

NanoKnife® System Clinical Experience Featured at Society of Surgical Oncology Conference

ALBANY, N.Y.--(BUSINESS WIRE)-- AngioDynamics (NASDAQ: ANGO), a leading provider of innovative, minimally invasive medical devices for vascular access, surgery, peripheral vascular disease and oncology, announced presentations on NanoKnife® System clinical experience were given at the Society of Surgical Oncology (SSO) 2012 conference that took place March 21-24, 2012, in Orlando, Fla.

An oral presentation titled, "Image Guided Irreversible Electroporation in Locally Advanced Pancreatic Cancer: Improved Overall Survival," was presented by Dr. Robert Martin, University Of Louisville, Department of Surgery, Division of Surgical Oncology, Louisville, Ky. Additional authors included Doctors David Hays and Whitney Goodwin, Baptist Health, Little Rock, Ark.; and Doctors Kellie McFarlin, Madhu Prasad and Vic Valanovich, Henry Ford Hospital, Detroit, Mich.

In connection with a registry administered by the University of Louisville, Department of Surgery, Division of Surgical Oncology, 44 patients underwent procedures with the NanoKnife System for unresectable pancreatic cancer from December 2009 to October 2010. Overall survival was evaluated and compared to 85 matched stage three patients treated with standard therapy defined as chemotherapy and radiation therapy alone.

The authors noted that ninety percent of the patients treated with the NanoKnife System had chemotherapy alone, or chemo-radiation therapy, for a median duration of five months before a procedure with the NanoKnife System. Seventy-three percent underwent chemotherapy or chemo-radiation after a procedure with the NanoKnife System. The 90-day mortality in patients who had procedures with the NanoKnife System was two percent. Comparing patients with NanoKnife System procedures to those receiving standard therapy, the authors reported a significant improvement in local progression-free survival, 14 versus six months. Improvement also was reported for distant progression-free survival, 15 versus nine months. Overall survival was 20 months versus 13 months.

A poster presentation, titled "The Successful Implementation of Irreversible Electroporation for Tissue Ablation in Primary and Secondary Tumors of the Liver and Pancreas," also was given. The authors are Doctors Gary Deutsch; H. Walden, Mansoor Beg, Charles Conte, James Sullivan and John Wang, North Shore University Hospital, Hofstra-NSLIJ School of Medicine, Manhasset, N.Y.

Abstracts for the presentations may be found via the following link and are listed as abstract 18 and P243 respectively:

http://www.surgonc.org/uploads/SSO_Annual_Cancer_Symposium_2012_Abstract_Supplement.pdf

In the United States, NanoKnife has been cleared by the FDA for use in the surgical ablation of soft tissue. NanoKnife has not been cleared for the treatment or therapy of a specific disease or condition. This document may discuss the use of NanoKnife for specific clinical indications for which it is not cleared in the United States at this time.

About AngioDynamics

AngioDynamics, Inc. is a leading provider of innovative, minimally invasive medical devices used by professional healthcare providers for vascular access, surgery, peripheral vascular disease and oncology. AngioDynamics' diverse product lines include market-leading ablation systems, vascular access products, angiographic products and accessories, angioplasty products, drainage products, thrombolytic products and venous products. More information is available at www.AngioDynamics.com.

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