

Pivotal Trials for FDA Approved Micro-Invasive Glaucoma Surgery\*

| Study  | Year | Journal                 | FDA  | Study Design                                     | No. of Eyes      | Follow-up (yrs) | IOP $\leq$ 21 mm Hg no meds | ↓IOP 20% no meds                                   | Postop Mean # meds  | Mean IOP reduction (mm Hg) | Conclusions  |
|--|------|-------------------------|------|--|------------------|-----------------|-----------------------------|--|---|----------------------------|--|
| Samuelson, iStent Study Group (2)              | 2011 | Ophthalmology           | PMA  | RCT  | 111/122          | 1 yr. (233)     | 72%/50% (p<0.001)           | 66%/48% (p=0.003)                                  | 0.2/0.4 (p=0.011)   | 8.4/8.2 (p=NS)             | Pressure reduction on fewer medications was clinically and statistically significantly better 1 year after stent plus cataract surgery versus cataract surgery alone, with an overall safety profile similar to that of cataract surgery alone.                                |
| Craven, iStent Study Group 2 yr. follow-up (3) | 2012 | J Cataract Refract Surg | PMA  | RCT  | 98/101           | 2yr. (199)      | 61%/50% (p=0.036)           | 53%/44% (p=0.09)                                   | 0.3/0.5 (p=NS)  | 8.4/7.5 (p=NS)             | Patients with combined single trabecular micro-bypass stent and cataract surgery had significantly better IOP control on no medication through 24 months than patients having cataract surgery alone. Both groups had a similar favorable long-term safety profile.            |
| Vold, COMPASS Cypass Study Group (4)           | 2016 | Ophthalmology           | PMA  | RCT  | 374/131          | 2yr. (480)      |                             | 77%/60% (p=0.001)                                  | 0.2/0.6 (p<0.001)   | 7.4/5.3 (p<0.001)          | This RCT demonstrated safe and sustained 2-year reduction in IOP and glaucoma medication.  |
| Grover (17)                                    | 2017 | Am J Ophthalmology      | 510K | prospective, multicenter, single-arm, open label | 65 (stent alone) | 1 yr. (61)      |                             | 75.4% (95% CI: 62.7%, 85.5%) on fewer or same meds | 1.7 (excludes nonresponders (9) and patients with missing data (4)) | 6.2 (95% CI: -8.5, -3.9)   | The gelatin stent reduced IOP and medication use without raising unexpected safety concerns, offering a minimally invasive surgical option for refractory glaucoma patients.   |
| Samuelson, HORIZON Investigators (24)          | 2018 | Ophthalmology           | PMA  | RCT  | 369/187          | 2 yr. (528)     | 78%/48% (p<0.001)           | 77%/58% (p<0.001)                                  | 0.3/0.7 (p<0.001)   | 7.6/5.3 (p<0.001)          | This 24-month multicenter randomized controlled trial demonstrated superior reduction in MDIOP and medication use among subjects with mild-to-moderate POAG who received a Schlemm canal microstent combined with phacoemulsification compared with phacoemulsification alone. |

\*all results are depicted in the format (study group/control group)