



# HANCOCK® II

bioprosthesis



Simply Reliable

Seize simplicity with the valve that has stood the test of time  
to make your outcome as predictable as your procedure.



Low rates of long-term SVD



Consistent outcomes in all age groups at 20 years



Cinch II system for ease of implant

# HANCOCK® II

## bioprosthesis

### Consider the reliability of the Hancock II bioprosthesis out to 20 years.

The Hancock II bioprosthesis is truly the new gold standard with unprecedented low rates of structural valve deterioration (SVD), especially in patients aged 65 and above.<sup>1</sup>

More Than

# 97%

Freedom from SVD at 20 Years\*

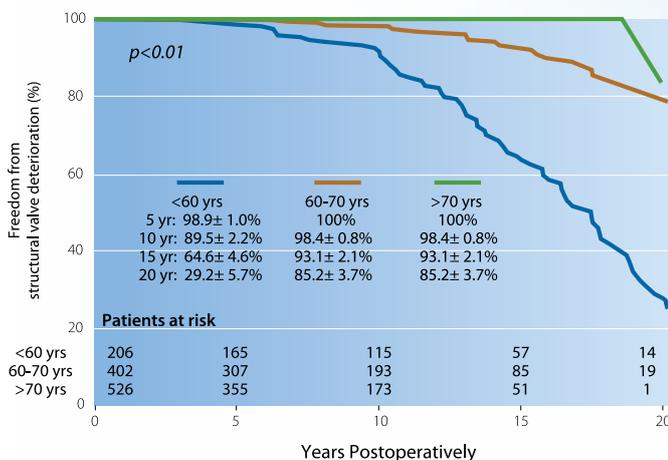
\*97.8 Freedom from SVD at 20 years follow-up in aortic patients aged 65 and above.

### Consider the consistent outcomes of the Hancock II bioprosthesis.

With more than 25 years of clinical experience at two globally recognized centers of excellence, the performance of the Hancock II bioprosthesis has been consistently demonstrated across the globe.<sup>1,2</sup>

### Consider the durability of the Hancock II bioprosthesis in all patients regardless of age.

Twenty years of performance have demonstrated that the long-term performance of the Hancock II bioprosthesis is impressive in all patients, regardless of age.<sup>1,3</sup>



### Excellence in durability and implantability

- T6 (sodium dodecyl sulfate) removes phospholipids from the xenograft tissue.
- Supra-annular sewing ring is mounted flush with the inflow edge of the scalloped stent.
- The Cinch® II implant system serves as an automated deflection system to assist with suture tying behind the stent posts.
- Flexible, lower profile acetal homopolymer stent is designed to absorb stress during the cardiac cycle.<sup>4</sup>

## Seize Simplicity

Simplicity clears the way to let you decide what's best. There are many patient considerations, but only one judgment call. Consider Medtronic's intuitive heart valve solutions in all your decisions.

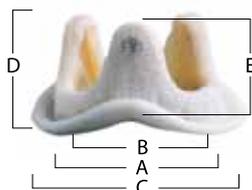
[seizesimplicity.com](http://seizesimplicity.com)

Tirone David et. al, Hancock II Bioprosthesis for Aortic Valve Replacement: The Gold Standard of Bioprosthetic Valves Durability? *Ann Thorac Surg* 2010;90:775-81.

## Materials

- Stent: acetal homopolymer covered with polyester fabric
- Radiopaque annulus ring and stent post markers: Haynes® alloy #25
- Tissue Treatment: Sodium dodecyl sulfate surfactant (T6)
- Cinch® Advanced Implant System: acetal homopolymer

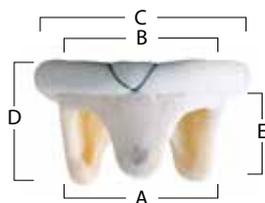
### Hancock® II Aortic Valve, Model T505C



Valve Size (Stent O.D.†) (A) (±0.5 mm)	Orifice Diameter (Stent I.D.†) (B) (±0.5 mm)	Suture Ring Diameter (C) (±1 mm)	Valve Height (D) (±0.5 mm)	Aortic Protrusion (E) (±0.5 mm)
21	18.5	27.0	15.0	12.0
23	20.5	30.0	16.0	13.5
25	22.5	33.0	17.5	15.0
27	24.0	36.0	18.5	15.5
29	26.0	39.0	20.0	16.0

(nominal values, in millimeters) †Equivalent to annulus diameter

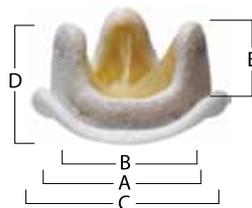
### Hancock® II Mitral Valve, Model T510C



Valve Size (Stent O.D.†) (A) (±0.5 mm)	Orifice Diameter (Stent I.D.†) (B) (±0.5 mm)	Suture Ring Diameter (C) (±1 mm)	Valve Height (D) (±0.5 mm)	Aortic Protrusion (E) (±0.5 mm)
25	22.5	33.0	18.0	13.5
27	24.0	35.0	19.0	14.0
29	26.0	38.0	20.5	15.5
31	28.0	41.0	22.0	17.0
33	30.0	43.0	23.0	17.5

(nominal values, in millimeters) †Equivalent to annulus diameter

### Hancock® II Ultra Aortic Valve, Model T505U



Valve Size (Stent O.D.†) (A) (±0.5 mm)	Orifice Diameter (Stent I.D.†) (B) (±0.5 mm)	Suture Ring Diameter (C) (±1 mm)	Valve Height (D) (±0.5 mm)	Aortic Protrusion (E) (±0.5 mm)
21	18.5	27.0	15.0	12.0
23	20.5	30.0	16.0	13.5
25	22.5	33.0	17.5	15.0
27	24.0	36.0	18.5	15.5
29	26.0	39.0	20.0	16.0

(nominal values, in millimeters) †Equivalent to annulus diameter

## References

1. David T, et al. Hancock II Bioprosthesis for aortic valve replacement: The gold standard of bioprosthetic valves durability. *Ann Thorac Surg* 2010;90:775-81.
2. Valfre D, et al. The fate of Hancock II porcine valve recipients 25 years after implant. *European Journal of Cardio-Thoracic Surgery* 2010;28:141-146.
3. Borger M, et al. Twenty year results of the Hancock II bioprosthesis. *Journal of Heart Valve Disease* January 2006;15:49-56.
4. Reis RL, et al. The flexible stent: A new concept in the fabrication of tissue heart valve prostheses. *J Thorac Cardiovasc Surg.* 1971;62:683-689

Haynes is a registered trademark of Haynes International, Inc.

## Hancock® II Bioprosthesis

**Indications:** For patients who require replacement of their native or prosthetic aortic and/or mitral valves. **Contraindications:** None known. **Warnings/Precautions/Adverse Events:** Accelerated deterioration due to calcific degeneration of bioprosthesis may occur in: children, adolescents, young adults, and patients with altered calcium metabolism (e.g., chronic renal failure, hyperparathyroidism). Adverse events can include: angina, cardiac arrhythmia, cardiac dysrhythmias, death, endocarditis, heart failure, hemolysis, hemolytic anemia, hemorrhage, transvalvular or paravalvular leak, myocardial infarction, nonstructural dysfunction, stroke, structural deterioration, thromboembolism, or valve thrombosis. For additional information, please refer to the Instructions For Use provided with the product.

**CAUTION:** Federal law (USA) restricts this device to sale by or on the order of a physician.

Hancock, Hancock II Ultra and Cinch are registered trademarks of Medtronic, Inc.

## www.medtronic.eu

### Europe

Medtronic International Trading Sàrl.  
Route du Molliau 31  
Case postale  
CH-1131 Tolochenaz  
www.medtronic.eu  
Tel: +41 (0)21 802 70 00  
Fax: +41 (0)21 802 79 00

### United Kingdom/Ireland

Medtronic Limited  
Building 9  
Croxley Green Business Park  
Hatters Lane  
Watford  
Herts WD18 8WW  
www.medtronic.co.uk  
Tel: +44 (0)1923 212213  
Fax: +44 (0)1923 241004