

TAKE THE QUIZ

Take this quiz and decide if it's time to make YOU the priority and not your period. If you answer yes to any of these questions, show this to your doctor and say: "Tell me more about Minerva".

Do you schedule your social life around your period? Y ☐ N ☐

Do you worry about breakthrough bleeding? Y ☐ N ☐

Does your period cause you to feel exhausted, sad or irritable? Y ☐ N ☐

Does your period affect your relationships with family and friends? Y ☐ N ☐

How long do your periods last? _____ Days

Rate your period pain

☐ Minimal ☐ Tolerable ☐ Awful ☐ The Worst

Nina thought her only option to end her period was a hysterectomy. Then she learned about Minerva. **Now she's period-free**

Watch Nina's story at endmyperiod.com



WHAT ABOUT RISKS & SIDE EFFECTS?

Minerva is a simple treatment designed to be safe and comfortable. Side effects beyond the normal discharge as you heal are rare. They include, but are not limited to, thermal injury, perforation of your uterus and infection.

Temporary side effects may include cramping, nausea, discharge and spotting.

"On my heaviest days I couldn't even go to the grocery store. Having Minerva has changed my life. One week later I hiked 15 miles!"

— Dana B., patient and RN

minerva®

The Minerva endometrial ablation procedure is for premenopausal women with heavy periods due to benign causes who do not wish to become pregnant. Pregnancy following the Minerva procedure can be dangerous. The Minerva procedure is not for those who have or suspect uterine cancer; have an active genital, urinary or pelvic infection; or have an IUD. (The IUD must be removed before the Minerva procedure.) Minerva is not a sterilization procedure. Rare but serious risks include, but are not limited to, thermal injury, perforation and infection. Temporary side effects may include cramping, nausea, discharge and spotting. Please contact us if you experience a possible side effect related to the Minerva procedure.

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endmyperiod.com

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HEAVY PERIODS, PMS & CRAMPS?

MEET MINERVA®

NO IUDs
NO HORMONES
NO HYSTERECTOMY

JUST FREEDOM



minerva®

LET'S TALK PERIODS

Bleeding through tampons, pads, clothes, towels...

Cramps so bad you feel like you're giving birth...

Sad, tired and irritable...

Does this sound like yours?

When a hysterectomy was the only option, women suffered through their heavy periods until menopause. But now there is a treatment that is so quick and effective women aren't waiting anymore.

Meet Minerva

- ✓ Quick, one-time treatment
- ✓ No hormones, IUDs, or incisions
- ✓ May improve premenstrual symptoms
- ✓ Dramatically decreases bleeding
- ✓ Treated lining means less clots, less blood
- ✓ Covered by insurance

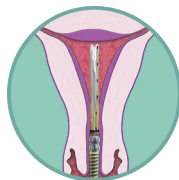
"The Minerva procedure is quick and convenient. I didn't have any pain, discharge or bleeding. It was like, that's it?"

— Evanthia D., Dover, DE

HOW DOES MINERVA WORK?

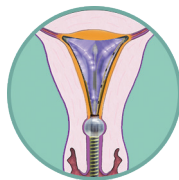
Minerva is a gentle, quick treatment that can be performed right in your doctor's office. Most women are awake and alert and describe the feeling as similar to menstrual cramps.

The entire treatment takes less than 4 minutes. You should be ready to go home about 30 minutes later, and most women are back to a normal routine the following day.



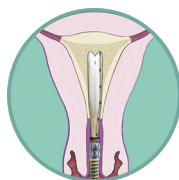
STEP 1

Your doctor will dilate (open) your cervix and insert a thin, soft wand into the uterus through the vagina and cervix.



STEP 2

The wand opens slightly and generates light and heat for 2 minutes, thinning the lining of the uterus.



STEP 3

The wand closes and is gently removed.

CHECK OUT THESE RESULTS

72%

of women had their period totally eliminated with Minerva¹

93%

of women had their period reduced to normal or less with Minerva¹

99%

of women avoided having a hysterectomy with Minerva¹

Visit endmyperiod.com and listen to women share their stories of life before and after the Minerva treatment.



1. Minerva Surgical Endometrial Ablation System. Operator's Manual. Available at: <https://minervasurgical.com/wp-content/uploads/2018/11/L0014-Rev-D-Minerva-Disposable-Handpiece-Desiccant-set-IFU.pdf>. Accessed February 04, 2019.