Boston Scientific Announces Schedule of Key Events for Heart Rhythm Society Scientific Sessions

NATICK, Mass., May 10 /<u>PRNewswire-FirstCall</u>/ -- Boston Scientific Corporation (NYSE: BSX) today announced the schedule of the Company's major events and sponsored research at the 31st Annual Scientific Sessions of the Heart Rhythm Society (HRS), May 12 – 15 in Denver. The scheduled clinical presentations will provide new insights for physicians who treat patients with implantable cardioverter defibrillators (ICDs) and cardiac resynchronization therapy defibrillators (CRT-Ds).

Schedule of Events (All times are Mountain Time; all events take place in the Colorado Convention Center unless otherwise indicated.)

• 22nd Annual Michel Mirowski Sudden Cardiac Arrest Symposium and Award Presentation. The Company will sponsor the 22nd Annual Michel Mirowski Sudden Cardiac Arrest Symposium and Award Presentation on Wednesday, May 12, 7:00 - 10:00 p.m. in the Centennial Ballroom of the Hyatt Regency Denver Hotel. The event will feature a keynote address by Richard Page, M.D., followed by the award ceremony honoring this year's Mirowski Award recipient Jose Jalife, M.D., Ph.D. Hugh Calkins, M.D., will then lead an esteemed faculty, including Ronald Berger, M.D., Ph.D., Meleze Hocini, M.D., and Dr. Jalife, in a discussion of the latest clinical data on predictors of sudden cardiac death.

Sessions related to Boston Scientific's landmark MADIT-CRT heart failure trial:

MADIT-CRT is the world's largest randomized study of New York Heart Association (NYHA) Class I and II patients, with more than 1,800 patients enrolled at 110 centers worldwide. Results of the MADIT-CRT trial were published in the October 2009 issue of the *New England Journal of Medicine*. Boston Scientific currently has an application under review with the U.S. Food and Drug Administration (FDA) for the expansion of its CRT-D indication to include high-risk New York Heart Association Class I and II patients with left bundle branch block (1).

- Late-breaking clinical trials: Left Ventricular Lead Position and Clinical Outcome: Findings from MADIT-CRT. Jagmeet Singh, M.D., will present his findings on Thursday, May 13, 8:30 8:45 a.m. in Four Seasons Ballroom 3 4.
- **CRT-D Effectiveness by QRS Duration and Morphology in MADIT-CRT Patients**. This abstract session will be presented on Thursday, May 13, 1:45 2:00 p.m. in Korbel Ballroom 3A.
- **Predictors of Response to Preventive CRT in MADIT-CRT.** This abstract session will be presented on Thursday, May 13, 2:00 2:15 p.m. in Korbel Ballroom 3A.
- One Train of Antitachycardia Pacing is Successful for Fast Ventricular Tachycardia in Patients with Conduction Abnormalities and Left Ventricular Dysfunction: Results from the MADIT-CRT study. This poster session will be featured on Friday, May 14, at 9:00 a.m. in the Exhibit Hall.

(1) High-risk is defined as QRS width >130 milliseconds, Left Ventricular Ejection Fraction < 30 percent and left bundle branch block.

Sessions related to Boston Scientific's ALTITUDE clinical science program:

The ALTITUDE clinical science program analyzes comprehensive data from the LATITUDE® Patient Management system. Boston Scientific has enrolled more than 160,000 patients on the LATITUDE system since its introduction in 2006. The ALTITUDE program enhances understanding of device therapy, outcomes and disease progression. The LATITUDE system enables physicians to schedule remote follow-ups of implantable cardiac device patients to monitor specific device information and heart health status. The system can also detect clinical events between scheduled visits and send relevant data directly to physicians. This in-home monitoring offers convenience and peace of mind for patients.

• Real World ICD/CRT-D Patient Survival: Do Women Fare Better than Men? Gender Comparison in the ALTITUDE Study. This featured poster session will be presented during a reception on Wednesday, May 12, 5:45 - 7:00 p.m. in the Lower D Lobby.

- Comparison of Tachycardia Detection Programming and Shock Incidence in the ALTITUDE Study. This poster session will be featured on Thursday, May 13, at 9:00 a.m. in the Exhibit Hall. F. Roosevelt Gilliam, M.D., will also present the study data in Boston Scientific's booth on Thursday, May 13, at 3:30 p.m. and Friday, May 14, at 9:30 a.m.
- Noise and Oversensing-Related Inappropriate ICD Shocks Diagnosed with Remote Monitoring: The ALTITUDE EGM Study. This abstract session will be presented on Thursday, May 13, 2:15 - 2:30 p.m. in Room 402.

Other sessions of interest:

- Chronotropic Impairment Improves in Patients Responding to Cardiac Resynchronization Defibrillator Therapy: Data from the DECREASE HF trial. This featured poster session will be presented during a reception on Wednesday, May 12, 5:45 - 7:00 p.m. in the Lower D Lobby.
- Electronic Repositioning in CRT devices: Results of the ELECTION Trial. This poster session will be featured on Saturday, May 15, at 9:00 a.m. in the Exhibit Hall.
- ICE-guided Image Integration While Ablating Expedites Ablation of Atrial Fibrillation: Technique and Validation of Method. This poster session will be featured on Friday, May 14, 2:00 - 5:00 p.m. in the Exhibit Hall.

Boston Scientific will present its latest cardiac rhythm management and electrophysiology products at booth #1017.

Boston Scientific is a worldwide developer, manufacturer and marketer of medical devices whose products are used in a broad range of interventional medical specialties. For more information, please visit: www.bostonscientific.com.

Cautionary Statement Regarding Forward-Looking Statements

This press release contains forward-looking statements within the meaning of 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 clinical trials, scientific activities, product performance, competitive offerings and growth strategies. 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 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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