

Figure 1 shows an overview of the ESPOIR consortium and their location in Europe.

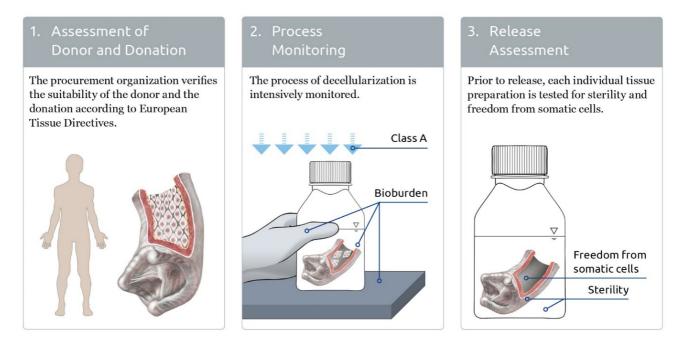


Figure 2 shows a schematic illustration of the decellularisation process.

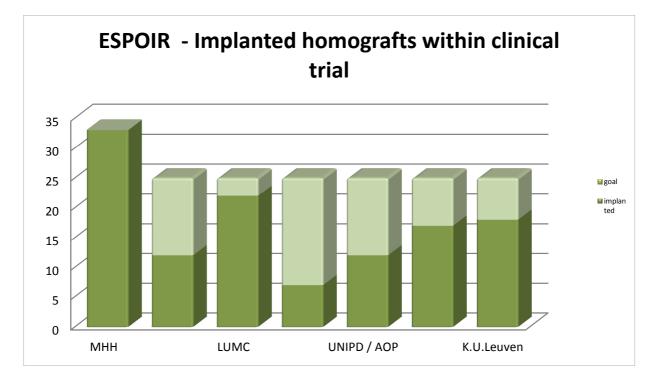


Figure 1 Implanted decellularised homografts per partner within the ESPOIR clinical trial

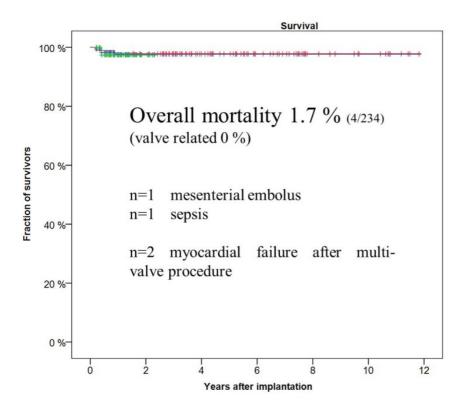


Figure 4 The perioperative and long term mortality is very low with 1.7 % in view of the large number of previous procedures in the patients operated and well within the expected mortality for pulmonary valve replacement according recent literature reports.

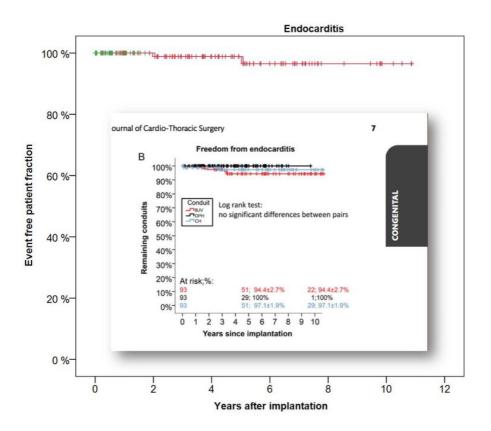


Figure 5 The current risk for DHV endocarditis is 0.5 % per patient year, which is in line with recent literature reports, who report an annual 1 % risk for all prostheses.

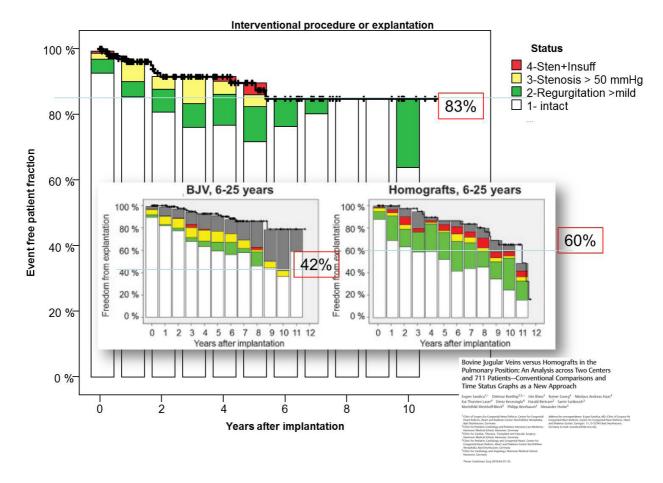


Figure 6 DHV for PVR showed superior freedom from any re-intervention or re-operation after 10 years, which is 83% for DHV in contrast to conventional cryopreserved homografts (60%) and bovine jugular vein conduits (Contegra®) 42%.