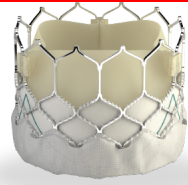




(<https://www.tavrbyedwards.com/>)



TAVR with the **Edwards SAPIEN 3** valve

Better Than Surgery

for Intermediate-Risk Patients*

*The PARTNER II trial intermediate-risk cohort, VI population (n=2,005); the difference in the primary endpoint (composite of all-cause mortality, all stroke, and \geq moderate aortic regurgitation at one year) event rate between TAVR with the SAPIEN 3 valve and surgery appeared to be clinically significant.

Ask your doctor about transcatheter aortic valve replacement (TAVR) with the SAPIEN 3 valve today.

IMPORTANT RISK INFORMATION FOR PATIENTS



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OUR LATEST VALVE

+
MENU 

**Edwards Lifesciences v. Boston Scientific Scimed
IPR2017-00060, U.S. Patent 8,992,608
Exhibit 2022**


OUTER SEALING SKIRT
Virtually eliminates moderate to severe leakage
around the valve*

*PARTNER II trial high-risk TF SAPIEN 3 valve cohort 30-day results


CONDUCTED OVER SEVERAL DECADES.

As the leader in heart valve science and innovation, we have purposefully designed our transcatheter heart valves with the same proven materials and features as our leading surgical valves.

To request a free information kit, [click here \(/requests\)](#).



LEARN MORE ABOUT TAVR.
GET ANSWERS. FIND SUPPORT.
Click or call 1-877-209-7431



(https://edwardspatientconnect.com/Answers/TBE_Tout_LatestValve)

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THE CLINICAL DIFFERENCE



SAPIEN 3 Valve Patient Brochure >

(assets/downloads/SAPIEN_3_Patient_Brochure.pdf)



PARTNER II Trial Clinical Events Summary >

(assets/downloads/PARTNER_II_Trial_Clinical_Events_Summary.pdf)

Transcatheter aortic valve replacement (TAVR) with the Edwards SAPIEN 3 valve demonstrated 75% lower rates of 30-day all-cause mortality and disabling stroke compared to surgery in intermediate-risk patients.†

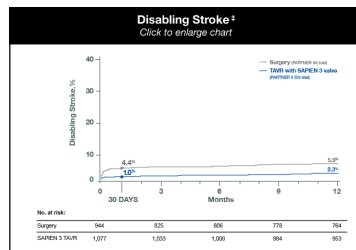
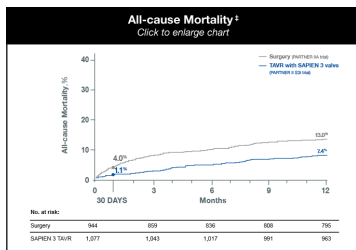
1.1%

All-Cause Mortality†

1.0%

Disabling Stroke†

75% Lower Than Surgery†



†The PARTNER II trial intermediate-risk cohort 30-day unadjusted clinical event rates for TAVR with the SAPIEN 3 valve, as treated population (n=1,077).

‡The PARTNER II trial intermediate-risk cohort unadjusted clinical event rates, AT population.

IMPORTANT RISK INFORMATION FOR PATIENTS

YOUR PROCEDURE



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At this moment, thousands of our heart valves are **HELPING PEOPLE LIVE THEIR LIVES**

Around the world, TAVR has helped people suffering from severe aortic stenosis. If you are researching treatment options for severe aortic stenosis or will be having the TAVR procedure, we are here to help you.



ORDER A FREE KIT

Learn more about aortic stenosis and TAVR



(/requests)



FIND THE SUPPORT YOU NEED.

TALK TO SOMEONE ABOUT WHAT TO EXPECT.

Click or call 1-877-209-7431



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Benefits of TAVR:

- Relief of symptoms, in some cases immediately
- Reduction in pain and anxiety
- Improved heart function
- May shorten recovery time to resume everyday activities

Quality of Life Improvement:

TAVR has shown improvement in a patient's health as early as 30 days after their procedure. Patients reported improvements in quality of life, including:

- Ability to take care of themselves
- Ability to participate in everyday activities

The most serious RISKS of the TAVR procedure are: **death, major stroke, major vascular complications, and life threatening bleeding event.***

It is important to talk with your doctor about the exact procedure you will have, the product you will receive, and the literature on clinical studies using that product.

*See the [Edwards SAPIEN 3 valve patient brochure \(assets/downloads/SAPIEN 3 Patient Brochure.pdf\)](#) for more detailed information on these and other risks.

(https://edwardspatientconnect.com/Answers/TBE_Tout_TAVR_Benefits)

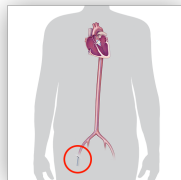
IMPORTANT RISK INFORMATION FOR PATIENTS



(<https://www.tavrbyedwards.com/>)

T Transcatheter
A Aortic
V Valve
R Replacement

+
MENU



Transfemoral Approach

The most common way to perform TAVR is through the transfemoral approach. An incision will be made in your leg, where your doctor will insert a short, hollow tube called a sheath.

The Edwards SAPIEN 3 transcatheter heart valve will be placed on the delivery system and compressed on a balloon. The delivery system carrying the valve will be placed through the sheath and delivered to your aortic

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