Over 200,000 patients worldwide are estimated to receive a CRT device each year. However, limitations prevent some patients from benefiting.

- **5%** of patients fail to have coronary sinus (CS) lead implanted in a single procedure\(^1\)^
- **30%** of patients who receive a CRT device don’t benefit from treatment\(^1\)^
- **10%** of patients experience CS lead complications including lead dislodgements and phrenic nerve stimulation\(^1\)^
- **23%** of patients who receive a CRT device already have a conventional pacemaker or ICD implanted\(^1\)

\(^{1}\) Studies of patients who receive a CRT device don’t benefit from treatment\(^1\)^

- **Up to 30%** of patients with an acute or chronic CS lead issue responded to CRT
- **Up to 10%** of patients experience CS lead complications including lead dislodgements and phrenic nerve stimulation\(^1\)^
- **Up to 23%** of patients who receive a CRT device already have a conventional pacemaker or ICD implanted\(^1\)

**Patients that may benefit**

- Patients who have not responded to CRT
- Patients with an acute or chronic CS lead issue
- Patients with known risk associated with a CRT upgrade

Caution: Not commercially available in the United States

**EBR Systems, Inc.**
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Sunnyvale, CA 94085 USA
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**References**

The WiSE CRT System is designed to overcome the limitations of traditional CRT pacing. It provides wireless, left ventricular (LV) endocardial pacing in patients with issues related to standard epicardial coronary sinus (CS) pacing leads. 97% of patients achieved implantation success (N=35) 97% of patients who failed conventional CRT achieved cardiac resynchronization at 1-month (N=34).

The SELECT-LV study showed sustained cardiovascular improvement for complex CRT patients treated with the WiSE System. 81% of patients experienced persistent clinical benefits at 6-months (N=24).

**CLINICAL RESULTS**

97% of patients achieved implantation success (N=35)

97% of patients who failed conventional CRT achieved cardiac resynchronization at 1-month (N=34)

**ENDOCARDIAL**

More Physiological Pacing
Stimulates from the inside of the left ventricle. Endocardial pacing is considered more physiological – delivering improved electrical and haemodynamic response.12,13,14

**CUSTOMIZED**

Freedom in LV Positioning
LV site selection of the stimulation location, designed to enable tailored therapy to meet individual patient needs.
Over 200,000 patients worldwide are estimated to receive a CRT device each year. However, limitations prevent some patients from benefiting.

5% of patients fail to have coronary sinus (CS) lead implanted in a single procedure.1

30% of patients who receive a CRT device don’t benefit from treatment.2

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23% of patients who receive a CRT device already have a conventional pacemaker or ICD implanted.4-10

Studies demonstrated a higher risk (18.7%) of developing major complications during an upgrade to a CRT system.11

PATIENTS THAT MAY BENEFIT

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**HOW IT WORKS**

**WIRELESS**
Leadless LV Stimulation
Designed to eliminate lead complications.

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**CUSTOMIZED**
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LV site selection of the stimulation location, designed to enable tailored therapy to meet individual patient needs.

**TRANSMITTER**
Transmitter detects the RV pacing pulse from the co-implant.

**RECEIVER**
Receiver electrode paces by converting the ultrasound energy into electrical energy.

**TRANSIMTS**
Transmitter transmits ultrasound energy to the receiver electrode.

**CUSTOMIZED**
Freedom in LV Positioning
LV site selection of the stimulation location; designed to enable tailored therapy to meet individual patient needs.

**CLINICAL RESULTS**

- 97% of patients achieved implantation success (N=35)
- 97% of patients who failed conventional CRT achieved cardiac resynchronization at 1-month (N=34)
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The SELECT-LV study showed sustained cardiovascular improvement for complex CRT patients treated with the WiSE System.

**LENGTH OF BODY**
9.1mm

**DIAMETER**
2.7mm

**HOW IT WORKS**

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**HOW IT WORKS**

1. **Transmit**: Transmitter detects the RV pacing pulse from the co-implant.
2. **Transmit**: Transmitter transmits ultrasound energy to the Receiver Electrode.
3. **Receive**: Receiver Electrode paces by converting the ultrasound energy into electrical energy.

**WIRELESS**

- **Leadless LV Stimulation**
  - Designed to eliminate lead complications.

**ENDOCARDIAL**

- **More Physiological Pacing**
  - Stimulates from the inside of the left ventricle. Endocardial pacing is considered more physiological – delivering improved electrical and haemodynamic response.

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  - LV site selection of the stimulation location, designed to enable tailored therapy to meet individual patient needs.

**CLINICAL RESULTS**

- **81%** of patients experienced persistent clinical benefits at 6-months (N=24)

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**Composite Global Score**

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</tr>
</tbody>
</table>

**All in as little as 2 milliseconds!**

**LENGTH OF BODY**: 9.1mm

**DIAMETER**: 2.7mm
**CLINICAL RESULTS**

| Basis | Select-LV | Miracle-ICD | Miracle | Reverse | Prospect | Total | % \(\text{N=24}\)
|---|---|---|---|---|---|---|---
| NYHA Baseline | 2.6 | 2.6 | 1.8 | 1.8 | 2.6 | 2.3 | 2.3 |
| NYHA 6m | 1.8 | 1.8 | 1.8 | 1.8 | 1.8 | 1.8 | 1.8 |
| NYHA Improvement | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 | 0.8 |
| NYHA Improved | 81% | 81% | 81% | 81% | 81% | 81% | 81% |

**HOW IT WORKS**

**WiSE™ CRT SYSTEM**

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