

News release**SORIN GROUP: ELA MEDICAL ANNOUNCES FIRST IMPLANTS OF OVATIO DR, THE NEW IMPLANTABLE CARDIOVERTER DEFIBRILLATOR (ICD) WITH TECHNOLOGY THAT SUPPRESSES UNNECESSARY VENTRICULAR PACING.**

Bad Nauheim, Germany – June 15, 2005 – ELA Medical, a Sorin Group Company and innovative leader in the development of cardiac rhythm management (CRM) implantable and diagnostic systems, today announced the first clinical implants of OVATIO DR, its new dual-chamber ICD which features the exclusive AAIsafeR 2 pacing mode.

ELA's proprietary AAIsafeR 2 mode promotes the patient's intrinsic conduction by limiting unnecessary pacing to the ventricle to 0.1% in patients who have normal heart conduction¹.

On June 7, 2005 the first OVATIO DR device was successfully implanted by cardiologist Dr. Johannes Sperzel, Department of Cardiology, headed by Professor Dr. Christian Hamm and cardiac surgeon Dipl. med. Torsten Schwarz, Department of Cardiac Surgery, headed by Professor Dr. Wolf-Peter Klövekorn at the Kerckhoff-Klinik GmbH, Bad Nauheim Germany. The patient was a 51-year-old male with a history of myocardial infarction due to coronary artery disease who experienced episodes of polymorphic ventricular tachycardia. The patient also suffers from Sick Sinus Syndrome leading to symptomatic bradycardia while his intrinsic atrio-ventricular conduction is normal.

Dr. Johannes Sperzel commented: "Because OVATIO DR combines PARAD+, the most specific arrhythmia detection algorithm available today with ELA's AAIsafeR 2, the only pacing mode capable of managing all 3 types of heart blocks, the device has the potential to become the gold-standard therapy for the vast majority of ICD patients. OVATIO DR answers important clinical needs for the physicians but also brings unprecedented benefits to the patient".

Recent studies have highlighted the importance of not only maintaining normal AV synchrony but also of avoiding unnecessary ventricular pacing.

Excessively pacing the ventricle has been shown to be harmful to patients as it may increase the risk of mortality and hospital admissions due to heart failure².

A study published recently³ suggests that in some patients paced more than 50% of the time via an ICD, there is an increased risk of new or worsened heart failure and ventricular tachyarrhythmia.

AAIsafeR 2 delivers ventricular pacing only when intrinsic cardiac impulses from the atrium are not conducted to the ventricle. When intrinsic cardiac conduction resumes, AAIsafeR 2 automatically reverts back to physiological atrial-based pacing. AAIsafeR pacing technology has been available in Europe since September 2003 in ELA's Symphony pacemakers.

By continuously monitoring the patient's conduction system, the AAIsafeR 2 pacing mode allows OVATIO DR to deliver ventricular pacing only when needed. OVATIO DR is intended for patients who are at risk for

¹ SAVE R pre-market clinical study results (September 2004). Cumulative percent pacing stored in the pacemaker data.

² The David Trial Investigators. JAMA, December 25, 2002 – Vol. 288, No. 24: 3115-3123.

³ Steinberg JS, Fischer A, Wang P, Schuger C, Daubert J, McNitt S, Andrews M, Brown M, Hall WJ, Zareba W, Moss AJ ; MADIT II investigators. The Clinical Implications of Cumulative Right Ventricular Pacing in the Multicenter Automatic Defibrillator Trial II. Journal of Cardiovasc Electr, April 2005 - Vol. 16 No. 4: 359-364.

sudden cardiac death but who also have less frequent pacing needs due to an almost normal electrical conduction system.

Another implant of an OVATIO DR took place in the United Kingdom on June 10. Doctor Vince Paul, Consultant in Interventional Cardiology and Electrophysiology of St. Peter's Hospital, Chertsey performed the implant. The OVATIO DR was successfully implanted in a 50-year old man presenting with hypertrophic cardiomyopathy, incidence of non-sustained ventricular tachycardia and good atrio-ventricular conduction.

Dr Paul stated that he considered the patient an excellent candidate for AAIsafeR and hoped that the patient would significantly benefit from this innovative pacing mode.

Dr. Vince Paul also added: "With AIDA+ (Automatic Interpretation for Diagnosis Assistance), ELA's powerful diagnostic tool, OVATIO DR offers me new insights into the management of my ICD patients. In addition, the intuitive and user-friendly display of important patient information makes OVATIO DR post-implant office visits easier and significantly reduces follow-up session times".

Physiologically-shaped and long-lasting, OVATIO DR offers 34 joules of maximum output, particularly useful for patients with high defibrillation threshold.

"The integration of AAIsafeR 2 into OVATIO DR is a critical advancement for ICD patients because they will benefit, like some 10,000 Symphony patients, from ELA's industry-leading pacing technology. With OVATIO DR, our research and development teams have used all their know-how and technical expertise to develop ICD therapy that delivers the highest standard of patient care and incorporates safety features with significant patient benefits", said André-Michel Ballester, president of the Sorin Group's CRM business unit.

The roll-out of the complete OVATIO ICD family is expected in the last quarter of 2005 together with ELA's new generation of defibrillation leads.

ELA Medical, a Sorin Group Company, designs and manufactures implantable pacemakers and ICDs, leads, Holter equipment and electrophysiology catheters and markets them in Europe, the U.S. and Japan.

The Sorin Group (Reuters code: SORN.MI), a world leader in the development of medical technologies for cardiac surgery, offers innovative therapies for cardiac rhythm management, interventional cardiology and the treatment of chronic kidney diseases. The companies of the Sorin Group are: Dideco, CarboMedics, COBE Cardiovascular, Stöckert, Mitroflow, ELA Medical, Sorin Biomedica, Belco and Soludia. The Sorin Group has about 4,750 employees working at facilities in more than 80 countries throughout the world to serve over 5,000 public and private treatment centers.

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