

An Incisionless Solution for
**CHRONIC
ACID REFLUX**



**No more reflux,
no incisions, no
more PPIs!**

 **TIF**[®] PROCEDURE
FOR REFLUX

Reflux, the root of your discomfort.

GERD

Most people associate acid reflux with its most typical symptoms: heartburn and regurgitation. These indicators are usually attributed to gastroesophageal reflux disease (GERD), caused by the reflux, or backflow, of stomach fluids up into the lower esophagus. While experiencing occasional heartburn and acid reflux is normal, symptoms occurring consistently more than twice a week could be a sign of GERD.

LPR

Reflux can also extend beyond the lower esophagus, causing a series of symptoms not immediately associated with heartburn, varying from mild or moderate to severe.

You may experience:



Gas &
Bloating



Soreness of
Chest & Throat /
Throat Clearing



Trouble
Sleeping



Persistent
Cough

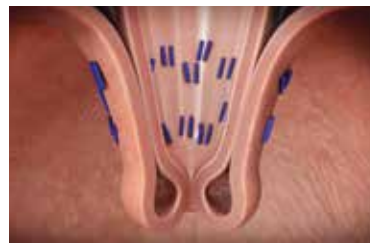
These symptoms can indicate laryngopharyngeal reflux (LPR). Patients suffering from LPR may not experience heartburn, and frequently do not achieve sufficient relief with traditional reflux medications like proton pump inhibitors (PPIs), which only reduce the acid content of the stomach.

**When left untreated,
REFLUX can lead to
serious conditions.**



The TIF Procedure

Transoral Incisionless Fundoplication (TIF®) is an incisionless procedure that treats GERD at its source. This approach uses the EsoPHYX® device to reconstruct an antireflux valve to restore the body's natural protection against refluxing stomach contents.



By accessing the gastroesophageal junction (GEJ) through the mouth, there are no scars, minimizing complications and possibly leading to a quicker recovery.

What causes GERD/REFLUX?

GERD is caused by changes in the gastroesophageal valve (GEV) that allow acid to flow back from the stomach into the esophagus. The GEV is the body's natural antireflux barrier.



Healthy stomach

GERD

FAQ'S

Is the TIF procedure effective?

Studies show that for up to five years after the TIF procedure, GERD symptoms are significantly reduced and most patients are able to stop using daily PPI medications to control symptoms.³

Is the TIF procedure safe?

The TIF procedure has an excellent safety profile. It has been performed on more than 22,000 patients with minimal complications. Clinical studies demonstrate that TIF patients rarely report experiencing long-term side effects commonly associated with traditional antireflux surgery such as chronic dysphagia (trouble swallowing), gas bloat syndrome, and increased flatulence.



No more **REFLUX.**



No **INCISIONS.**

BEFORE THE PROCEDURE

To determine if you are eligible or an appropriate candidate, your physician will perform diagnostic testing. You will receive instructions on when to stop eating and drinking just prior to the TIF procedure.

DURING THE PROCEDURE

The TIF procedure is performed under general anesthesia and generally takes less than an hour. The EsophyX device and an endoscope are introduced together through your mouth (transorally) and advanced into the esophagus. With visualization provided by the endoscope, the physician uses the EsophyX device to reconstruct and form a new valve.

AFTER THE PROCEDURE

You may be able to return home the next day as well as go back to work and resume most normal activities within a few days. You should expect to experience some discomfort in your stomach, chest, nose and throat for three to seven days after the procedure. While your newly reconstructed valve heals, you will be on a modified diet.

What are the benefits of the TIF Procedure?

- ✓ **Minimally Invasive**
Faster recovery
- ✓ **No Incisions**
No visible scars
- ✓ **No Metal Implant**
No need to remove foreign object
- ✓ **Restores valve to natural state**
Maintain normal bodily function

Ask your physician to find out if you're a good candidate for the TIF Procedure.



No more PPIS.

Eat or drink the foods you want, when you want.

Get Back to Living

What are my treatment options?

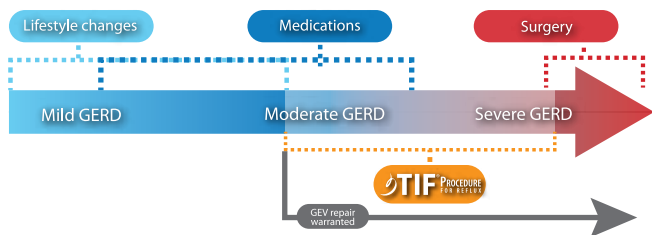
Depending on the severity of your GERD or LPR symptoms, treatment may involve lifestyle modifications, medical therapy, or antireflux surgery.

Dietary and lifestyle changes may help relieve mild GERD or LPR symptoms for infrequent sufferers.

Over the counter and prescribed pharmaceuticals provide temporary relief, but do not treat the underlying anatomical problem or stop the disease from worsening. Proton pump inhibitors (PPIs), the most effective medical therapy for GERD or LPR, are generally approved for eight weeks of use. While safe and effective for most patients, studies evaluating long-term PPI use demonstrate a series of undesirable side effects—visit FDA.gov for more information.¹

Conventional antireflux surgery has been long considered an effective solution to treating GERD or LPR, but typically includes side effects such as difficulty swallowing (26%), bloating (36%) and increased flatulence (65%).²

The TIF Procedure for reflux treats the underlying cause of GERD or LPR without incisions. This innovative procedure rebuilds the antireflux valve and restores the body's natural protection against reflux.



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For more information about your treatment options, visit:

GERDHELP.com



The TIF procedure may not be appropriate for your condition and results may vary. Talk to your doctor about benefits and risks.

References:

- ¹ <http://www.fda.gov/Drugs/DrugSafety/InformationbyDrugClass/ucm213259.htm>
- ² Varin, O., et al. Arch Surg. 2009; 144(3): 273-278
- ³ Trad, KS, et al. Surg Innov. 2018 Apr;25(2):149-157

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