





INSPIRIS RESILIA Aortic Valve

The right choice today.

Because today, your patients want an improved quality of life and the potential to expand their future options.



Built with RESILIA tissue, the INSPIRIS valve is designed to offer enhanced tissue anti-calcification technology that will potentially allow the valve to last longer.⁶

- > RESILIA tissue is bovine pericardial tissue treated with a special integrity preservation technology that effectively mitigates free aldehydes, a key factor in tissue calcification, while protecting and preserving tissue.^{6,7}
- > RESILIA tissue is the result of a development program involving more than 100 evaluations of safety and efficacy.

Backed by a strong and growing base of preclinical and clinical evidence supporting its ongoing study of durability and hemodynamic performance. 6,8,9

COMMENCE clinical trial (n=689)

With 689 patients in 27 sites and a total of 3665.6 aggregate patient-years of follow-up, the COMMENCE aortic trial shows high rates of freedom from mortality, reintervention, and SVD with a bioprosthetic valve using RESILIA tissue. Data from patients evaluated at 7 years show excellent outcomes (N=195), with clinically stable hemodynamics and high rates of freedom from regurgitation.⁸

99.3% freedom from SVD through 7 years

Hemodynamic performance: Echo-derived mean gradients (mmHg) 10.2 ± 4.5 10.8 ± 5.7 11.1 ± 5.8 11.6 ± 6.0 9.4 + 4.5N = 631N = 586N = 548N = 506N = 445N = 150N = 15725 20 15 10 5 0 23 mm -25 mm -

European feasibility trial (n=133)

Sustained hemodynamics and no observed SVD at 5-year follow-up (565 cumulative patient-years).⁹

100% freedom from SVD through 5 years



Ready for tomorrow.

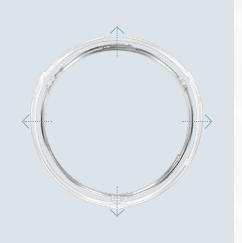
Help your patients meet the future confidently, with enhanced options for subsequent valve intervention.

The INSPIRIS RESILIA valve incorporates novel VFit technology, designed to enable valve-in-valve procedures in the future, at a time when patients are older and potentially at a higher risk for complications.

Unlike other valves, the INSPIRIS RESILIA valve is specifically designed to deliver a controlled and predictable expansion during valve-in-valve deployment.*10

Designed to deliver predictable and controlled expansion

The valve's cobalt-chromium alloy band enables a controlled expansion to fit a new transcatheter valve within the existing INSPIRIS RESILIA valve. The expansion feature is available on sizes 19–25 mm for a broad range of patients with varying annulus size.



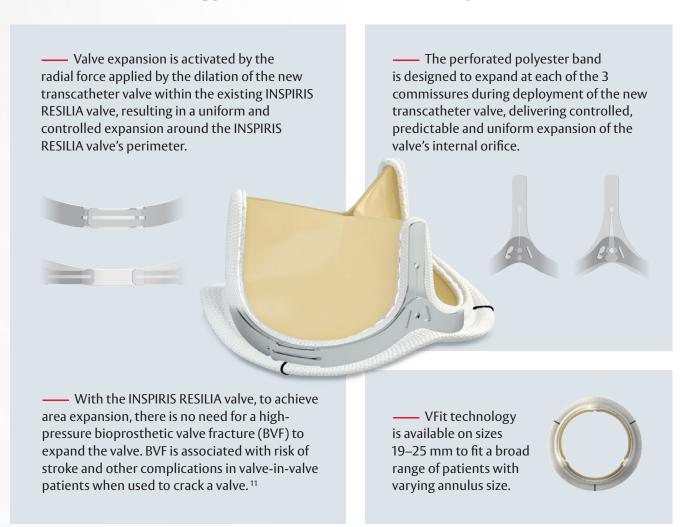
Patients undergoing a valve replacement are living long lives and remaining more active through their later years, increasing the need for advanced valve replacement technologies. The absence of structural valve deterioration in these patients is extremely encouraging and highlights the potential of valves containing RESILIA tissue for patients who may otherwise opt for a mechanical valve, which requires long-term use of blood thinning medications."

John D. Puskas, MD
Principal investigator for the COMMENCE study

^{*} Refer to device Instructions for Use for important warnings related to VFit technology. These features have not been observed in clinical studies to establish the safety and effectiveness of the model 11500A for use in valve-in-valve procedures. VFit technology is available on sizes 19 -25 mm.



How VFit technology enables a controlled expansion





Expanding future possibilities for you and your patients starts today.

The INSPIRIS RESILIA valve is from Edwards Lifesciences, the company trusted by surgeons for more than 60 years to deliver safe, responsible structural heart disease innovation.

Talk to your rep or visit **Edwards.com/INSPIRIS** to find out more.

Important Safety Information: INSPIRIS RESILIA Aortic Valve

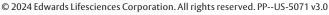
Indications: For use in replacement of native or prosthetic aortic heart valves. Contraindications: There are no known contraindications with the use of the INSPIRIS RESILIA aortic valve. Complications and Side Effects: Thromboembolism, valve thrombosis, hemorrhage, hemolysis, regurgitation, endocarditis, structural valve deterioration, nonstructural dysfunction, stenosis, arrhythmia, transient ischemic attack/stroke, congestive heart failure, myocardial infarction, any of which could lead to reoperation, explantation, permanent disability, and death. Warnings: DO NOT ADJUST THE VALVE DIAMETER BY EXPANDING THE BAND PRIOR TO/OR DURING IMPLANTATION OF THE SURGICAL VALVE. The expandable band is not designed to allow for compression or expansion during implantation of the surgical valve. This will cause damage to the valve and may result in aortic incompetence. DO NOT PERFORM STAND-ALONE BALLOON AORTIC VALVULOPLASTY PROCEDURES ON THIS VALVE FOR THE SIZES 19–25 mm as this may expand the valve causing aortic incompetence, coronary embolism or annular rupture. Valve-in-valve sizing in the INSPIRIS valve has only been tested with specific Edwards transcatheter heart valves. Use of other transcatheter valves may result in embolization of transcatheter devices anchored within or result in annular rupture.

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician. See Instructions for Use for full prescribing information.

References

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