

TriClip™
Transcatheter Edge-to-Edge Repair

EXPERIENCE MATTERS





TRICLIP™ TEER TOGETHER WE EMPOWER EACH OTHER TO TREAT PATIENTS WITH OUTSTANDING PERFORMANCE IN TEER

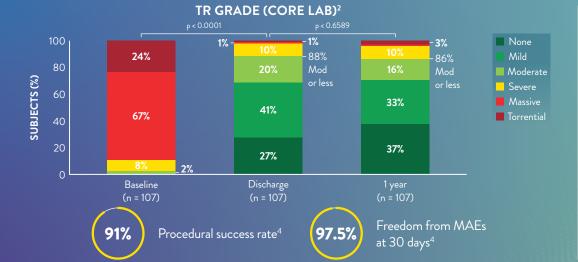
With Abbott's help, you've transformed more than 10,000 lives with TriClip™ TEER, including Cruz's, and that number is growing every day.

Responses to the treatment discusses can and do vary and are specific to the individual patient.

We keep living life the best we can... A normal life. Cruz, TR patient treated in 2018 as part of the TRIULIMINATE™ EFS Trial.*

*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.

TRICLIP™ TEER THERAPY IS PROVEN IN THE LARGEST BODY OF REAL-WORLD EVIDENCE TO DATE^{2,3}



Improvement in KCCQ-OS at 1 year²

NYHA class I/II at 1 year

from 21% at baseline²

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TRICLIP™ TEER THE FIRST CHOICE TO RESTORE THE TRICUSPID VALVE, PAVING THE WAY IN TRANSCATHETER TRICUSPID INTERVENTIONS



ADDRESSING THE FORGOTTEN VALVE⁷

PROVEN SAFETY
AND EFFICACY⁵

FIRST T-TEER COMMERCIALLY AVAILABLE¹ BROAD RANGE OF ANATOMIES EFFECTIVELY TREATED⁴ FIRST RCT IN TR DISEASE⁶

TRILUMINATE™ PIVOTAL - 1-YEAR RESULTS⁶

Prospective, randomized, multi-center, controlled clinical trial to compare TriClip™ TEER System vs. medical therapy



IMPROVEMENT IN KCCQ-OS IN 49.7% OF PATIENTS



TR MODERATE OR LESS



DEVICE THROMBUS OR EMBOLIZATION; NONELECTIVE CV SURGERY

What this trial has shown is that we have an incredibly effective and safe therapy that improves quality of life. This is what patients want.

Dr. P. SorajjaTRILUMINATE™ Pivotal Trial - Principal Investigator*

TRICLIP™ TEER

10,000¹ LIVES CHANGED

*The testimonial does not provide any indication, guide, warranty or guarantee as to the response patients may have to the treatment or effectiveness of the product or therapy in discussion. Opinions about the treatment discussed can and do var and are specific to the individual's experience and might not be representative of others.

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TRICLIP™ TEER EXPERIENCE MATTERS



10,000+ patients treated since 2017¹



50+ countries worldwide¹



1,300+patients studied in Abbott-sponsored trials, including 3 landmark studies¹

THANK YOU FOR THE PARTNERSHIP IN THIS JOURNEY







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Visit CONNEXT by Advanced Heart Therapies to find out more about TriClip™ TEER and access next-level cardiovascular educational content tailored just for you

CE, conformité européenne; CV, cardiovascular; EFS, early feasibility study; FDA, food and drug administration; KCCQ-OS, Kansas City Cardiomyopathy Questionnaire Overall Score; Lab, laboratory; MAE, major adverse event; mod, moderate; NYHA, New York Heart Association; RCT, randomized controlled trial; TR, tricuspid regurgitation; TEER, transcatheter edge-to-edge repair; T-TEER, tricuspid transcatheter edge-to-edge repair; vs, versus.

REFERENCES: 1. Data on file at Abbott. 2. Lurz P., et al. Real-world outcomes from tricuspid edge-to-edge repair: Initial 1 year outcomes from the bRIGHT trial. Presented at PCR London Valves November 27–29, 2022. 3. ClinicalTrials.gov. Find a Study. Accessed November 12, 2021. https://clinicaltrials.gov/et2/results?cond=tricuspid+regurgitation.8term=transcatheter&cntry=&state=&city=&dist= 4. Lurz P., et al. Short-term outcomes of tricuspid edge-to-edge repair in clinical practice. J Am Coll Cardiol. 2023; 82:281–291. doi: 10.1016/j.jacc.2023.05.008. 5. Nickenig G., et al. Transcatheter edge-to-edge repair for reduction of tricuspid regurgitation: 6-month outcomes of the TRILUMINATE single-arm study. Lancet. 2019; 394: 2002–2011. doi: 10.1016/S0140-6736(19)32600-5. 6. Sorajja P., et al. Transcatheter repair for patients with tricuspid regurgitation. N Engl J Med. 2023; 388:1833–1842. doi: 10.1056/NEJMoa2300525. 7. Nickenig G., et al. Transcatheter Treatment of Severe Tricuspid Regurgitation with Edge-to-Edge: MitraClip Technique. Circulation. 2017; 10.1161/CIRCULATIONAHA.116.024848.

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