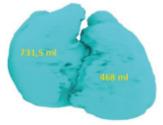
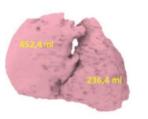
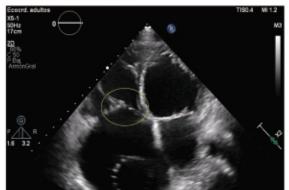
# THE TRICVALVE SOLUTION



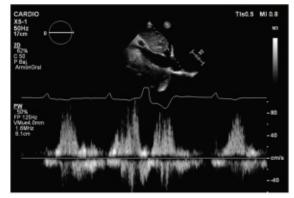


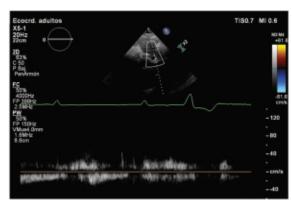
Pre-procedure and post-procedure volumes in the right heart chambers<sup>(5)</sup> after **TricValve** implantation in SVC and IVC. **Heart remodeling** is due to the reduction of liquid congestion by abolishing the blood backflow at the superior and inferior vena cava.





TTE showing the tricuspid valve **leaflet gap** before the TricValve procedure vs a **competent leaflet coaptation** after the TricValve procedure due to tissue approximation.





Doppler echo showing previous **reversal flow in the hepatic veins** vs **abolition of backflow** after TricValve procedure.



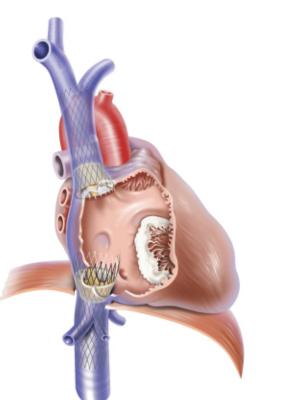
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THE ONLY COMPLETE SOLUTION TO TREAT
TRICUSPID REGURGITATION AND RIGHT HEART FAILURE



Gmb



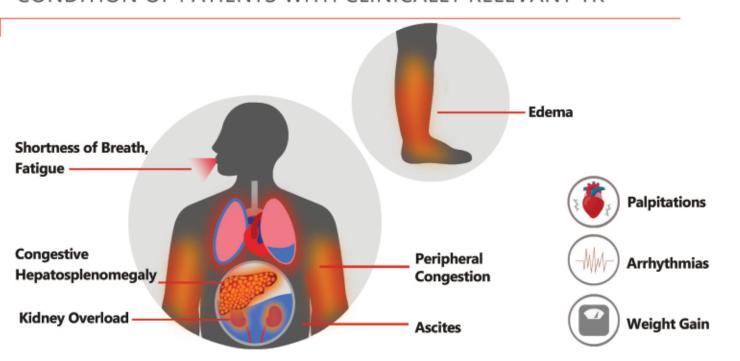
### TRICUSPID REGURGITATION AND CAVAL REFLUX

The **Right Heart disease** due to Tricuspid Regurgitation (TR) is a prevalent and undertreated condition. TR has a low survival rate independently of baseline clinical characteristics and optimal medical management with diuretics<sup>(1)</sup>.

Due to comorbidities, these patients are often considered to be of **high risk for surgery**<sup>(2,3).</sup> **Transcatheter** therapies such as TricValve can be considered as a **safe and less invasive** option for these patients<sup>(2)</sup>.



# CONDITION OF PATIENTS WITH CLINICALLY RELEVANT TR



### PARAMETERS TO BE CONSIDERED FOR TRICVALVE THERAPY

Tricuspid regurgitation and caval reflux must be present, ventricular function must be preserved.

✓ V-Wave in SVC & IVC ≥ 15mmHg

√ TAPSE ≥ 12mm

✓ sPAP ≤ 65mmHg

LVEF ≥ 30%

#### THE TRICVALVE SYSTEM

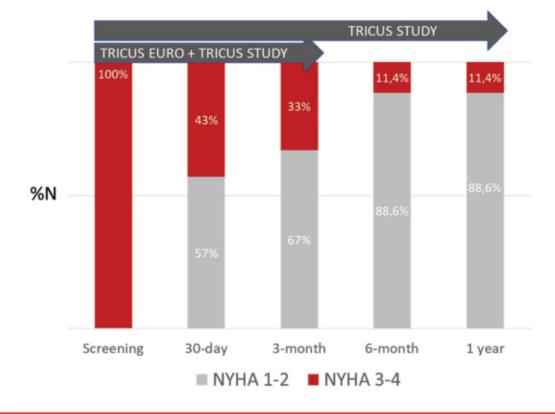
TricValve is a minimally invasive transcatheter bicaval system for patients with TR and significant symptoms of **Right Heart Failure** 

The implantation of self-expanding valves into the superior (SVC) and inferior (IVC) vena cava effectively **abolishes Caval Reflux** and increases cardiac output by reducing backward regurgitant flow in patients with clinically relevant TR.

This will help **eliminate peripheral venous congestion** reducing right heart failure symptoms and improving the overall clinical condition of the patients<sup>(4)</sup>:

- Improvement of NYHA functional class
- **对 Improvement in the 6 Minute Walk Test Distance**
- → Improvement in quality of life (KCCQ)

# POST-PROCEDURE CLINICAL IMPROVEMENT<sup>(4)</sup>



1.Benfari G, Antoine C, Miller WL, et al. Excess mortality associated with functional tricuspid regurgitation complicating heart failure with reduced ejection fraction. Circulation. July 16, 2019;140(3):196-206. doi:10.1161/CIRCULATIONAHA.118.038946.

2.Goliasch G, Mascherbauer J. Interventional treatment of tricuspid regurgitation: an important innovation in cardiology. Wien Klin Wochenschr. February 2020;132(3-4):57-60. doi:10.1007/s00508-020-01621-0

3.Enriquez-Sarano M, Messika-Zeitoun D, Topilsky Y, et al. Tricuspid regurgitation is a public health crisis November 9, 2019. Prog Cardiovasc Dis. November-December 2019;62(6):447-451. doi:10.1016j.pcad.2019.10.009
4.Preliminar findings in TRICUS/TRICUS EURO Study: Safety and Efficacy of the TricValve® Transcatheter Bicaval Valves System in the Superior and Inferior Vena Cava in Patients With Severe Tricuspid Regurgitation

5.As observed by a CT scan follow-up carried out in Hospital Clinico de Valladolid. Dr. Ignacio Amat-Santos and Dr. Alfredo Redondo Diéguez

TricValve is a CE marked device comercially available in EU / Non-EU territories. These products are intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use provided inside the product package. For more information please visit our website:

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