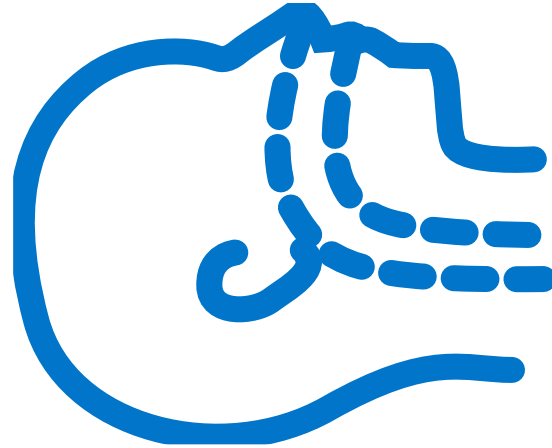




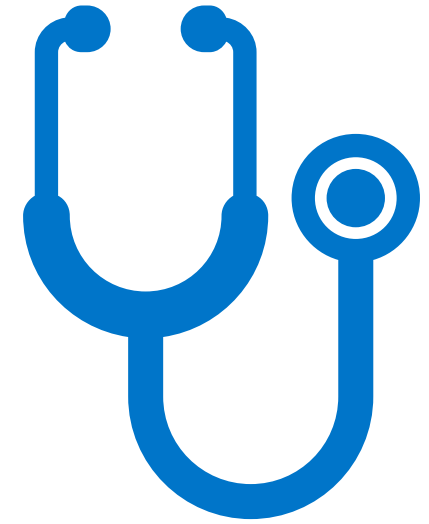
122M

Cardiovascular  
Disease Patients in US<sup>1</sup>



50%

of all Cardiovascular  
Disease patients suffer  
from sleep apnea<sup>2</sup>



85%

of all obstructive  
sleep apnea patients  
remain undiagnosed<sup>2</sup>

# Sleep apnea impacts your patients' health



2x

**Increased risk  
of stroke<sup>3</sup>**

# Sleep apnea impacts your patients' health



2x

**Risk of death  
from sudden  
cardiac arrest<sup>4</sup>**

# Sleep apnea impacts your patients' health



5x

**Risk of death from  
cardiovascular  
disease<sup>5</sup>**

# Sleep apnea impacts your patients' health



42%

**Increased risk  
of recurrence  
of AF following  
ablation<sup>6</sup>**

# The American Heart Association recommends...<sup>7</sup>



American  
Heart  
Association.

## Screening for OSA if...

- ✓ Resistant/poorly controlled hypertension
- ✓ Pulmonary hypertension
- ✓ Recurrent atrial fibrillation (after either cardioversion or ablation)

## A sleep study if...

- ✓ NYHA class II–IV HF symptoms
- ✓ Tachy-brady syndrome
- ✓ Sick sinus syndrome
- ✓ Ventricular tachycardia
- ✓ Survivors of sudden cardiac death
- ✓ Stroke

# Learn how ZOLL is helping cardiologists manage patients with sleep apnea



WatchPAT<sup>®</sup>



remedē<sup>®</sup> System

## References

- <sup>1</sup> Virani, S. Alonso, A. Benjamin, E. et al. Heart Disease and Stroke Statistics – 2020 Update. *Circulation* 2020; 141:00-00 ePub.
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- <sup>3</sup> Redline S, Yenokyan G, Gottlieb DJ, et al, Obstructive sleep apnea and incident stroke: The sleep heart health study. *Am J Resp Crit Care Med*. 2010; 182(2);269-277.
- <sup>4</sup> Gami AS, Olson EJ, Shen WK, et al. Obstructive sleep apnea and the risk of sudden cardiac death: a longitudinal study of 10701 adults. *J Am Coll Cardiol* 2013; 62(7);610-6.
- <sup>5</sup> Young T, Finn L, Peppard PE, et al. Wleep disordered breathing and mortality: Eighteen year follow up of the Wisconsin sleep cohort. *Sleep* 2008; Aug 1;31 (8):1071-1078.
- <sup>6</sup> Shukla A, Aizer A, Holmes D, et al. Effect of Obstructive Sleep Apnea Treatment on Atrial Fibrillation Recurrence: A Meta-Analysis. *JACC: Clinical Electrophysiology* March 2015;1(1-2):41-51.
- <sup>7</sup> Yeghiazarians Y, Jneid H, Tietjens JR, Redline S, Brown DL, El-Sherif N, Mehra R, Bozkurt B, Ndumele CE, Somers VK. Obstructive Sleep Apnea and Cardiovascular Disease: A Scientific Statement From the American Heart Association. *Circulation*. 2021 Jul 20;144(3):e56-e67. doi: 10.1161/CIR.0000000000000988. Epub 2021 Jun 21. Erratum in: *Circulation*. 2022 Mar 22;145(12):e775. PMID: 34148375.

## Important Safety Information

The **remedē**® System is indicated for moderate to severe Central Sleep Apnea (CSA) in adult patients. A doctor will need to evaluate the patient's condition to determine if the **remedē** System is appropriate. Patients will not be able to have an MRI or diathermy (special heat therapies) if the **remedē** System is implanted. The **remedē** System may be used with another stimulation device such as a heart pacemaker or defibrillator; special testing will be needed to ensure the devices are not interacting. As with any surgically implanted device, there are risks related to the surgical procedure itself which may include, but are not limited to, pain, swelling, and infection. Once the therapy is turned on, some patients may experience discomfort from stimulation and/or from the presence of the device. The majority of these events are resolved either on their own or by adjusting the therapy settings. The **remedē** System may not work for everyone. There are additional risks associated with removing the system. If it is decided to remove the system, another surgery will be required. Be sure to understand all of the risks and benefits associated with the implantation of the **remedē** System. For further information please visit [remede.zoll.com](http://remede.zoll.com), call 952-540-4470 or email [info@remede.zoll.com](mailto:info@remede.zoll.com). **Indication for use:** The **remedē** System is an implantable phrenic nerve stimulator indicated for the treatment of moderate to severe Central Sleep Apnea (CSA) in adult patients. **Contraindications:** The **remedē** System is contraindicated for use in patients with an active infection or patients known to require magnetic resonance imaging (MRI). See the Instructions for Use for complete information regarding the procedure, indications for use, contraindications, warnings, precautions, and potential adverse events.

### Rx Only.

The **remedē**® System, **remedē**® EL System, and **remedē**® EL-X System have received FDA approval. The **remedē**® System model 1001 has received CE Mark approval.

