Meet a Patient

TYRONE - DETERMINED TO STAY ACTIVE

A typical day for Tyrone, a store manager in Milwaukee, quickly became a nightmare when an armed robber held a gun to his head and demanded cash.

In that very moment, Tyrone felt his heart drop, but he kept his composure and cooperated. The gunman fled quickly and Tyrone and his staff were safe.

“But I knew something had happened to my heart,” recalls Tyrone.

A week later, in September 2011, Tyrone went to the doctor. The doctor sent him straight to the hospital, where a right heart catheterization showed a low ejection fraction (EF). Tyrone was referred to a heart specialist, but, certain it would pass, Tyrone did not go. A year later he was in the emergency room, feeling breathless and tired.

Tyrone was diagnosed with heart failure. Right away, he was given a LifeVest™ to wear temporarily. Soon after, he received a defibrillator, and the CardioMEMS™ HF System to help manage his fluid retention.

A few years later, in 2015, his care team started talking with him about a HeartMate™ LVAD. The decision was made to wait.

By late Spring of 2017, Tyrone was feeling even worse.

“I was supposed to be hosting a surprise party for my wife. Instead, I ended up in the hospital,” recalls Tyrone. “I thought I just needed to get some fluids off but they told me I was in bad shape and admitted me. A few days later, I received my HeartMate 3™ LVAD.”

After his recovery, Tyrone was determined to incorporate his HeartMate 3 LVAD into an active life. He created a new way to wear his device so that he could get back to some of the physical activities he previously enjoyed.

“I wanted to be comfortable whether I was bowling, shooting 3-pointers, on the treadmill or fishing. My HeartMate 3 LVAD and I agreed that I’m in charge and together, we work great.”

“... I knew something had happened to my heart”

Today, Tyrone takes better care of himself and is building a new future for his family. He opened his new restaurant, BigCountry’s Barbecue, in March 2018. It was such an instant success they had to move to a larger location just eight months later.

“Working has lifted my spirits so high and I feel amazing. Thanks to my HeartMate 3 LVAD, I live a wonderful life.”

Each testimonial relates an account of an individual’s response to the treatment. The patient’s account is genuine, typical and documented. However, it does not provide any indication, guide, warranty or guarantee as to the response other persons may have to the treatment. Responses to the treatment discussed can and do vary and are specific to the individual patient. See Important Safety Information referenced within.
Getting Involved
FEBRUARY IS HEART MONTH - 2019

February is American Heart Month, a time for communities, health professionals and families to work together to raise awareness of heart disease.

As a heart failure survivor and HeartMate™ LVAD Ambassador, you are a symbol of hope to us all. We know you’re out there, spreading the word about the risks of heart disease and the importance of heart health, and we’d love to hear about it!

From Go Red for Women Day, Heart Walks®, Red Cross training events, or a small gathering of friends cooking and enjoying a healthy meal, please share your photos and stories with us.

Email your Heart Month photos to HeartMateAmbassador@abbott.com to potentially share them in this newsletter.

Nutrition Tips
DECODING FOOD LABELING - SODIUM*

According to the American Association of Heart Failure Nurses (AAHFN), decreasing sodium intake is an important aspect of heart failure management. Below are a few tips to help you see more clearly how much sodium is in your food:

1. **“Serving Size” and “Servings Per Container”**.
   In this example the serving size is 1 cup. The whole package holds two servings. So if you eat all of it - doubling the serving size listed - you will eat double the salt, as well as double the calories.

2. **Sodium content**. Salt is listed as “sodium” on Nutrition Facts Labels. In this example, there is 470 mg of sodium in a 1 cup serving. Ideally, sodium should be 300 mg or less per serving.

3. **Ignore the “Percent Daily Values”**. Focus instead on the milligrams (mg) of sodium per serving as described above. A general rule to follow:
   - “Low sodium” = 140 mg or less per serving
   - “No sodium” = less than 5 mg per serving

*Excerpted (and photo credit) from the AAHFN patient website: https://www.aahfn.org/mpage/patient_tip_sheet

Your Voice
SHARE YOUR STORY

Your experiences, point of view and impressions as a HeartMate™ LVAD Ambassador are very important to Abbott, and we’d like to hear yours.

“Everyone had a lot of fun while raising money for the American Heart Association and I found their enthusiasm very inspiring.”

In April of last year, Jason decided to take his message of hope online by starting a Facebook group for LVAD recipients and caregivers. He wanted to create a positive place where recipients, potential recipients and caregivers hear encouragement and hope. Since he’s started the page, his group has grown to over 1,000 members.

“The kids at the school think of me as their own personal robot,” said Jason of his volunteer work. “And the LVAD folks I’ve met through Facebook are just a wonderful and supportive community.”

When talking with LVAD recipients, Jason stresses how important it is to find something to live for. For him it’s spending quality time with his wife and kids, and sharing his message of hope.

If you or someone in your LVAD community is doing something great – we want to hear about it. Email HeartMateAmbassador@abbott.com to share it in this newsletter.

Ambassador Snapshot
JASON - DAD, COACH, VOLUNTEER AND ROBOT

“Jason developed heart failure as a result of viral cardiomyopathy, and in July of 2016 he and his health care team decided on the HeartMate II™ LVAD. As an active father of two, Jason was thrilled to be able to return to activities that heart failure had put on hold, like coaching his son’s soccer team.

Jason also added a new activity, using his LVAD and his heart failure story as tools to discuss heart health with the students at his children’s school. He also loves supporting student activities, like their Jump Rope for Heart event.

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Important Safety Information

Brief Summary: Prior to using these devices, please review the Instructions For Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use.

HeartMate 3™ LVAS Indications: The HeartMate 3 Left Ventricular Assist System is indicated for providing short- and long-term mechanical circulatory support (e.g., as bridge to transplant or myocardial recovery, or destination therapy) in patients with advanced refractory left ventricular heart failure.

HeartMate II™ LVAS Indications: The HeartMate II Left Ventricular Assist System is indicated for use as a “bridge to transplantation” for cardiac transplant candidates who are at risk of imminent death from non-reversible left ventricle failure. It is also indicated for use in patients with New York Heart Association (NYHA) Class IIIB or IV end-stage left ventricular failure, who have received optimal medical therapy for at least 45 of the last 60 days, and who are not candidates for cardiac transplantation. The HeartMate II Left Ventricular Assist System is intended for use both inside and outside of the hospital, or for transportation of Left Ventricular Assist Device patients via ground ambulance, airplane, or helicopter.

HeartMate 3 and HeartMate II LVAS Contraindications: The HeartMate 3 and HeartMate II Left Ventricular Assist Systems are contraindicated for patients who cannot tolerate, or who are allergic to, anticoagulation therapy.

HeartMate 3 and HeartMate II LVAS Adverse Events: Adverse events that may be associated with the use of the HeartMate 3 or HeartMate II Left Ventricular Assist System include, but are not limited to those listed below: death, bleeding, cardiac arrhythmia, localized infection, right heart failure, respiratory failure, device malfunctions, driveline infection, renal dysfunction, sepsis, stroke, other neurological event (not stroke-related), hepatic dysfunction, psychiatric episode, venous thromboembolism, hypertension, arterial non-central nervous system (CNS), thromboembolism, pericardial fluid collection, pump pocket or pseudo pump pocket infection, myocardial infarction, wound dehiscence, hemolysis (not associated with suspected device thrombosis) and pump thrombosis.

‡ Indicates a third party trademark, which is property of its respective owner.

™ Indicates a trademark of the Abbott group of companies.

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