

Resolve Reflux. Reduce or Eliminate Meds. Avoid Invasive Surgery.

GERD



When symptoms of GERD persist despite medications, there is an option other than surgery.

Stretta is a unique and minimally invasive treatment for GERD that fills the gap when medications are ineffective and before invasive surgery or implants. In clinical trials evaluating the Stretta procedure, up to 93% of patients were satisfied with the outcome of their Stretta Therapy and up to 86% of patients remained off daily GERD medications four years after their Stretta procedure*.

The Society of American Gastrointestinal and Endoscopic Surgeons (SAGES) recently published a Clinical Spotlight Review Guideline that strongly recommended Stretta for the treatment of GERD based on their peer reviewed analysis of the body of clinical evidence.

If you are a patient with GERD who has failed or is intolerant of drug therapy, and don't wish to proceed with more invasive surgical treatments, ask your doctor if Stretta Therapy is right for you.

stretta[®]

A Patient's Guide to Stretta Therapy and Chronic GERD ►

stretta[®] is:

A minimally invasive procedure that significantly reduces GERD symptoms, allowing a majority of patients to eliminate or significantly decrease use of PPIs. Stretta is an excellent option for patients that have failed or are intolerant of drug therapy, offering an alternative to invasive surgery or implants.

Stretta therapy is an outpatient procedure performed in approximately 60 minutes, allowing patients to return to normal activities the following day. The Stretta system delivers radiofrequency energy to the lower esophageal sphincter muscle (near where the stomach meets the esophagus) which remodels the tissue, resulting in improved barrier function and fewer random relaxations that cause GERD symptoms.

HOW STRETТА WORKS



REGULATED ENERGY
DELIVERED TO TISSUE

MULTI-LEVEL THERMAL
TREATMENT REMODELS
TISSUE

FUNCTION AND GERD
SYMPTOMS SIGNIFICANTLY
IMPROVED

What can patients expect in terms of improvements in GERD symptoms?

Every patient is different in their response to Stretta Therapy. Some patients see improvement more quickly than others, and studies show the symptoms may continually improve for six months or longer. Patients are advised to continue their previous anti-secretory regimen for two-months after Stretta, and follow a modified diet of full liquids for 24 hours and soft diet for two weeks.

Do patients experience pain after Stretta Therapy?

Patients may experience pain immediately after Stretta Therapy, which in most cases can be managed with OTC analgesia (liquid acetaminophen), or, in severe cases, prescription pain medication. Patient should crush all medications or use liquid medications for at least one month after treatment. Patient should refrain from using NSAIDs for two weeks after the Stretta procedure, and avoid any instrumentation of the esophagus for at least one month.

Do You Have Chronic GERD? What Your Doctor Needs to Know.

- 1) How many days a week are you still experiencing GERD symptoms?
- 2) How severe are your symptoms? (1 = mild, 5 = moderate, 10 = severe)
- 3) What time of day do you typically experience GERD symptoms?
- 4) What over-the-counter or prescription medications do you take and at what dosage?
- 5) How does this persistence in GERD symptoms affect your quality of life? (1=mildly, 5=moderately, 10=severely)

Ask Your Doctor About Options.

- 1) Is it normal to still be experiencing my symptoms while taking this medication?
- 2) Will my GERD get better or worse with time? Are there complications that may develop?
- 3) I've heard there is some concern over adverse effects with long-term use of Proton Pump Inhibitor medications. What are the risks involved? Am I at risk?
- 4) What other treatments are available for GERD? What are the advantages and disadvantages of these treatments compared to my current treatment plan?
- 5) Is Stretta Therapy an option for me?

SAFETY INFORMATION:

INDICATIONS FOR USE: The Stretta System is intended for general use in the electro-surgical coagulation of tissue and intended for use specifically in the treatment of gastroesophageal reflux disease (GERD).

CONTRAINDICATIONS: The use of electro-surgery is contraindicated when, in the judgment of the physician, electro-surgical procedures would be contrary to the best interest of the patient. The following is a list of patient groups in which the use of the Stretta System for the treatment of GERD is contraindicated: subjects under the age of 18, pregnant women, patients without a diagnosis of GERD, hiatal hernia >2cm, achalasia or incomplete LES relaxation in response to swallow, poor surgical candidates, ASA IV classification, patient has an implant near the LES that could be conductive with RF energy.

WARNINGS: These complications are rarely seen but could potentially occur with the use of electro-surgery for the treatment of GERD: transient bleeding, bloating, transient chest pain, transient difficulty belching, transient dysphagia, transient epigastric discomfort, transient esophageal mucosal laceration, transient fever, Injury to esophageal mucosa, perforation, pharyngitis, vomiting transient with potential for bleeding or Esophageal injury. If any vomiting occurs, contact your treating physician immediately. Excessive vomiting may result in perforation and more serious injury resulting in death. The following complications have not been seen, but could possibly occur infrequently: Achalasia, transient delayed gastric emptying, dental injury, dyspnea, infection, larynx injury, worsened GERD (Note: Consult instructions for use for full contraindications, warnings and precautions).

*Clinical studies on file



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