



Abbott

EMBRACE EXCELLENCE EVERY DAY

With the HeartMate 3™ Left
Ventricular Assist Device for
the Treatment of Advanced
Heart Failure

BOUBA

HeartMate 3™ LVAD
Recipient



HEART FAILURE AND HEARTMATE 3™ LVAD THERAPY

- Heart failure is a serious condition that can get worse over time.¹
- For people who have advanced heart failure, medicines alone may not be enough and additional therapies need to be considered.²
- A left ventricular assist device (LVAD) is a small, implantable device that helps the heart pump blood.
- The HeartMate 3™ LVAD is the latest advancement in LVAD therapy, shown to reverse the symptoms of heart failure, improve long-term survival and help people have a better quality of life.³
- Thousands of people with advanced heart failure are living longer, active lives with a HeartMate 3™ LVAD.^{3,4}
- Talk to your doctor about the risks, such as stroke and thrombosis, and benefits of HeartMate 3™ LVAD therapy to find out whether it is an option for you.



HEART FAILURE MEANS THAT THE **HEART HAS BECOME TOO WEAK** TO SUPPORT THE BODY

Heart failure — sometimes called a weak heart — occurs when the heart is unable to pump enough blood to meet the body's needs. When this occurs, you may feel tired and short of breath, even at rest. It can significantly limit your physical activity and result in a poor quality of life.

HEART FAILURE IS A SERIOUS DISEASE THAT CAN LEAD TO DEATH IF NOT MANAGED AND TREATED

6.2 million+

people in the
United States have
heart failure⁵

~ 377,000

people with heart
failure die every year
in the United States⁶



People hospitalized
for heart failure have
a median survival of

2.4 years⁷

SIGNS OF HEART FAILURE⁸

☒ Check off your symptoms



☐ Tiredness/
fatigue



☐ Weight gain



☐ Lightheadedness and
confusion



☐ Trouble
breathing



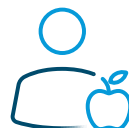
☐ Swelling or
feeling bloated



☐ Rapid heart rate



☐ Persistent
coughing



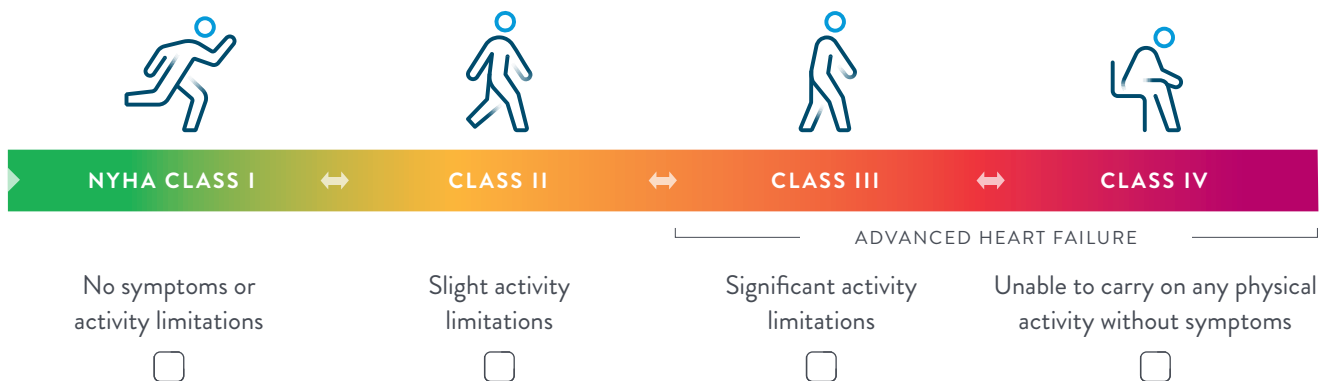
☐ Nausea or lack
of appetite

HEART FAILURE CAN GET WORSE OVER TIME

As symptoms get worse, your doctor may adjust your medicine and recommend getting an evaluation for advanced options to manage your heart failure.²

NEW YORK HEART ASSOCIATION (NYHA) CLASSES OF HEART FAILURE⁹

☒ Check where you fall on the pathway



IS HEART FAILURE IMPACTING YOUR LIFE?

☒ Check off all that apply

IN THE LAST 30 DAYS, HAVE YOU BEEN ABLE TO:

- ☐ Participate in activities you enjoy?
- ☐ Shower and get dressed without stopping?
- ☐ Go grocery shopping or take a walk without getting tired or short of breath?
- ☐ Sleep lying down without having symptoms?

QUESTIONS TO ASK YOUR DOCTOR:

- What NYHA Class is my heart failure?
- How is my heart failure likely to progress (or get worse)?
- What advanced therapies are available if my heart failure gets worse?



FOR PEOPLE WITH ADVANCED HEART FAILURE, **MEDICINES ALONE MAY NOT BE ENOUGH²**

If you have advanced heart failure, you and your heart require special care.

In its early stages, heart failure can often be managed with medicines and a healthy lifestyle. As the disease progresses and the heart becomes weaker, medicines may no longer work as well. Relying on medicines only can result in a high risk of death.¹⁰

Your doctor may discuss additional options with you such as implantable devices, heart transplantation, palliative care or hospice. It may also be recommended that you see a heart failure specialist to be evaluated for advanced therapies to manage and treat your heart failure.

While there is no cure for heart failure, there are options and therapy choices available today for advanced heart failure.

If you are taking your medicines and still have heart failure symptoms, it is important to talk to your doctor.



for people with
advanced heart failure
on medical therapy¹¹



for people with advanced
heart failure on medical
therapy and with
1 or more heart failure
hospitalizations¹⁰

THE HEARTMATE 3™ LVAD IS A TREATMENT OPTION FOR PEOPLE WITH ADVANCED HEART FAILURE

An LVAD is a proven, well-known choice for people with advanced heart failure (NYHA Class IIIB or IV symptoms). It's a small device that is connected to your heart to help it pump oxygen-rich blood throughout your body.





“My life changed, for the better. I woke up refreshed. I woke up feeling like a million bucks.”

MARTHA

HeartMate 3™ LVAD
Recipient

This testimonial relates an account of an individual's response to the treatment. This patient's account is genuine, typical and documented. However, it does not provide any indication, guide, warranty or guarantee as to the response other persons may have to the treatment. Responses to the treatment discussed can and do vary and are specific to the individual patient.

UNDERSTANDING THE HEARTMATE 3™ LVAD

The HeartMate 3™ LVAD is the most advanced LVAD yet. It uses Full MagLev™ Flow Technology, which helps protect the blood as it flows through the pump.

Thousands of people with advanced heart failure are living longer, active lives with a HeartMate 3™ LVAD.^{3,4}



1

HEART PUMP (LVAD)

Connected to the left side of your heart and moves blood from your heart to the rest of your body.

2

DRIVELINE

Transfers power and information between the controller and the heart pump. This component is partially outside of your body.

3

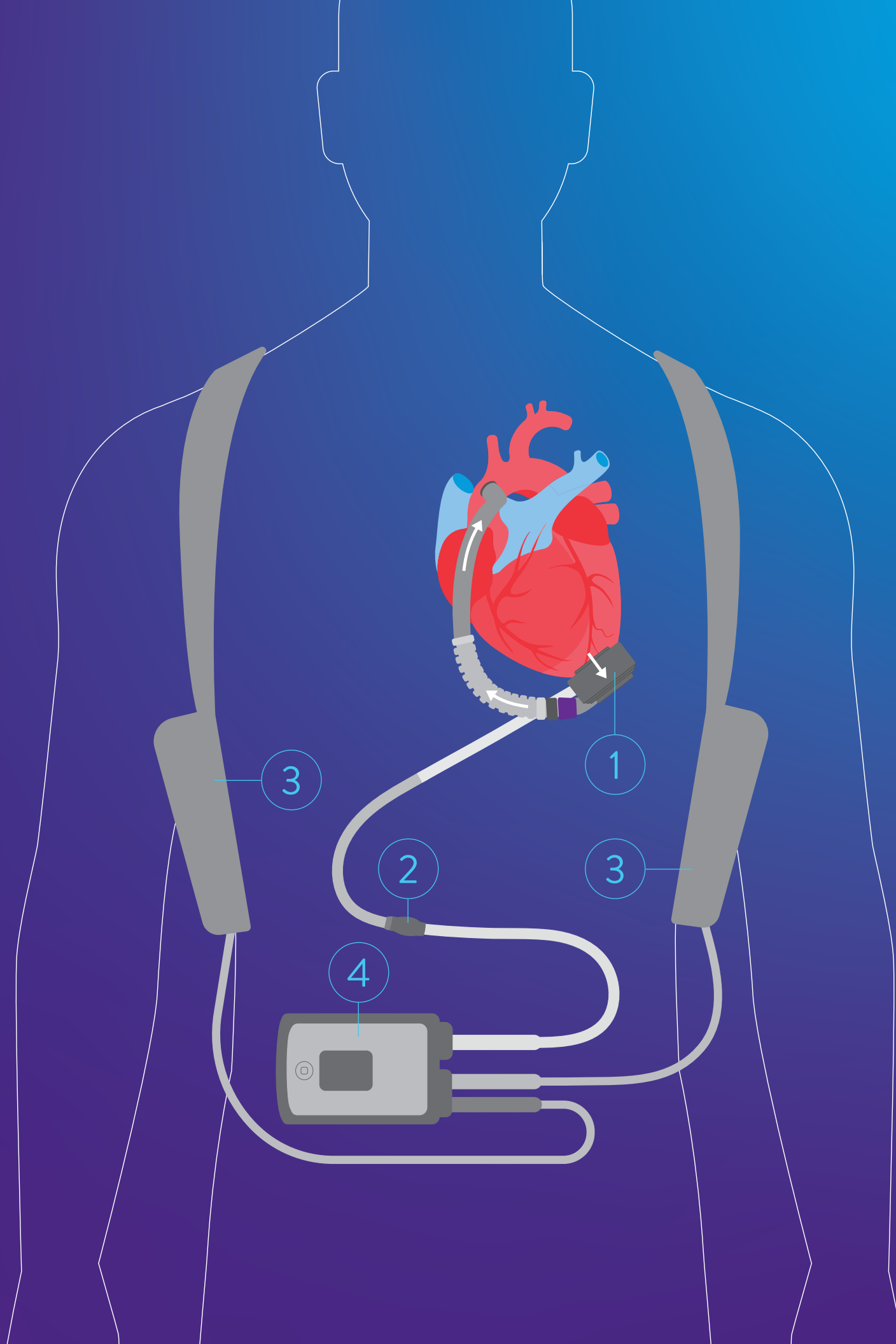
BATTERIES

Provide up to 17 hours of uninterrupted power. Power can also be provided by a Mobile Power Unit that is plugged into an electrical wall socket when indoors, at rest or asleep.

4

CONTROLLER

Powers and checks the LVAD and driveline. This easy-to-wear controller weighs less than 1 pound and discreetly slips into a front pocket. The controller uses alerts to tell you how the system is working and includes 15 minutes of emergency backup power.



THE HEARTMATE 3™ LVAD HAS PROVEN CLINICAL OUTCOMES AND EXCELLENT SAFETY

In the largest clinical trial* ever conducted, the HeartMate 3™ LVAD has been shown to reverse the symptoms of heart failure, improve long-term survival and help people have a better quality of life.³

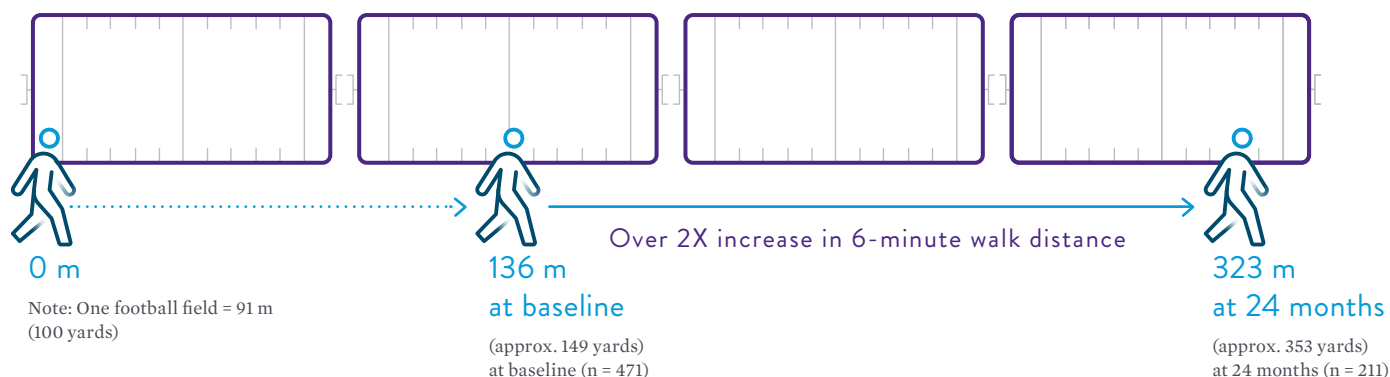
2021 MOMENTUM 3 CAP STUDY



2018 MOMENTUM 3 TRIAL



ABILITY TO WALK OVER TWO TIMES FARTHER IN DISTANCE³



LOWEST PUBLISHED RISKS FOR CONTINUOUS-FLOW LVAD^{12,14-16}

STROKE 9% THROMBOSIS 1%

Results based on published data from multicenter experience and separate studies, which may involve different patient populations and other variables. Not a head-to-head comparison. Data presented for informational purposes only.

*A clinical trial is a type of research that studies a test or treatment given to people.

**82% 2-year survival for adult heart transplant patients between 2009 and 2015.



ABOUT THE HEARTMATE 3™ LVAD PROCEDURE

The HeartMate 3™ LVAD is implanted by a trained cardiac surgeon in a hospital using standard surgical procedures and care. During the surgery, your surgeon will place the LVAD inside your chest and attach it to the left ventricle of the heart and to the aorta, a large blood vessel that carries blood from your heart to the rest of your body. Once the LVAD is in place, a tube — called a “driveline” — is passed through the skin of your abdomen and connected to the controller and a power supply (see the figure on page 9).

After the surgery, you may have to stay in the hospital for 2–4 weeks for close monitoring and recovery. The length of the hospital stay is different for everyone. After you leave the hospital, there will be regular checkups with the LVAD care team. Make sure to talk to your doctor and care team to fully understand both the benefits and the risks of the LVAD procedure.

LOREN

HeartMate 3™ LVAD
Recipient

RETURN TO THE **ACTIVITIES YOU ENJOY**

- Walking
- Time with family and friends
- Traveling
- Golfing
- Dancing
- Working/volunteering
- Gardening
- Biking

YOUR ADVANCED HEART FAILURE CENTER WILL GUIDE YOU ON WHICH **ACTIVITIES YOU MAY NEED TO AVOID**

- Sleeping on your stomach
- Taking a bath or swimming
- Playing contact sports
- High levels of static electricity or static discharge
- Having a magnetic resonance imaging (MRI)

LIVING WITH THE HEARTMATE 3™ LVAD

Many LVAD recipients find they have more energy than they did before because more oxygen-rich blood is moving through their bodies.

You and your caregiver will learn about how to live with a HeartMate 3™ LVAD and manage the equipment by a specialized LVAD care team that will be with you every step of the way before, during and after the surgery.



Check your equipment daily to ensure it's working properly and bring your backup equipment whenever you leave the house



Make sure your LVAD is connected to a power source at all times



Keep your driveline exit site — the part of your body where it is inserted — clean and dry

“Ever since I’ve had my HeartMate 3™ [LVAD], every day has been just amazing. I started biking at 10 weeks.”

DAVID

HeartMate 3™ LVAD
Recipient



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THE MORE YOU KNOW, THE MORE CONFIDENT YOU CAN BE ABOUT **YOUR DECISION**

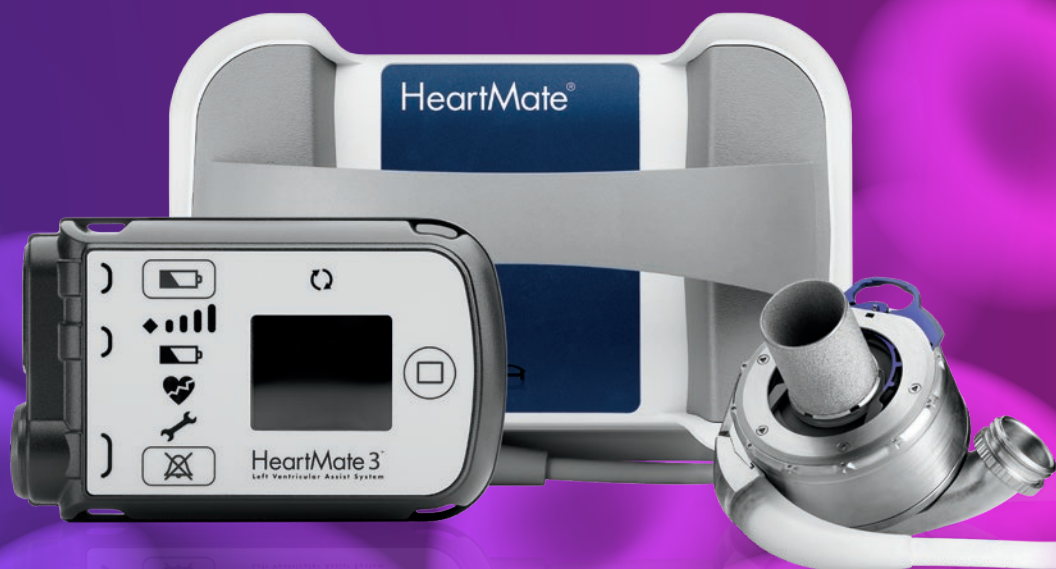
QUESTIONS YOU MAY WANT TO ASK YOUR DOCTOR

- Am I a candidate for LVAD therapy?
- Should I see an advanced heart failure specialist for evaluation for advanced therapies, including LVAD therapy?
- Are there resources available for me to learn more about HeartMate 3™ LVAD therapy?
- Can I be connected with a Patient Ambassador (and their caregiver) living with a HeartMate™ LVAD?

Visit **Abbott.com/HeartMate** to learn more.

MOVE FORWARD WITH EXCELLENCE

HEARTMATE 3™ LVAD



This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



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LEARN MORE AT **ABBOTT.COM/HEARTMATE**

1. American Heart Association. What is heart failure? <https://www.heart.org/en/health-topics/heart-failure/what-is-heart-failure>. Accessed June 2021.
2. AbouEzzeddine OF, Redfield MM. Who has advanced heart failure? Definition and epidemiology. *Congest Heart Fail*. 2011;17:1-18.
3. Mehra M, Uriel N, Naka Y, et al. A fully magnetically levitated ventricular assist device—final report. *N Engl J Med*. 2019;380:1618-1627.
4. Abbott. Data on File as of June 8, 2021. MAT-2002006 v6.0.
5. Benjamin EJ, Munnner P, Alonso A, et al. Heart disease and stroke statistics—2019 update: a report from the American Heart Association. *Circulation*. 2019;139:e56-e528.
6. Centers for Disease Control and Prevention, National Center for Health Statistics. 2019 Mortality [150.0-150.9 Heart Failure total mention]. Pages 32, 94. <https://www.cdc.gov/nchs/nvss/mortality-public-use-data.htm>. Accessed June 2021.
7. Setoguchi S, et al. Repeated hospitalizations predict mortality in the community population with heart failure. *Am Heart J*. 2007;154(2):260-266.
8. American Heart Association. Warning signs of heart failure. <https://www.heart.org/en/health-topics/heart-failure/warning-signs-of-heart-failure>. Accessed June 2021.
9. American Heart Association. Classes of heart failure. <https://www.heart.org/en/health-topics/heart-failure/what-is-heart-failure/classes-of-heart-failure>. Accessed June 2021.
10. Stewart GC, et al. INTERMACS (Interagency Registry for Mechanically Assisted Circulatory Support) Profiling Identifies Ambulatory Patients at High Risk on Medical Therapy After Hospitalizations for Heart Failure. *Circ Heart Fail*. November 2016;9(11).
11. Ambardekar AV, et al. *J Heart Lung Transplant*. 2019.
12. Mehra MR, et al. Primary results of long-term outcomes in the MOMENTUM 3 pivotal trial and continued access protocol study phase: a study of 2200 HeartMate 3 left ventricular assist device implants. *European Journal of Heart Failure*. May 1, 2021. doi:10.1002/ehfj.2211.
13. Khush KK, Cherikh WS, Chambers DC, et al. The International Thoracic Organ Transplant Registry of the International Society for Heart and Lung Transplantation: Thirty-fifth Adult Heart Transplant Report-2018; Focus Theme: Multiorgan Transplantation. *J Heart Lung Transplant*. 2018;37:1155-1168.
14. Uriel N. Long-Term Burden of Hemocompatibility Related Adverse Events in the MOMENTUM 3 Trial: Final Analysis of the 1028 Patient Cohort. Presented at: The International Society for Heart & Lung Transplantation (ISHLT) Annual Meeting; April 4, 2019; Orlando, FL.
15. Rogers JG, Pagani FD, Tatroles AJ, et al. Intrapericardial left ventricular assist device for advanced heart failure. *N Engl J Med*. 2017;376(5):451-460.
16. Markham DW. Two-year Outcomes in the ENDURANCE Supplemental Trial. Presented at: American Heart Association (AHA) Annual Meeting; November 10, 2018; Chicago, IL.

These materials are not intended to replace your doctor's advice or information. For any questions or concerns you may have regarding the medical procedures, devices and/or your personal health, please discuss these with your physician.

Abbott

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Abbott.com/HeartMate

Rx Only

Brief Summary: Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use.

HeartMate 3™ LVAS Indications: The HeartMate 3™ Left Ventricular Assist System is indicated for providing short- and long-term mechanical circulatory support (e.g., as bridge to transplant or myocardial recovery, or destination therapy) in adult and pediatric patients with advanced refractory left ventricular heart failure and with an appropriate body surface area.

HeartMate 3™ LVAS Contraindications: The HeartMate 3 Left Ventricular Assist System is contraindicated for patients who cannot tolerate, or who are allergic to, anticoagulation therapy.

HeartMate 3™ LVAS Adverse Events: Adverse events that may be associated with the use of the HeartMate 3 Left Ventricular Assist System are: death, bleeding, cardiac arrhythmia, localized infection, right heart failure, respiratory failure, device malfunctions, driveline infection, renal dysfunction, sepsis, stroke, other neurological event (not stroke-related), hepatic dysfunction, psychiatric episode, venous thromboembolism, hypertension, arterial non-central nervous system (CNS) thromboembolism, pericardial fluid collection, pump pocket or pseudo pocket infection, myocardial infarction, wound dehiscence, hemolysis (not associated with suspected device thrombosis) or pump thrombosis.

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