

Symphion® System

Consider the alternative

A less invasive treatment for uterine fibroids and polyps



Do you suffer from any of these symptoms?

- Heavy bleeding during your period
- Painful and prolonged menstrual periods
- Vaginal bleeding after menopause
- Difficulty with urination and constipation
- Pressure in the pelvic area
- Fullness or pressure in the belly
- Lower back and leg pain
- Pain during sex
- Difficulty in getting pregnant

You're not alone

If you answered "yes" to any of the above symptoms, be sure to talk with your doctor to see if you have uterine fibroids or polyps. They're not uncommon. In fact, as many as 80% of women develop these non-cancerous growths at some point in their lives. Sometimes they go unnoticed because they don't cause any symptoms. But other times they lead to potential problems. If you are diagnosed with uterine polyps or fibroids, take a closer look at potential treatments explained on the following pages.

What are the different types of polyps and fibroids?

Endometrial polyps (A) are tissue growths extending from the inner lining of the uterus, which is called the endometrium. Although these polyps are not usually cancerous, some may become cancerous. So they should be removed for testing. These polyps may also lead to fertility problems.

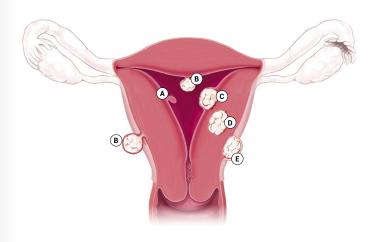
Uterine fibroids are the most common fibroids and cause many of the symptoms described on the previous page. The different types of fibroids include:

Pedunculated fibroids (B) are inside or outside the uterus.

Submucosal fibroids (C) are inside the uterine cavity – often associated with negative effects on fertility!

Intramural fibroids (D) are in the uterine wall.

Subserosal fibroids (E) are on the outside wall of the uterus.



Get back to life sooner

Symphion® Tissue Removal System



What are your options for tissue removal?

Hysterectomy is the removal of the uterus, which includes the fibroids. Abdominal, laparoscopic and vaginal hysterectomies are all surgical procedures that remove the uterus, thereby eliminating any possibility of getting pregnant. They may require hospitalization and recovery is typically 2 to 6 weeks.

Myomectomy removes only the fibroids without removing the uterus. This surgical procedure leaves the uterus in place and preserves the possibility of getting pregnant. It may be done in several ways and may require hospitalization:

- Open surgery requires an abdominal incision to remove large or numerous fibroids that have grown deep into or outside the uterine wall. Recovery is typically 4 to 6 weeks.
- **Laparoscopic** myomectomy calls for one or more very small incisions near your belly button. A lighted viewing instrument is used to remove the fibroids. Recovery is typically 2 to 4 weeks.
- Hysteroscopic myomectomy involves placing a thin, lighted instrument through the vagina and cervix, and into the uterus to locate and remove fibroids or polyps on the inner wall of the uterine cavity. No incisions are needed and recovery is short. The Symphion System is used to perform these hysteroscopic procedures.

Are there any risks?

While complications of hysteroscopic myomectomy are rare, some women experience cramping, mild pain or nausea following the procedure. Other more serious risks such as bleeding, infection and surgical complications are also possible. It's important to discuss these issues with your doctor.

The minimally invasive Symphion procedure requires no incision and no cuts, making it an ideal choice for women planning to have children. No hospitalization is necessary and recovery is just a few days.

Discover the minimally invasive alternative

Have you been diagnosed with uterine fibroids or polyps? And has your doctor recommended surgery or a hysterectomy? Before you decide on the best treatment for you, take a closer look at a less invasive alternative – using the Symphion Tissue Removal System.

Why choose the Symphion System?

- Minimally invasive option
- No incisions
- No mechanical blades and no cutting
- Local anesthesia
- Short recovery time
- Minimal trauma to the uterus

For information about a hysteroscopic procedure using the Symphion System, please consult your physician. Or learn more at www.minervasurgical.com.



How does the Symphion System work?



Your doctor carefully inserts a thin, lighted hysteroscope into your vagina, through your cervix, and into your uterine cavity to see inside. Room-temperature saline flows through the hysteroscope to help your doctor clearly see any unwanted tissue to be removed.



A slender tissue removal device is passed through the hysteroscope, so your doctor can remove the fibroids or polyps – without using mechanical blades.



When the procedure is complete, both the hysteroscope and the tissue removal device will be gently removed from your body.

Procedures are typically performed on an outpatient basis and you will go home the same day. Recovery tends to be about two weeks for most women.



Questions to ask your doctor

- Could my symptoms be caused by fibroids or polyps?
- How will I know if my fibroids require treatment?
- Is a procedure necessary or can I just take medication?
- What are the advantages and disadvantages of available treatment options?
- What is the expected recovery time of each procedure I am considering?
- How quickly can I expect symptom relief with each treatment option?
- Am I an appropriate candidate for a Symphion Tissue Removal System treatment?
- What are the risks and complications of available treatment options?

Symphion® Tissue Removal System

The Symphion System is intended to distend the uterus by filling it with saline to facilitate viewing with a hysteroscope during diagnostic and operative hysteroscopy and provide fluid management through the closed loop recirculation of filtered distension fluid. It is also intended for resection and coagulation of uterine tissue such as intrauterine polyps and myomas using a bipolar resecting device.

CONTRAINDICATIONS: Pregnancy, genital tract infections, and known uterine cancer are contraindications to hysteroscopy. Use of this device for intrauterine distension is contraindicated whenever hysteroscopy is contraindicated. See the operator's manual of your hysteroscope for absolute and relative contraindications.

POTENTIAL ADVERSE EFFECTS: Pregnancy, genital tract infections, and known uterine cancer are contraindications to hysteroscopy. Use of this device for intrauterine distension is contraindicated whenever hysteroscopy is contraindicated. See the operator's manual of your hysteroscope for absolute and relative contraindications.

WARNINGS: Failure to follow any instructions or to heed any Warnings or Precautions could result in serious patient injury. The Symphion System should only be used by physicians trained in hysteroscopy and hysteroscopic surgery using powered instruments. Healthy tissue can be injured, e.g., perforation by improper use of the Resecting Device. Use every available means to avoid such injury.

CAUTION: Federal law (USA) restricts this device to sale by or on the order of a physician. Rx only. The physician using the system must be trained in hysteroscopy. www.minervasurgical.com/safety

Individuals depicted are models and included for illustrative purposes only. Visit MinervaSurgical.com for additional educational resources.

1. Peter Kovacs, MD, PhD. Effects of Fibroids on Women's Fertility. Medscape, April, 2009

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