```
1
    CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
2
         IN THE UNITED STATES DISTRICT COURT
3
            FOR THE DISTRICT OF DELAWARE
4
     ENDOHEART AG,
6
             Plaintiff, ) Civil Action No.
7
                           )1:14-cv-01473-LPS-CJB
8
        v.
     EDWARDS LIFESCIENCES )
9
     CORPORATION,
10
            Defendant.
11
12
13
                  30(b)(1) Videotape Deposition of:
14
                  CHRISTOPH H. HUBER, M.D.
15
                  Taken by: Edwards Lifesciences
                  Date: January 27, 2016
16
17
                  Location: Paul Weiss - New York
18
                  Time: 8:30 a.m.
19
20
21
22
23
24 Reporter:
25
    Greg DiDonato, CSR, RPR, CM, CP, CRR
```



	CHRISTOPH H. HUBER	, 11.	.D 01/27/2016 Pages 25
1	Page 2 CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER	1	Page 4 CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
2	Wednesday, January 27, 2016	2	P-R-O-C-E-E-D-I-N-G-S
3	8:30 A.M.	3	THE VIDEOGRAPHER: We're now
4		4	recording on the record. My name is Michael
5	Videotape 30(b)(1) deposition of Christoph	5	Drenkalo, certified legal specialist with DTI.
6	Hans Huber, M.D., pursuant to Notice, taken by	6	Today's date is January 27, 2016. The time is
7	Defendant Edwards Lifesciences, held at the	7	8:55 a.m.
8	law offices of Paul Weiss Rifkind Wharton &	8	We're at the office of Paul Weiss,
9	Garrison LLP, 1285 Avenue of the Americas, New	9	1285 Avenue of the Americas, New York, New
10	York, New York 10019, before Gregory T.	10	York to take the video deposition of
11	DiDonato of DTI Court Reporting, Certified	11	Dr. Christoph Huber in the matter of Endoheart
12	Realtime Reporter and Notary Public of the	12	AG versus Edwards Lifesciences Corporation,
13	State of New York, there being present:	13	United States District Court for the District
14	sease of new form, energ being problem.	14	of Delaware.
15			
16		15	Counsel will please introduce
		16	themselves for the record.
17		17	MR. BLOOMBERG: Mark Bloomberg, Zuber
18		18	Lawler & Del Duca representing plaintiff
19		19	Endoheart and the witness.
20		20	MR. MALONEY: John C. Maloney, Jr.,
21		21	from Zuber Lawler & Del Duca also representing
22		22	Endoheart and the witness.
23		23	MR. ABRAMS: Hugh Abrams from Sidley
24		24	Austin representing Brigham and Women's
25		25	Hospital, the intervenor.
	Page 3		Page 5
1 2	CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER APPEARANCES:	1	CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
3	FOR THE PLAINTIFF AND THE WITNESS:	2	MS. NYARADY: Catherine Nyarady from
4	MARK BLOOMBERG, ESQ. JOHN C. MALONEY, JR., ESQ.	3	Paul Weiss representing Edwards Lifesciences
5	Zuber Lawler & Del Duca LLP	4	Corporation, and I'm joined with my colleagues
6	420 Lexington Avenue Suite 2640	5	also from Paul Weiss, William O'Hara and Kira
"	New York, NY 10170	6	Davis.
7	mbloomberg@zuberlaw.com	7	THE VIDEOGRAPHER: The court reporter
8	jmaloney@zuberlaw.com	8	is Greg DiDonato who will first swear in the
9	FOR THE DEFENDANT:	9	interpreter and then the witness.
10	CATHERINE NYARADY, ESQ. WILLIAM O'HARE, ESQ.	10	THE REPORTER: Raise your right hand,
11	KIRA A. DAVIS, ESQ.	11	please.
12	Paul Weiss Rifkind Wharton & Garrison LLP 1285 Avenue of the Americas	12	Do you solemnly swear that you will
1-2	New York, NY 10019	13	interpret the testimony and colloquy of
13	cnyarady@paulweiss.com	14	counsel to the best of your ability?
14	<pre>wohare@paulweiss.com kdavis@paulweiss.com</pre>	15	THE INTERPRETER: Yes, I do.
15		16	THE REPORTER: Raise your right hand,
16	FOR THE INTERVENOR:	17	please.
	HUGH ABRAMS, ESQ.	18	Do you solemnly swear to tell the
17	Sidley Austin LLP One South Dearborn	19	truth, the whole truth, and nothing but the
18	Chicago, IL 60603	20	truth, so help you God?
1,0	habrams@sidley.com	21	THE WITNESS: Yes, I do.
19 20		22	MR. BLOOMBERG: Just for a quick
21		23	housekeeping matter, we're going to want to
22	ALSO PRESENT:	24	designate the matter as "Highly Confidential"
24	Michael Drenkalo, Videographer	25	under the Protective Order for all three days.
25	Petra S. Gehrung, Interpreter	ر کا ا	and the freecond order for all times days.

Petra S. Gehrung, Interpreter

risk of puncture?

Pages 14..17

Page 17

Page 14
CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER

- Q. So, you're not claiming to have invented the transcatheter heart valve; right?
- A. I don't claim to have invented the device; no.
- Q. And you haven't -- did you ever make a guide wire or did you always use off-the-shelf guide wires?
- A. We used guide wires that were available at the moment for the animal experiments, for example.
- Q. So, whatever was available at the hospital, you were using, you didn't build the guide wire; right?
- A. No. I didn't specifically use soft guide wires in animals. I used whatever guide wires, because we took guide wires that were already used in patients for cost reasons. Those guide wires are sometimes they might have been soft, sometimes they have been hard, etcetera, but we used those guide wires in animals, whatever we had at hand, really.
- Q. So, for the animals, you didn't, you didn't think that the type of guide wire mattered, you could use any type of guide

Page 16
CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
make sure I understand. One is because of the stenosis, the size of the aortic opening varies between pigs and humans; right?

- A. Yes.
- Q. And the other is the risk of injury depending on what guide wire you use?
- A. Yes
- Q. So, I want to take those in pieces. Let's start with the risk of injury, and I just want to make sure I understand the concept.

You're saying that for a -- you don't want to puncture an artery or, I mean, is that basically what you're saying, you don't want to puncture an artery if you use, for example, a stiff guide wire and you poke through something?

- A. There's a technique called Seldinger technique, that is a known technique, and it's for someone skilled in the art normal that he starts the procedure with a wire that has less risk of traumatizing the tissue.
- Q. So, this was already, it was known that using a soft guide wire and, in fact,

Page 15

CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER wire; is that right?

- A. Yes, that's right.
- Q. So, can you explain to me why, as I understand it, your position is that in humans it matters what type of guide wire you used; is that correct?
 - A. That's correct.
- Q. Can you explain to me why it doesn't matter in pigs but it does matter in humans?
- A. Well, there's an important difference. In pigs, you cannot create what is called an animal model that simulates accurately aortic valve stenosis. Pigs are healthy animals with large aortic openings, and risk of injury to the pig is, of course, not as important as in a patient under the clinical setting.

So, in pigs, we just had to use anything that allowed us to create the rail from getting to the heart, reaching to the aortic valve and beyond, and relatively it was absolutely of no matter or concern.

Q. I think there were two separate concepts that you just covered, and I want to

CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER what we referred to already as the starting guide wires that were commercially available, would you agree with me that it was generally known that those were good for starting the procedure because they were softer and less

A. That's right; at least for target organs like vessels, because at that moment in time, at least by my best knowledge, nobody tried this technique in pigs. So, I didn't know what was best for pigs; therefore, I didn't care, I took whatever wire I had at hand, as I mentioned.

But accessing artery or vein, usually it was performed by using wire that was less traumatic in a clinical setting.

- Q. So, turning to the second point you had about size of the opening in the pig versus the human, can you explain to me how your invention solves that problem that you've identified?
- A. So, as I mentioned with pigs, there is no heart, no animal model that allows you to accurately simulate aortic valve stenosis,

/www.veslaw.net/helb



Page 18

CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER for example, pigs. So, I was left with one issue. The pig animals were presented and seemed to work very fine, but I didn't know what happened if you had aortic valve stenosis to cope with.

1 2

And this was one of my reflections and issues I had to solve to get that procedure successful; because, ultimately, it was supposed to save the patients' lives, and that's what I wanted, that's what I was trained for, that's what my aim is and profession is, to help patients and save patients lives.

While I didn't have the solution while doing those animal experiments, and while I was on my way from Switzerland from Lausanne with my wife, pregnant with twins, on my way from Geneva to Boston, I stood at Geneva airport, and while I was quite stressed we might miss the plane, even though we got there in time, and we couldn't move as fast as we wanted to, but we were standing there watching people trying to push through the gates. And there was quite a large crowd

Page 19
CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
outside the gates, and obviously there was
very little, only one by one, like a drop by
drop going through the gate.

And this interesting concept suddenly made me aware that the solution was right in front of my eyes; that the gate was the stenosis, and all the people trying to get through the gate were, was the blood in the left ventricle. And they tried to push through, and people in the middle were principally dragged nearly through that gate.

And that's where I said, well, yes, that's the trick, that's the invention; that if we can, if this works, then that's the solution to the problem.

Q. And did you -- so, okay.

You saw the people going through the gate, and you thought about this drag. How did that then translate into the next thought, how did that lead to, oh, it's a soft guide wire, or whatever your next realization was?

A. Well, it was pure deduction, I said, if people, this is a flexible mass of people, if I put anything into that stream that is

Page 20 CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER soft enough to help by the stream to go to the gate, go through the aortic valve, that will be most likely the solution.

I didn't have proof of concept, but for me that was the key element to my invention that bonded and joined all different steps that are found in claim 1 to make the whole claim 1 work; that was to take a wire that was configure, or configured, you call it soft, to allow it to go through the narrow passageway, the gate or the aortic valve, and aided or helped by the blood flow to do so.

Q. And I didn't mean to put my words in place of yours, and I did call it soft, you're right.

Is that fair, are soft guide wires as a category configured to conform to the direction of blood flow?

A. I would say that's fair to say, a soft guide wire, as you mentioned, there are different grades of softness, and I'm not a med-tech technical specialist, but there is softnesses understood as being a wire that could do the job, or firmer wires that are in

Page 21

1 CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
2 the intermediate range, and then there are
3 other wires that are stiff wires. But there's
4 a clear group of wires that we call soft
5 wires, and those wires, suddenly some of those
6 wires would work.

Q. Some but not all?

A. This is something I haven't tried; so, I couldn't give you an honest answer to that. I would assume that if they are in this category, this group of designated wires, it would work; but I don't have personal experience with it, so I couldn't give you the honest truth about that.

Q. So, again, I just want to make sure I understand what you're saying.

You're guess is that soft guide wires would all conform to the direction of blood flow, but because you haven't tried every single one, you can't say for sure; is that right?

A. Yes. I would agree on this statement.

Q. So, then you also mentioned there's a category of intermediate guide wires, and

://www.yeslaw.net/help



3

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

1

2

3

4

5

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

Page 24

Page CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER that's very helpful to me, because when I've been looking into the guide wire, I noticed that some of them are called soft, some are called stiff, and there are some that aren't called anything. And so, maybe that's the intermediate category.

1 2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

But, for the intermediate category, how could you tell whether or not a guide wire in the intermediate category is configured to conform to a direction of blood flow?

A. Well, I didn't use wires, at least not in patients that were in the immediate category. So, it's difficult to give you an exact answer on that. And I don't know what you define at the end of intermediate categories, because it doesn't mean the wire is marked with soft, or with stiff, it doesn't mean it is intermediate, and I don't know if there is a definition of an intermediate wire; so, it would be really challenging for me to give you any clear-cut definitions.

What I know is that principally there are two types of wires that are being used, soft wires and stiff wires; The rest is all

CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER

that makes the answer much easier. That could be a soft guide wire, that could as well be a

hard guide wire that has capabilities of

5 behaving like a soft guide wire for part of 6

its length.

So, let's put the term as it is put in claim 1 and issued by the U.S. Patent & Trademark Office, I'll be happy to read that: "Configured to conform to the direction of blood flow." That's why it has been put that

Q. And so, a couple of questions on that.

You were talking about a stiff guide wire could have a portion that, I'll use my term, softer. So, I've seen guide wires, for example, in some in some of the brochures that say stiff with a floppy tip.

Would that be examples of what you're talking about, most of the guide wire will be stiff but at the end it will be much softer or floppier?

A. Put the question back to you. Do you think that wire would be aided by the blood

Page 23

```
CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER
1
2
     interpretation.
3
              THE REPORTER: Interpretation?
4
              THE WITNESS: Interpretation;
5
     correct.
```

Q. So, forget the label, intermediate. But just with respect to any guide wire, and if it makes the question easier, you know, you can assume it's a stiff guide wire -- well, let me ask you this.

Are there stiff guide wires that could fall into the category of being configured to conform to a direction of blood flow?

A. No. It depends how you define wire and what part of the wire you define.

Wire can be having uniform characteristics over its whole length, but wire could have nonuniform characteristics over its whole length; wire could have a part of the wire that is very soft and a part of the wire that is more rigid.

Now, how to define this wire by using the term soft or hard is tricky; but if you use the term that is, wires configured, then

Page 25 CONFIDENTIAL - PURSUANT TO PROTECTIVE ORDER flow if just a very centimeter at the tip really is soft?

If you read the claim here it says, the feeding continues, configured to conform to the direction of blood flow, the feeding continuing such that the wire follows the blood flow until length of the wire extends from the ventricle apex of the heart.

That will give you some indication how long this floppy wire has to be. It's just the tip. The rigidity of the rest of the wire will not really help it to aid it or direct it by the blood flow.

Q. I see. So, it is really a longer piece than just the tip you're talking about?

> THE REPORTER: Verbally, sir. THE WITNESS: Sorry? THE REPORTER: Respond verbally. MS. NYARADY: You were nodding. A. Yes. Sorry.

Q. Can I ask you a question?

What is, if you know, I see the term soft, and then I see the term floppy. Are those terms interchangeable in your field?



DOCKET

Explore Litigation Insights



Docket Alarm provides insights to develop a more informed litigation strategy and the peace of mind of knowing you're on top of things.

Real-Time Litigation Alerts



Keep your litigation team up-to-date with **real-time** alerts and advanced team management tools built for the enterprise, all while greatly reducing PACER spend.

Our comprehensive service means we can handle Federal, State, and Administrative courts across the country.

Advanced Docket Research



With over 230 million records, Docket Alarm's cloud-native docket research platform finds what other services can't. Coverage includes Federal, State, plus PTAB, TTAB, ITC and NLRB decisions, all in one place.

Identify arguments that have been successful in the past with full text, pinpoint searching. Link to case law cited within any court document via Fastcase.

Analytics At Your Fingertips



Learn what happened the last time a particular judge, opposing counsel or company faced cases similar to yours.

Advanced out-of-the-box PTAB and TTAB analytics are always at your fingertips.

API

Docket Alarm offers a powerful API (application programming interface) to developers that want to integrate case filings into their apps.

LAW FIRMS

Build custom dashboards for your attorneys and clients with live data direct from the court.

Automate many repetitive legal tasks like conflict checks, document management, and marketing.

FINANCIAL INSTITUTIONS

Litigation and bankruptcy checks for companies and debtors.

E-DISCOVERY AND LEGAL VENDORS

Sync your system to PACER to automate legal marketing.

