An Incisionless Solution for

CHRONIC ACID REFLUX

No more **PAIN**.





No more **PILLS**.

No **SCARS**.





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

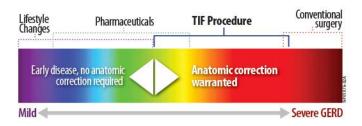
Dietary and lifestyle changes may help mild GERD sufferers with infrequent symptoms find relief.

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, 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.

Conventional antireflux surgery has been long considered an effective solution to treating GERD, but typically includes side effects such as difficulty swallowing (26%), bloating (36%) and increased flatulence (65%).¹

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





What is GERD?

While experiencing occasional heartburn and acid reflux is normal, symptoms surfacing consistently more than twice a week could be a sign of gastroesophageal reflux disease (GERD).

GERD symptoms may affect patients differently and involve symptoms which vary from mild or moderate to severe. You may experience any of the typical and atypical symptoms listed below.

SYMPTOMS

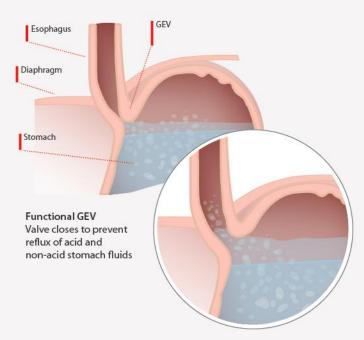


When left untreated, **GERD** can lead to serious conditions.



What causes GERD?

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.

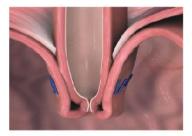


Dysfunctional GEV
Valve is unable to close, allowing stomach fluids to reflux into esophagus

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 reflux.



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

FAQ'S

Is the TIF procedure effective?

Studies show that for up to three years after the TIF procedure, GERD symptoms are reduced and most patients are able to stop using daily PPI medications to control symptoms.2

Is the TIF procedure safe?

The TIF procedure has an excellent safety profile. It has been performed on more than 17,000 patients with minimal complications. Clinical studies demonstrate that TIF patients rarely experience long-term side effects commonly associated with traditional antireflux surgery such as chronic dysphagia (trouble swallowing), gas bloat syndrome and increased flatulence.

BEFORE THE PROCEDURE

Your physician will determine if you are a candidate by having you undergo 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 surgeon 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.

Am I a good candidate for the TIF Procedure?

The TIF procedure is most appropriate for those suffering from GERD who:

- Regularly experience troublesome symptoms of GERD
- No longer respond adequately or are dissatisfied with pharmaceutical therapies
- Are concerned about the adverse long-term effects of taking PPIs
- Are considering surgical intervention but are concerned about the complication rate, mortality and potential side effects (e.g. gas bloat, dysphagia, inability to vomit) of laparoscopic antireflux surgery



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



Endogastric Solutions 18109 NE 76th Street, Suite 100 Redmond, WA 98052 Phone: 425-307-9200

Fax: 425-307-9201

For more information about your treatment options, visit:

GERDHelp.com



The TIF procedure may or may not be appropriate for your health condition; only your doctor can explain the benefits and risks of all treatment options. Results may vary; visit GERDHelp.com for more clinical data. The TIF procedure for reflux was developed by EndoGastric Solutions, Inc. who may have co-funded this marketing material.

References

- Varin, O., et al. Total vs Partial Fundoplication in the Treatment of Gastroesophageal Refl ux Disease: A Meta-Analysis. Arch Surg. 2009; 144(3): 273-278.
- 2. Data on file; http://www.gerdhelp.com/blog/references/references-tif-procedure-brochure/

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