

DISCUSS ALL TREATMENT OPTIONS WITH YOUR DOCTOR.

Your doctor can describe the risks and benefits and help you decide which treatment option is right for you.

If you have significant, symptomatic tricuspid regurgitation, explore your treatment options.

The right treatment can help you feel better and improve your quality of life.



SYMPTOMS OF TRICUSPID REGURGITATION CAN INCLUDE:

- Shortness of breath
- Fatigue or declining exercise capacity
- Swollen feet, ankles, abdomen, or neck
- Lightheadedness

Left untreated, tricuspid regurgitation may lead to right heart failure and eventually death.

UNDERSTANDING YOUR HEART

HOW YOUR HEART WORKS

Your heart beats thousands of times per day, pumping dozens of gallons of blood each hour. It pumps blood through your lungs, where the blood is replenished with oxygen, and pumps it back out to the rest of your body.

The heart has four chambers; the upper two chambers are called the **right atrium** and **left atrium**, and the lower two are called the **right ventricle** and **left ventricle**.

Heart valves are the doorways between these chambers. They open to let blood pass from one chamber to the next, closing quickly between heartbeats so blood does not flow backward.

UNDERSTANDING TRICUSPID REGURGITATION

The information provided is not intended for medical diagnosis or treatment as a substitute for professional medical advice. Consult with a physician or qualified healthcare provider for appropriate medical advice.

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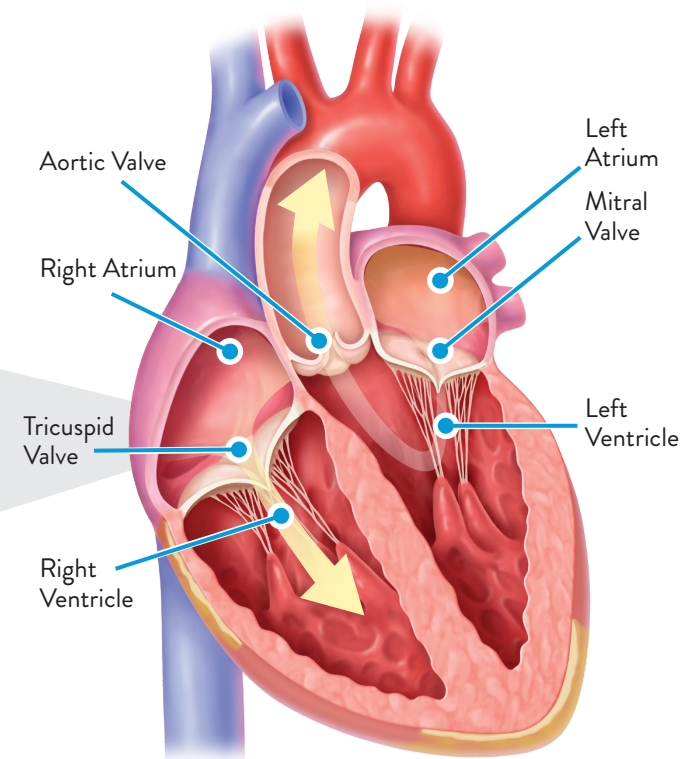
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THE TRICUSPID VALVE AND TRICUSPID REGURGITATION

The **tricuspid valve** is located between the right atrium and right ventricle of your heart. In a normally functioning tricuspid valve, blood flows in a single direction from the right atrium into the right ventricle. When the leaflets (or flaps) of your tricuspid valve do not close properly, some blood flows backward through the valve into the right atrium. This is called tricuspid regurgitation (or TR).

To compensate and keep sufficient blood flowing through the body, the right ventricle pumps harder. This strain can lead to other heart complications.



Note: Pulmonary Valve not shown



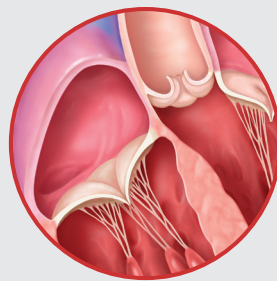
WHAT IS TRICUSPID REGURGITATION?

Tricuspid regurgitation occurs when the leaflets of the valve are not closing properly. There are many causes of tricuspid regurgitation including:

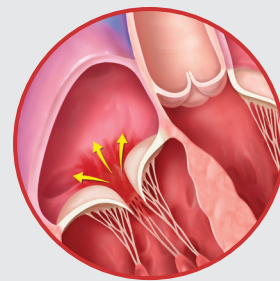
- Left valve disease (aortic or mitral)
- Left ventricle dysfunction
- Pulmonary hypertension
- Atrial fibrillation
- Pacemaker lead

You may have one, or more than one, of these causes. If you have tricuspid regurgitation that allows a very large amount of blood to backflow into your right atrium, your doctor may diagnose you as having tricuspid regurgitation that is moderate or severe.

If you also have symptoms of congestive heart failure or other related heart conditions, your disease may be classified as significant, symptomatic tricuspid regurgitation.



Normally functioning tricuspid valve



Improperly functioning tricuspid valve allowing blood to flow back through the tricuspid valve into the right atrium (tricuspid regurgitation)

WHAT ARE YOUR TREATMENT OPTIONS?

Treatment for tricuspid regurgitation depends on how severe it is and how sick you are. Medications are available to reduce symptoms, such as fluid buildup in the lungs and legs, but no medication addresses the underlying problem with your tricuspid valve.

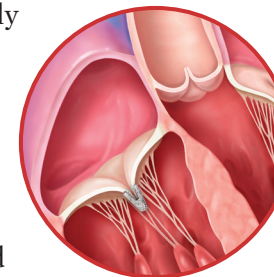
Tricuspid regurgitation can only be treated in two approved ways: tricuspid valve surgery, or tricuspid transcatheter edge-to-edge repair (T-TEER). A team of heart doctors will evaluate you to determine the right treatment option.

TRICUSPID VALVE SURGERY

There are two types of surgery to treat tricuspid regurgitation: tricuspid valve repair, and tricuspid valve replacement. Tricuspid valve surgery is most often performed when surgery is being done concurrently on the left side of the heart.

TRICUSPID TRANSCATHETER EDGE-TO-EDGE REPAIR (T-TEER)

Tricuspid TEER is a minimally invasive procedure that may be an option for patients who are too sick for surgery (also referred to as being high-risk for surgery). Unlike surgery, TEER does not require opening the chest and temporarily stopping the heart.



In the TEER procedure, the implant will be placed on two or more leaflets of your tricuspid valve. This reduces tricuspid regurgitation, and the valve continues to open and close on either side of the implant, allowing blood to flow through. Many times, more than one implant will be used on your tricuspid valve leaflets.



TREATMENT CAN LEAD TO A MORE COMFORTABLE, ACTIVE LIFE.

Please share this guide with your family, and discuss all treatment options with your doctor.

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