

# HAS HEART FAILURE IMPACTED YOUR **QUALITY OF LIFE?**

Learn how atrial shunting  
may help you.



## FINDING RELIEF

If heart failure (HF) symptoms are affecting your quality of life, you aren't alone. Millions of people are living with HF, and over half of HF patients are like you — their hearts don't relax as much as healthy hearts do. Patients with this condition have HF with preserved ejection fraction (HFpEF), and like you, continue to experience HF symptoms that make it difficult to conduct daily activities.

But now, an innovative therapy called **atrial shunting** is available and may help you find relief.

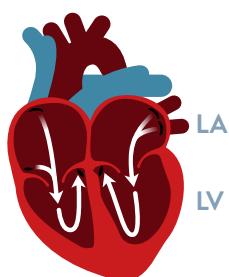


10  
million

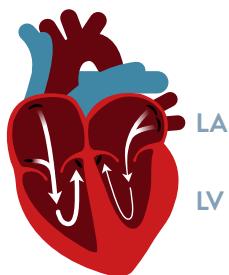
Europeans have heart failure.<sup>1</sup>

## UNDERSTANDING HEART FAILURE

HF is a condition where the heart cannot pump blood efficiently. This is because the heart becomes too weak or too stiff to work properly, so it is unable to meet the demands of the body.



In a healthy heart, the left ventricle (LV) and left atrium (LA) relax to fill with blood from the lungs. Once filled, the left ventricle pumps the blood to the body.



**HFpEF** occurs when the heart muscle contracts relatively normally but the ventricle is stiff and does not fill with enough blood. Because the heart can't relax as much as a healthy heart, less blood is able to enter it and pressure in the left atrium rises.

This increased pressure in the heart causes blood to back up into the lungs, resulting in shortness of breath and fatigue. These are common symptoms of worsening HF and often result in hospitalization.

Including more than 3.3 million in Germany.<sup>2</sup>

3.3  
million

## COMMON SYMPTOMS OF HEART FAILURE

Heart failure is associated with many symptoms that may be impacting your quality of life, including:

- Breathlessness
- Frequent urination
- Fatigue
- Unable to sleep lying down
- Difficulty conducting daily activities (walking, anxiety and depression climbing stairs, etc.)
- Buildup of excess fluid in body (swelling)

## TREATMENT OPTIONS



Although medications are available to help manage the effects of elevated pressures, many patients continue to experience HF symptoms and as a result, are

frequently hospitalized. But now, an innovative, non-surgical treatment called *atrial shunting* is available to help improve your quality of life.

An atrial shunt is a small metal scaffold placed in your heart to reduce heart failure symptoms by decreasing pressure inside the heart. This small implant has the potential to have a big impact on the lives of HF patients.



After the atrial shunt is implanted, you will have a short hospital stay and your doctor will decide when you are ready to go home.

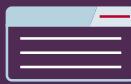
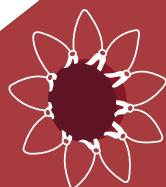
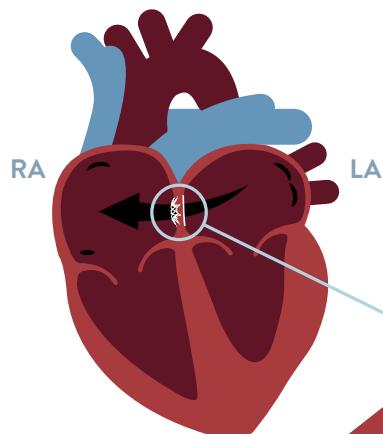


Short-term medication may be prescribed after the implant. Remain diligent with all prescribed heart failure and other medications.

## WHAT TO EXPECT FROM AN ATRIAL SHUNT PROCEDURE

An atrial shunt is implanted via a minimally invasive procedure. During this one-time procedure, an interventional cardiologist or electrophysiologist inserts a catheter (small tube) in a vein near the groin to access the heart. This catheter is then used to create a very small passage in the heart wall between the right and left atria where the shunt is placed.

The newly created passage allows blood to flow from the high pressure left atrium to the right atrium. As a result, the pressure in the left side of the heart and the lungs decreases, and heart failure symptoms are reduced.



You will be given an implant identification card containing information about the device. Be sure to keep this card with you at all times and show it to any healthcare providers that treat you in the future.



Once at home, it is important that you avoid strenuous physical activity for at least 2 weeks.

## BENEFITS AND RISKS

As with any medical procedure, atrial shunting has potential benefits and risks. It is important that you talk with your doctor to understand the benefits and risks associated with the device.

**71%**

After 1 year, 71% of patients experienced fewer HF symptoms<sup>3</sup>

**75%**

After 3 years, 75% of patients reported an improved quality of life<sup>4</sup>

**69%**

After 3 years, 69% of patients had no hospitalizations for heart failure<sup>4</sup>

The risks associated with the implant procedure are similar to the risks of other catheter based cardiac procedures in which devices are permanently implanted in the atrium or in the heart wall between the two atria. Because these procedures are common, the potential risks are low; interventional cardiologists, electrophysiologists and their staff are well trained to reduce the likelihood of procedural risks.

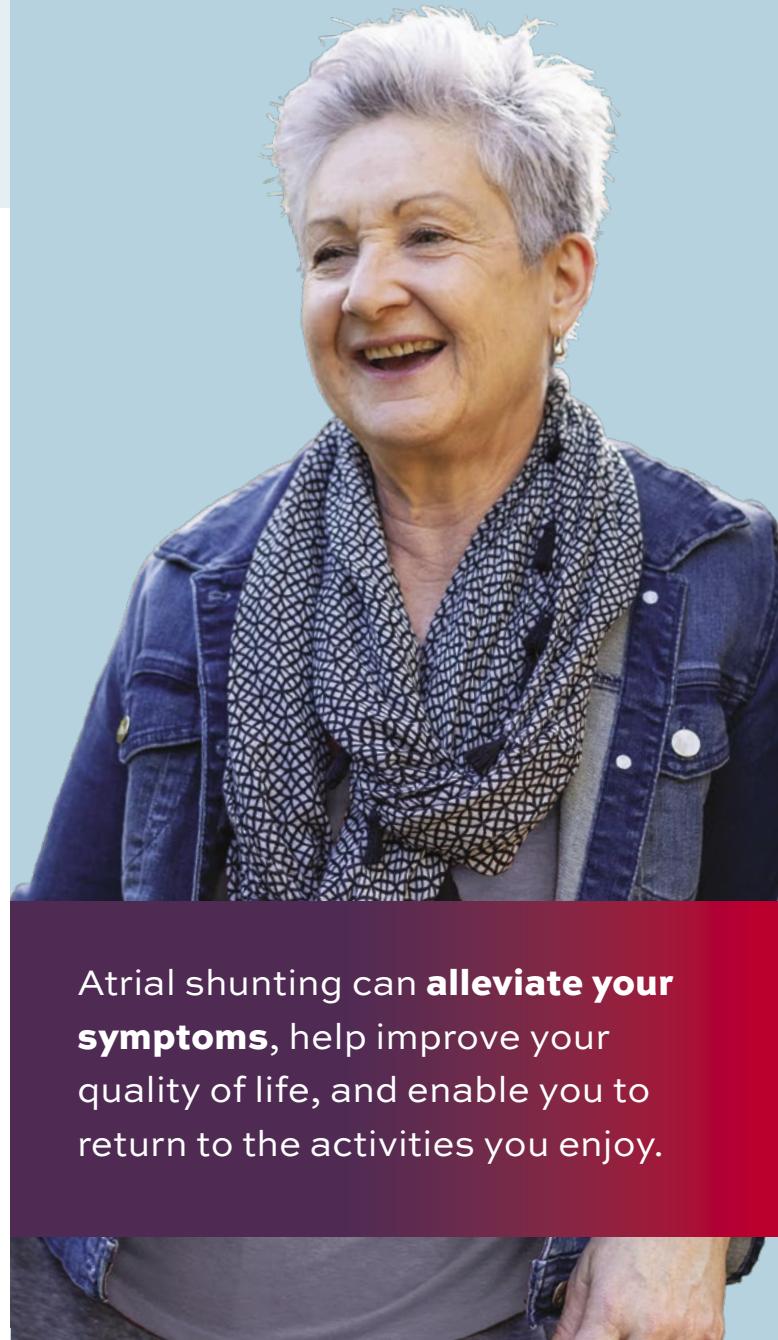
Potential, but uncommon, long-term device risks include movement or fracture after placement, a blood clot that forms on or near the device and travels through the heart causing a blockage of a blood vessel (embolization, infarction with potential stroke), perforation or erosion of the heart wall, headache, chest pain, heart rhythm changes, or gradual implant occlusion and return of HF symptoms. The device is intended as a permanent implant and does not need to be removed unless there is a medical reason to do so.

*“Doing normal housework like making a bed and getting dressed was extremely challenging. Now I can move and breathe freely.”*

**ATRIAL SHUNT PATIENT**

*“Finally, I am able to participate in life and enjoy daily activities again.”*

**ATRIAL SHUNT PATIENT**



Atrial shunting can **alleviate your symptoms**, help improve your quality of life, and enable you to return to the activities you enjoy.

## TALK TO YOUR DOCTOR

It is important to talk to your doctor about all of your treatment options, especially if you continue to experience symptoms such as breathlessness and fatigue even while on HF medications. The information in this brochure should not be used as a substitute for talking with your doctor.

**Scan the QR code to access a discussion guide that will help you talk with your doctor about your symptoms and remind you of questions to ask about your treatment options.**



To find out if an atrial shunt is right for you, please schedule an appointment and talk to your doctor.

To learn more, visit

**[www.corviamedical.com/patients](http://www.corviamedical.com/patients)**

1. European Heart Network. Heart Failure and Cardiovascular Diseases – A European Heart Network Paper. *A Eur Hear Netw Pap.* 2019;(April):1-7.
2. Störk, Stefan, et al. “Epidemiology of heart failure in Germany: a retrospective database study.” *Clinical Research in Cardiology* 106.11 (2017): 913-922.
3. Kaye D, Hasenfuß G, Neuzil P, et al. One-Year Outcomes After Transcatheter Insertion of an Interatrial Shunt Device for the Management of Heart Failure With Preserved Ejection Fraction. *Circ Heart Fail.* 2016;9(12):e003662.
4. Unpublished data from REDUCE LAP-HF (n=64). Data on file at Corvia Medical.

The Corvia Atrial Shunt System is indicated for the improvement in quality of life and reduction of heart failure related symptoms and events in patients with heart failure with preserved (HFpEF) or mid-range ejection fraction (HFmrEF) with elevated left atrial pressures, who remain symptomatic despite standard Guideline Directed Medical Therapy (GDMT).



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