Meet a Patient

REGGIE W. – HEARTMATE 3™ LVAD RECIPIENT

In 2008, long before Reggie met his future bride, Michelle, he had a heart attack. Thankfully, it was an isolated event for an otherwise healthy 37-year old man.

Just two short years later in 2010, Reggie was diagnosed with heart failure. His symptoms were managed with medications but three years later it was clear they were becoming less effective and more intervention was required. In 2013 Reggie received a pacemaker and defibrillator to help his failing heart. Because heart failure is progressive, he knew these devices would only help for so long.

“When we first started dating, Reggie warned me,” says his bride, Michelle. “He told me, ‘I may be a great guy, but I have a broken heart.’”

Reggie and Michelle were married in August 2016, and much of the first year of their marriage was spent in and out of the hospital with heart failure related complications.

“When we first started dating, Reggie warned me,” says his bride, Michelle. “He told me, ‘I may be a great guy, but I have a broken heart.’”

In early 2017, Reggie was once again admitted to the hospital, and it was at this point that he and Michelle were first told about LVADs. Reggie’s cardiologist told them that an LVAD was Reggie’s best chance of survival and regaining quality of life.

While Reggie awaited surgery, Michelle learned everything she could about LVADs. A week later, Reggie was enrolled in the MOMENTUM 3 clinical trial and was implanted with the HeartMate 3™ LVAD as a bridge-to transplant.

During his recovery in the Trauma Intensive Care Unit, Reggie was visited by the surgical residents. “They knew nothing about LVADs,” recalls Michelle. The couple realized at this moment that they wanted to do something to raise awareness of LVAD therapy with as many people as possible.

As a former firefighter, Reggie knew his fellow, local firefighters could greatly benefit from learning about LVADs. He shared educational materials designed for first responders and demonstrated his own LVAD equipment.

Reggie and Michelle also created a local Facebook group for North Carolina’s LVAD recipients and their families.

“We knew nothing going into this,” says Reggie, “and I admit there was a huge fear of the unknown. My goal is to offer support to others who may have similar fears, and help them realize that life can be great again.”

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.
Many HeartMate™ LVAD recipients are very passionate about the positive impact LVAD therapy has had on their lives and wish they had known about it sooner. Some want to share their story in hopes of making a difference for someone else, but aren’t sure where to begin. If this sounds like you, here are a few tips for getting started:

**Why is my story important?**
Your story is important because it may make a difference for someone who is thinking about receiving an LVAD. We often hear from recipients that meeting a person with a HeartMate LVAD was a valued experience for them. The story of your first-hand experience has the power to inspire, encourage, and instill confidence.

**Where do I begin?**
Visit the HeartMate LVAD Ambassador page on the new HeartMate LVAD website (HeartMate.com/pa) and fill out the form to express your interest in becoming an Ambassador.

**When and where do I share my LVAD experience?**
Talk with your care team at your implanting center about your interest in meeting patients and caregivers who wish to learn about or are considering an LVAD. They may direct you to heart failure support groups, and/or local chapters of advocacy organizations (such as Mended Hearts or the American Heart Association), where you can offer to be a resource.

**When sharing my story, what should be my focus?**
What you opt to share and how you share it may vary depending on the audience. Often times you’ll be asked to speak about certain aspects of your experience, as it relates to a topic of discussion among the group, like how you made the decision for LVAD therapy, about your surgery/recovery, or what it’s like to live with an LVAD, for example. It’s important to remember to only discuss your individual experiences rather than speaking of LVADs in general.

To learn more about the HeartMate LVAD Ambassador Program, visit: HeartMate.com/PA.

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**Take a Look**

HEARTMATE.COM IS ALL NEW!

Freshly redesigned, the HeartMate.com website is a hub of information for patients, caregivers and health care providers.

It’s loaded with HeartMate LVAD Ambassador videos, an animation of the new HeartMate 3™ LVAD, LVAD data, educational information about heart failure and LVAD therapy, and the basics of living with an LVAD. You’ll also find updated FAQs, educational resource materials, and the opportunity to receive educational emails on your choice of topics. These email journeys are ideal for patients (and loved ones) who have been newly diagnosed with heart failure, for those wondering about LVAD therapy, and also for those looking for information on HeartMate LVADs.

Visit HeartMate.com and select “Patient”. Tell us what you think of the new site and the email journeys too. Email us at HeartMateAmbassador@sjm.com

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Bruce R. loves art for most of his life, and in high school, he began to paint. Many years later, when he received his HeartMate II™ LVAD in 2013, he discovered a shared appreciation for art at his implanting center, as well as personal inspiration.

Most of the paintings on the hospital walls were of flowers and landscapes—a subject Bruce is most accustomed to. And little did he know that one of his new first new paintings as a HeartMate II LVAD recipient would also become part of the collection at his implanting center. The oil on canvas painting of a 1930's African port is a beautiful piece that brings Bruce joy every time he visits.

Beyond artwork for the center, he also set out to make a gift. “I knew I wanted to make something to show my LVAD care team how much I appreciated them for not giving up on me,” said Bruce.

And so, Bruce created an oil painting of his VAD team, entitled simply “VAD Team” as a special thank you to those, who he says, saved his life. If you or someone in your LVAD community is doing something great – we want to hear about it! Email HeartMateAmbassador@sjm.com to share it in this newsletter.

Rebirthdays Across the Country

BILL C. - CELEBRATING A LEAP DAY REBIRTHDAY

We’ve all heard of “Leap Year Babies” – those who defied the one in 1,461 odds of being born on February 29th – but what are the odds of being implanted with your HeartMate™ LVAD on Leap Day?

It is indeed a unique thing to receive your HeartMate™ LVAD on a day that technically comes once every four years—February 29. And it also begged the question: When exactly do you celebrate a Leap Day ReBirthday, February 28 or March 1? We may have found the answer.

Iowa City Ambassador, Bill C., happens to have his ReBirthday on February 29th, and he says he likes to celebrate on both dates. “Birthday, and for that matter, ReBirthday celebrations are not meant to be just one thing, they’re meant to carry on, just as I do,” he says.

So this year, on February 28, Bill and his wife Karla celebrated his six years of support with his HeartMate II™ LVAD. “I want to celebrate every year, not just what the calendar says!” And in the spirit of keeping the celebration going, he revealed again on March 1.
Individual Experience: 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.

Important Safety Information

Rx Only

Brief Summary: Prior to using these devices, please review the User’s Manual 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-term hemodynamic support (e.g. bridge to transplant or bridge to myocardial recovery) 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 are 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 pocket infection, myocardial infarction, wound dehiscence, hemolysis (not associated with suspected device thrombosis) and possible pump thrombosis.

Please refer to the User’s Manual for detailed indications, contraindications, warnings, precautions and potential adverse events.

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