

THE ONE-TIME PROCEDURE

that may reduce stroke risk for a lifetime

If you have atrial fibrillation not caused by heart valve problems and need an alternative to blood thinners, you'll want to learn about the WATCHMAN Implant. **Marjorie Giovannoni did**.

Be sure to talk with your doctor about the risks and benefits associated with the WATCHMAN Implant. See reverse side for additional safety information. Learn more at WATCHMAN.com



Marjorie Giovannoni and her husband Gary live in Coupeville, Washington. Marjorie has atrial fibrillation not caused by heart valve problems. To lower her risk of stroke, Marjorie's doctors placed her on the blood thinner warfarin.

While taking warfarin, Marjorie suffered a major bleeding event and her doctors took her off the medication.

Several years later, Marjorie's doctors recommended that she go back on warfarin because of her high stroke risk.

An Innovative Option

Marjorie and Gary were reluctant to start warfarin again because they feared another bleeding event. They asked their cardiologist if there were other options.

This is when he told them about the WATCHMAN Implant. He explained how it reduced the risk of stroke and allowed most patients to stop using warfarin in 45 days. With the help of her doctor, Marjorie decided to have the WATCHMAN procedure. About 2 months later, she was able to stop taking warfarin.

To hear more of Marjorie and Gary's story,

visit WATCHMAN.com/stories

THE WATCHMAN™ DIFFERENCE

WATCHMAN is a one-time procedure that reduces the risk of stroke in people with atrial fibrillation. WATCHMAN is as effective at reducing the risk of stroke as warfarin. But unlike warfarin, the WATCHMAN Implant also reduces the long-term risk of bleeding. Newer blood thinners offer an option to warfarin, but they don't take away the long-term risk of bleeding.



92%

of patients were able to stop taking warfarin just 45 days after receiving the WATCHMAN Implant¹

99%

were able to stop taking warfarin within a year after receiving it¹



The WATCHMAN Procedure

WATCHMAN is implanted like a stent, by means of a narrow tube inserted through a small cut in your upper leg. Your doctor will then guide WATCHMAN into your heart. The procedure is done under general anesthesia and takes about an hour. Patients commonly stay in the hospital overnight and leave the next day.

WATCHMAN Safety

The WATCHMAN Implant has a proven record of safety—with over 20,000 procedures performed worldwide and over 10 years of clinical studies in more than 2,000 patients. It is the only device of its kind approved by the U.S. Food and Drug Administration.



IS WATCHMAN™ AN OPTION FOR ME?

WATCHMAN is for people who:

- Have atrial fibrillation not caused by heart valve problems
- Have been recommended to take blood thinning medicines by their doctor
- Can take warfarin but need an alternative to blood thinners because they have a history of bleeding or a lifestyle that puts them at risk for bleeding

If this sounds like you, ask your doctor about WATCHMAN.

COSTS AND COVERAGE

WATCHMAN is covered for eligible Medicare patients who meet certain national coverage criteria. It is also covered by an increasing number of commercial insurers.

WATCHMAN is different from blood thinners not only in how it works, but in how much it costs. Whereas blood thinners must be taken every day for life and represent an ongoing cost, WATCHMAN is a one-time procedure and one-time cost. This means WATCHMAN can save you money over time.

Over a 5-year period, the estimated average out-of-pocket costs for Medicare beneficiaries were lower for WATCHMAN than for warfarin.²

For additional information, visit WATCHMAN.com





PEOPLE WHO SHOULD <u>NOT</u> BE CONSIDERED FOR THE WATCHMAN™ IMPLANT

Patients who should not receive the implant include, but are not limited to:

- Patients who cannot take warfarin, aspirin, or clopidogrel
- Patients who should not or cannot undergo heart catheterization procedures
- Patients who have an allergy or sensitivity to nitinol (nickel and titanium) or any of the other materials in the WATCHMAN Implant
- Patients with a left atrial appendage that is too large or too small to fit the WATCHMAN Implant

Due to the upfront risk of undergoing a medical procedure, patients should also not be considered for the WATCHMAN Implant if they are doing well and anticipate continuing to do well with blood thinners.

- Holmes DR Jr, Kar S, Price MJ, et al. Prospective randomized evaluation of the Watchman Left Atrial Appendage Closure device in patients with atrial fibrillation versus long-term warfarin therapy: the PREVAIL trial. J Am Coll Cardiol. 2014;64(1):1-12.
- Armstrong S, Amorosi SL, Patel P, et al. An Analysis of Patient Out-of-Pocket Spending for Stroke Prevention in Non-Valvular Atrial Fibrillation. J Am Coll Cardiol 2014;63(12_S):A349

BRIEF SUMMARY

WATCHMAN™ Left Atrial Appendage Closure Device from Boston Scientific

The WATCHMAN Device is a permanent implant designed to close the left atrial appendage in the heart in an effort to reduce the risk of stroke.

With all medical procedures there are risks associated with the implant procedure and the use of the device. The risks include but are not limited to accidental heart puncture, air embolism, allergic reaction, anemia, anesthesia risks, arrhythmias, AV (Arteriovenous) fistula, bleeding or throat pain from the TEE (Trans Esophageal Echo) probe, blood clot or air bubbles in the lungs or other organs, bruising at the catheter insertion site, clot formation on the WATCHMAN™ Closure Device, cranial bleed, excessive bleeding, gastrointestinal bleeding, groin puncture bleed, hypotension, infection/pneumonia, pneumothorax, pulmonary edema, pulmonary vein obstruction, renal failure, stroke, thrombosis and transient ischemic attack. In rare cases death can occur.

Be sure to talk with your doctor so that you thoroughly understand all of the risks and benefits associated with the implantation of the WATCHMAN Device.



Advancing science for life™

Rhythm Management 300 Boston Scientific Way Marlborough, MA 01752-1234 www.bostonscientific.com

Medical Professionals: 1.800.CARDIAC (227.3422) Patients and Families: 1.866.484.3268

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