

Atrial Fibrillation (AFib)

AFib is the most common heart arrhythmia.

It happens when the normal cycle of electrical pulses in your heart is interrupted and the upper chambers beat rapidly and in an uncontrolled manner.¹



Symptoms of AFib include fatigue, dizziness, anxiety, and reduced ability to exercise.

5x

AFib increases the risk of stroke and heart failure by five times.



Black individuals have higher rates of stroke, heart failure and coronary heart disease than other ethnic groups when AFib is present.



Black females with AFib are less likely than their male counterpart to visit a physician for screening or receive indicated medications.²

Ask your doctor about the best treatment option for your AFib.

If medications don't work or give you negative side effects, ask your doctor about **catheter ablation**.
Catheter ablation is a minimally invasive, outpatient procedure that may:



Improve quality of life



Provide symptom relief



Reduce risk of stroke

1. Hugh Calkins, Gerhard Hindricks, Ricardo Cappato, et al. 2017 HRS/EHRA/ECAS/APHRS/SOLAECE expert consensus statement on catheter ablation and surgical ablation of atrial fibrillation.

2. Bhavne PD, Lu X, Girotra S, Kamel H, Vaughan Sarrazin MS. Race- and sex-related differences in care for patients newly diagnosed with atrial fibrillation. Heart Rhythm. 2015;12(7):1406-1412. doi:10.1016/j.hrthm.2015.03.031

As with any medical treatment, individual results may vary. Only a cardiologist or electrophysiologist can determine whether ablation is an appropriate course of treatment. There are potential risks including bleeding, swelling or bruising at the catheter insertion site, and infection. More serious complications are rare, which can include damage to the heart or blood vessels; blood clots (which may lead to stroke); heart attack, or death. These risks need to be discussed with your doctor and recovery takes time.

THERMOCOOL SMARTTOUCH® SF Catheter is indicated for the treatment of drug refractory recurrent symptomatic paroxysmal atrial fibrillation (AF) and for drug refractory recurrent symptomatic persistent AF (continuous AF > 7 days but < 1 year), refractory or intolerant to at least 1 Class I or III AAD, when used with the CARTO® 3 System.

Important information: Prior to use, refer to the instructions for use supplied with this device for indications, contraindications, side effects, warnings and precautions. Caution: US law restricts this device to sale by or on the order of a physician

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