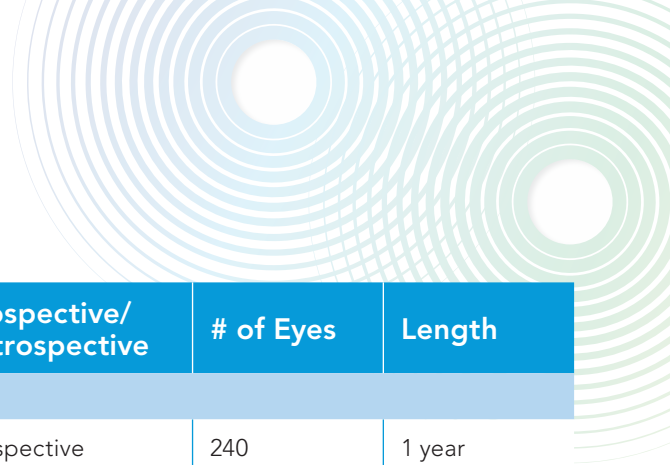


## 100+ PUBLICATIONS!

Glaukos trabecular micro-bypass technologies are the only MIGS devices that have been featured in over 100 peer-reviewed publications and proven safe and effective in hundreds of thousands of eyes worldwide.

### Featured iStent *inject* Publications

Title	Author	Prospective/ Retrospective	# of Eyes	Length
<b>EFFICACY AND SAFETY</b>				
Prospective, randomized, controlled pivotal trial of iStent <i>inject</i> trabecular micro-bypass in primary open-angle glaucoma and cataract: two-year results	Samuelson	Prospective	505	2 years
One-year outcomes following implantation of second-generation trabecular micro-bypass stents in conjunction with cataract surgery for various types of glaucoma or ocular hypertension: multicenter, multi-surgeon study	Clement	Retrospective	290	1 year
Contralateral eye comparison study in MICS & MIGS: Trabectome® vs. iStent <i>inject</i>	Gonnermann	Retrospective	54	1 year
Aqueous angiographic outflow improvement after trabecular microbypass in glaucoma patients	Huang	Prospective	30	-
Intermediate results of iStent or iStent <i>inject</i> implantation combined with cataract surgery in a real-world setting: a longitudinal retrospective study	Guedes	Retrospective	73 (38 with iStent, 35 with iStent <i>inject</i> )	6 months
<b>LONG TERM OUTCOMES</b>				
Prospective, non-randomized, 36-month study of second-generation trabecular micro-bypass stents with phacoemulsification in eyes with various types of glaucoma	Hengerer	Prospective	81	3 years
Glaukos iStent <i>inject</i> trabecular micro-bypass implantation associated with cataract surgery in patients with coexisting cataract and open-angle glaucoma or ocular hypertension: a long-term study	Arriola-Villalobos	Prospective	20	4 years



## Featured iStent Publications

Title	Author	Prospective/ Retrospective	# of Eyes	Length
<b>EFFICACY AND SAFETY</b>				
Randomized evaluation of the trabecular micro-bypass stent phacoemulsification in patients with glaucoma and cataract	Samuelson	Prospective	240	1 year
Clinical evaluation of a trabecular micro-bypass stent with phacoemulsification in patients with open-angle glaucoma and cataract	Ferguson, Berdahl	Retrospective	350	2 years
Outcomes of combined trabecular micro-bypass and phacoemulsification in a predominantly Hispanic patient population	Gallardo	Retrospective	168	1 year
Ocular antihypertensive medication use after iStent implantation concurrent with cataract surgery vs cataract surgery alone in a large US health care claims database	Wang	Retrospective	2,971	2 years
<b>LONG TERM OUTCOMES</b>				
Long-term effectiveness and safety of trabecular microbypass stent implantation with cataract surgery in patients with glaucoma or ocular hypertension: Five-year outcomes	Neuhann	Prospective	65	5 years
Combined iStent trabecular micro-bypass stent implantation and phacoemulsification for coexistent open-angle glaucoma and cataract: a long-term study	Arriola-Villalobos	Prospective	19	5 years
Post-approval study (published in iStent Directions for Use)		Prospective	108	5 years

## Transforming MIGS in More Ways Than One

- **Optimized Outflow:** Two multi-directional stents designed to restore natural outflow
- **Clinically Proven:** Significant IOP reduction across a wide range of clinical studies<sup>1,2</sup>
- **Procedural Elegance:** Predictability and precision to meet the needs of your practice
- **Proven Safety:** Safety profile similar to cataract surgery alone<sup>1</sup>

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**REFERENCES:** 1. iStent *inject*® Trabecular Micro-Bypass System: Directions for Use, Part # 45-0176. 2. Hengerer FH. Personal experience with second-generation trabecular micro-bypass stents in combination with cataract surgery in patients with glaucoma: 3-year follow-up. ASCRS 2018 Presentation.

**INDICATION FOR USE.** The iStent *inject*® Trabecular Micro-Bypass System Model G2-M-IS is indicated for use in conjunction with cataract surgery for the reduction of intraocular pressure (IOP) in adult patients with mild to moderate primary open-angle glaucoma. **CONTRAINDICATIONS.** The iStent *inject* is contraindicated in eyes with angle-closure glaucoma, traumatic, malignant, uveitic, or neovascular glaucoma, discernible congenital anomalies of the anterior chamber (AC) angle, retrobulbar tumor, thyroid eye disease, or Sturge-Weber Syndrome or any other type of condition that may cause elevated episcleral venous pressure. **WARNINGS.** Gonioscopy should be performed prior to surgery to exclude congenital anomalies of the angle, PAS, rubeosis, or conditions that would prohibit adequate visualization of the angle that could lead to improper placement of the stent and pose a hazard. **MRI INFORMATION.** The iStent *inject* is MR-Conditional, i.e., the device is safe for use in a specified MR environment under specified conditions; please see Directions for Use (DFU) label for details. **PRECAUTIONS.** The surgeon should monitor the patient postoperatively for proper maintenance of IOP. The safety and effectiveness of the iStent *inject* have not been established as an alternative to the primary treatment of glaucoma with medications, intraocular inflammation (5.7% for iStent *inject* vs. 4.2% for cataract surgery only), secondary surgical intervention (5.4% vs. 5.0%) and BCVA loss  $\geq 2$  lines  $\geq 3$  months (2.6% vs. 4.2%). **CAUTION:** Federal law restricts this device to sale by, or on the order of, a physician. Please see DFU for a complete list of contraindications, warnings, precautions, and adverse events.