not available for sale. In the U.S., the Lotus™ Valve System and the Vessix Reduce™ Renal Denervation System are under development and not available for use or sale. All aforementioned devices are CE marked in the European Union.

About Boston Scientific

Boston Scientific transforms lives through innovative medical solutions that improve the health of patients around the world. As a global medical technology leader for more than 30 years, we advance science for life by providing a broad range of high performance solutions that address unmet patient needs and reduce the cost of healthcare. For more information, visit www.bostonscientific.com and connect on Twitter and Facebook.

Cautionary Statement Regarding Forward-Looking Statements

This press release contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Forward-looking statements may be identified by words like "anticipate," "expect," "project," "believe," "plan," "estimate," "intend" and similar words. These forward-looking statements are based on our beliefs, assumptions and estimates using information available to us at the time and are not intended to be guarantees of future events or performance. These forward-looking statements include, among other things, statements regarding markets for our products, our business plans, presentations, clinical trials and impact of data, product performance and impact, and competitive offerings. If our underlying assumptions turn out to be incorrect, or if certain risks or uncertainties materialize, actual results could vary materially from the expectations and projections expressed or implied by our forward-looking statements. These factors, in some cases, have affected and in the future (together with other factors) could affect our ability to implement our business strategy and may cause actual results to differ materially from those contemplated by the statements expressed in this press release. As a result, readers are cautioned not to place undue reliance on any of our forward-looking statements.

Factors that may cause such differences include, among other things: future economic, competitive, reimbursement and regulatory conditions; new product introductions; demographic trends; intellectual property; litigation; financial market conditions; and future business decisions made by us and our competitors. All of these factors are difficult or impossible to predict accurately and many of them are beyond our control. For a further list and description of these and other important risks and uncertainties that may affect our future operations, see Part I, Item 1A – *Risk Factors* in our most recent Annual Report on Form 10-K filed with the Securities and Exchange Commission, which we may update in Part II, Item 1A – *Risk Factors* in Quarterly Reports on Form 10-Q we have filed or will file hereafter. We disclaim any intention or obligation to publicly update or revise any forward-looking statements to reflect any change in our expectations or in events, conditions or circumstances on which those expectations may be based, or that may affect the likelihood that actual results will differ from those contained in the forward-looking statements. This cautionary statement is applicable to all forward-looking statements contained in this document.

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[i] http://www.cdc.gov/heartdisease/facts.htm accessed August 26, 2014

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