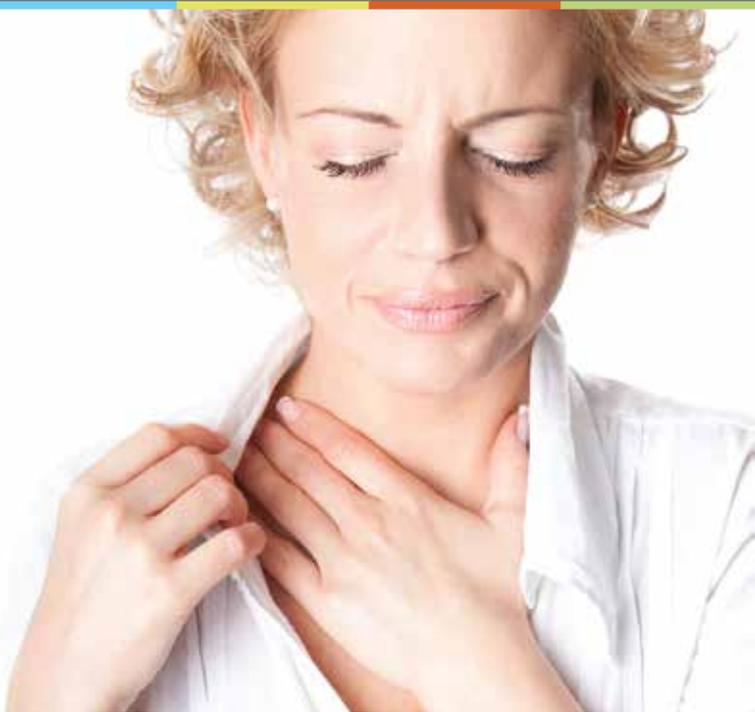


# Persistent Throat Discomfort? It Could Be More Than Just **HEARTBURN**



No  
**PILLS.**



Just  
**RELIEF.**



No  
**SCARS.**



## Get Back to Living

What are my treatment options?

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

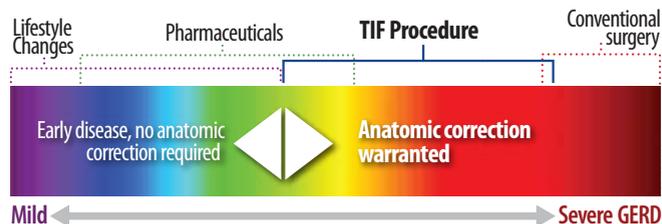
**Dietary and lifestyle changes** may help mild GERD sufferers with infrequent symptoms find relief.

**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](http://FDA.gov) for more information.<sup>1</sup>

**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%).<sup>2</sup>

**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.

 **TIF**<sup>®</sup> PROCEDURE  
FOR REFLUX



# The TIF Procedure

An Incisionless Solution for Acid Reflux.

## Reflux, the root of discomfort.

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.

But reflux can 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 any of the following atypical symptoms:



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 therefore 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.



## What causes REFLUX?

Reflux 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.



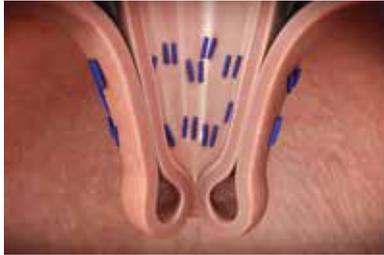
**Functional GEV**  
Valve closes to prevent reflux of acid and non-acid stomach fluids



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

# What is the TIF procedure for reflux?

**Transoral Incisionless Fundoplication (TIF®)** is a procedure that treats LPR and GERD at its source. This incisionless approach uses the EsophyX® device to rebuild an antireflux valve to restore the body's natural protection against acid reflux.



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

## FAQ'S

### Is the TIF procedure effective?

Yes! In a 2016 study, 90% of patients experienced a reduction of their symptoms below the LPR threshold. More than 88% of patients experienced elimination of all daily troublesome atypical symptoms. And 71% of patients were able to **completely** stop taking their PPIs after the TIF procedure.<sup>3</sup>

### Is the TIF procedure safe?

The TIF procedure has an excellent safety profile. It has been performed on more than 18,000 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.

# What are the benefits of the TIF Procedure?

- No external skin incisions – no scarring.
- No internal cutting or dissecting of the natural anatomy – more rapid recovery.
- Very safe. Fewer adverse events and complications than other antireflux surgical procedures.
- Does not limit future treatment options.



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



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For more information about your treatment options, visit:

**GEROHELP.com**



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

References:

- <sup>1</sup> <http://www.fda.gov/Drugs/DrugSafety/InformationbyDrugClass/ucm213259.htm>
- <sup>2</sup> Varin, O., et al. Arch Surg. 2009; 144(3): 273-278
- <sup>3</sup> Trad KS, et al; Surg Endosc. 2016 Sept 21 (TEMPO 3-Year follow-up)

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