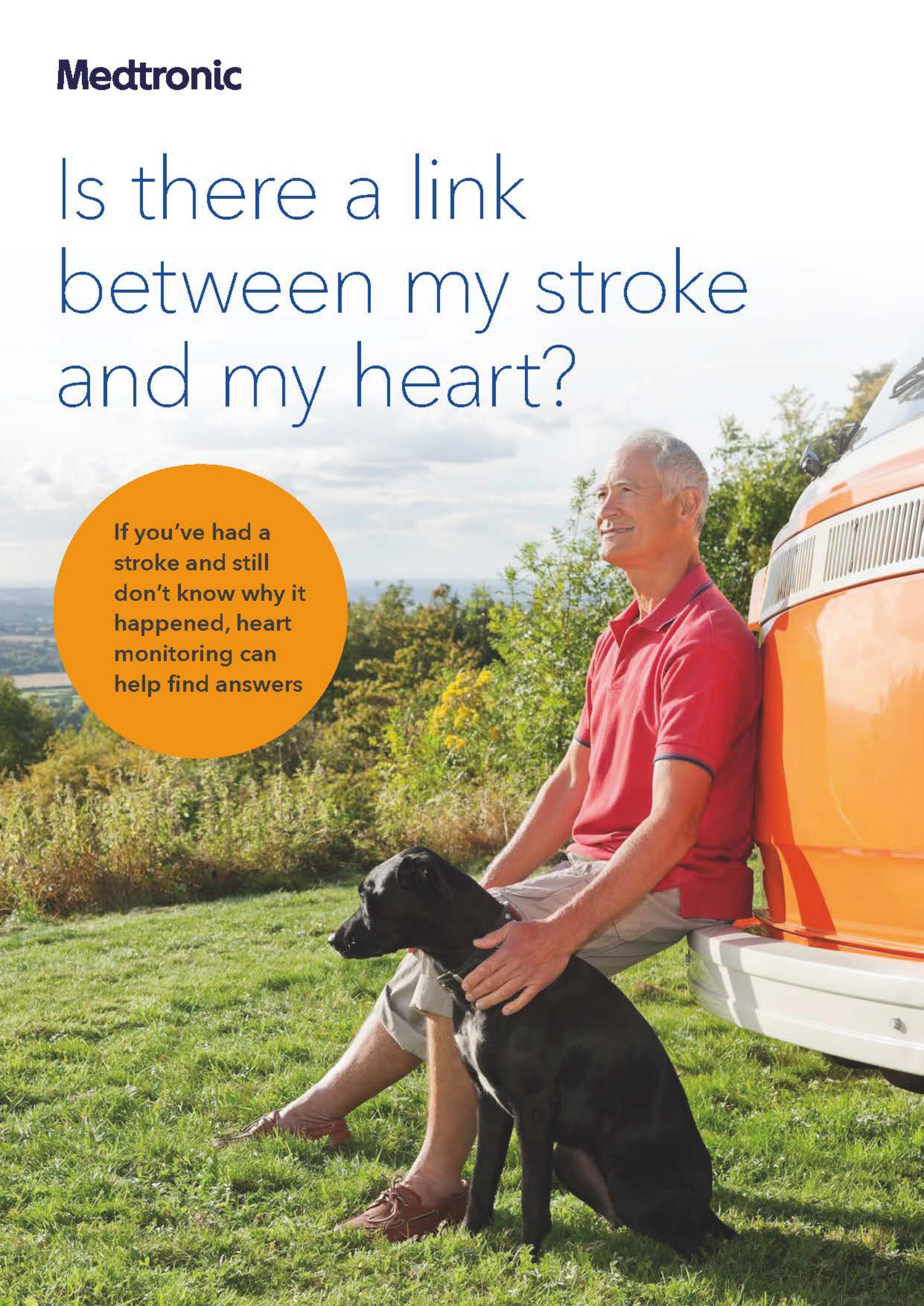


Medtronic

Is there a link between my stroke and my heart?

If you've had a stroke and still don't know why it happened, heart monitoring can help find answers



Understanding what caused your stroke is important

If you've had a stroke, you're at greater risk of having another one.

At least **1 in 4** people who had a stroke will have another stroke within 5 years.¹



Finding out what caused your stroke will help your physician take steps to minimize the risk of having another one.



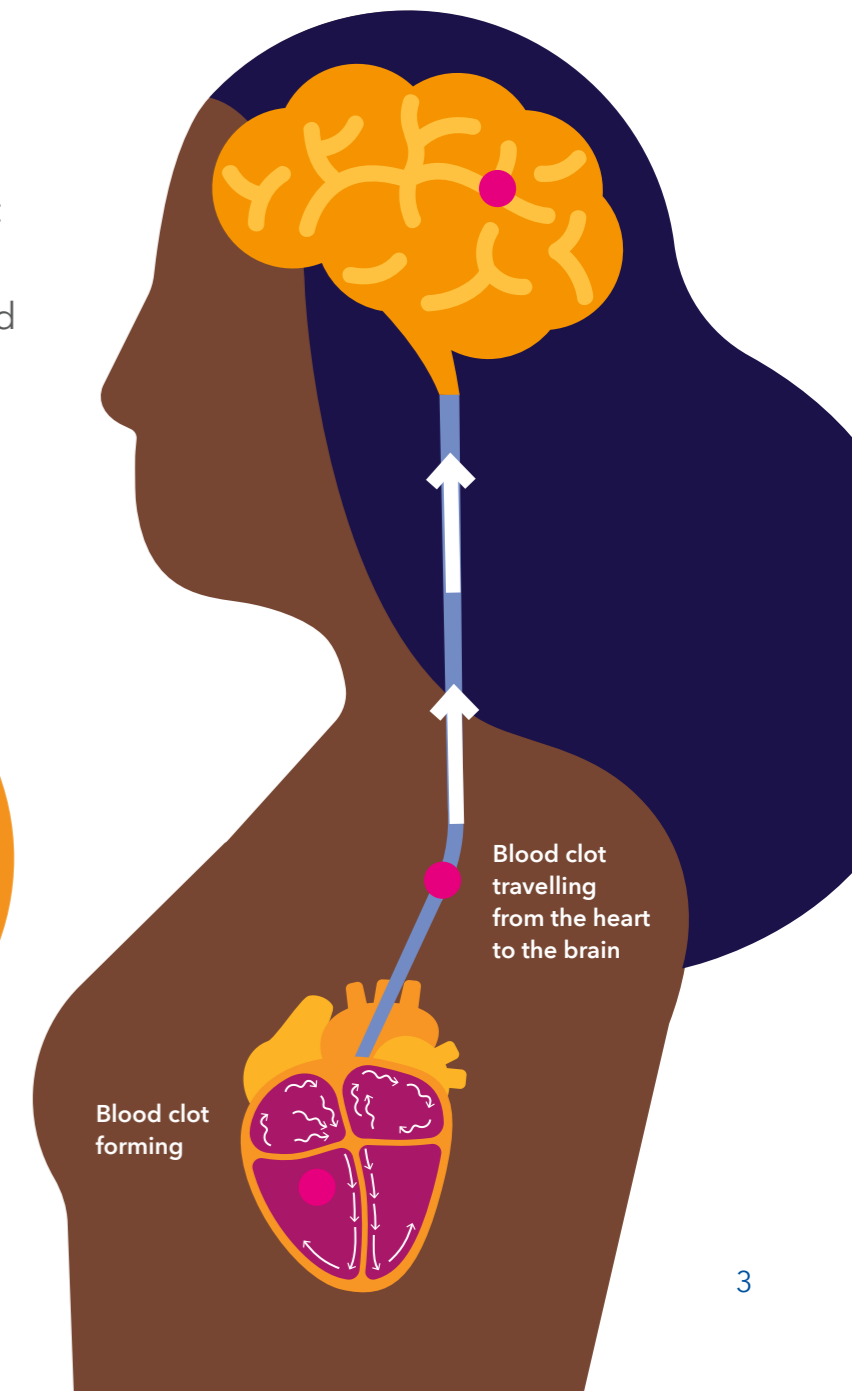
An abnormal heartbeat can put you at risk for a stroke.

Atrial fibrillation (also known as "AF" or "AFib") is the most common type of abnormal heartbeat. When someone has atrial fibrillation, the upper chambers of the heart, or atria, beat very fast and irregularly (fibrillate) so the heart can't pump blood effectively to the rest of the body.

- The blood is not moving through the heart the way it should and blood clots can form.
- A blood clot can then travel out of the heart to the brain, causing a stroke.

AFib is hard to detect because it can happen infrequently and you may not feel any symptoms. If detected with heart monitoring, AFib is treatable and treating AFib can lower your risk of another stroke.

5X
People with atrial fibrillation are 5 times more likely to have a stroke²



Heart monitoring can help your doctor find out if you have atrial fibrillation

You may be asked to wear a portable heart monitor for several days to try to detect atrial fibrillation but in some cases a long-term option like an insertable heart monitor may be needed.



Wearables

Monitor your heart over a short period of time.



Insertable heart monitor

Continuously monitors your heart for a long period of time (3-4.5 years).

An insertable heart monitor is a small device that sends personalized information about your heart to your doctor



By monitoring your heart continuously, an **insertable heart monitor** is more likely to give your doctor a complete picture of your heart health.



If detected, atrial fibrillation is treatable.



Treating atrial fibrillation can lower your risk of another stroke.³



Your doctor can provide treatment to help prevent another stroke from occurring (for example, blood thinning therapy to prevent clots from forming).



How does an insertable heart monitor help?

Your insertable heart monitor is always on, so your doctor can keep track of your heart.



Monitors the number of abnormal heartbeats you're having and how long they last.



Monitors continuously for 3 - 4.5 years.[†]



Enables you to mark your symptoms, if and when you feel the variations in heartbeats.

The insertion procedure is minimally invasive, easy and brief.



There are no wires or sticky patches. Placed just under the skin, the insertable heart monitor is not visible in most people.



There's no need to change your daily activities because of the heart monitor. Shower, sleep and travel as you would normally.



You may safely undergo MRI. Let your imaging technician know about your heart monitor.



You can walk through a metal detector or airport security.

What can I expect from the insertion procedure?

Insertion of an insertable heart monitor only takes a few minutes.



It does not require general anesthesia.



In a small incision, the insertable heart monitor is inserted beneath the skin in the upper left chest area.



Once the monitor has been inserted, the small incision is closed.

If your doctor recommended remote monitoring, you will return home with a home transmitter, which is used to send information from your insertable heart monitor to your doctor.

Long-term cardiac monitoring is prescribed by your doctor. They will discuss getting a device, living with it and what happens once the battery runs out. If the device is removed, the procedure will be similar to the one for inserting it.

Ask your physician all the questions you may have about getting and living with a heart monitor.

More than 1.5 million people
have been implanted and
monitored with a Medtronic
insertable heart monitor⁴

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† Reference the clinician manuals for usage parameters.

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