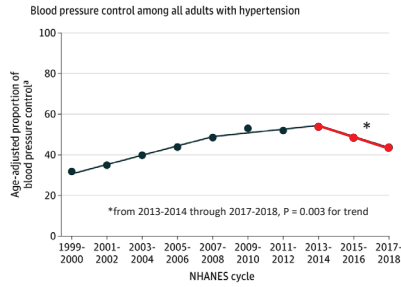


US BLOOD PRESSURE CONTROL RATES ARE DECREASING

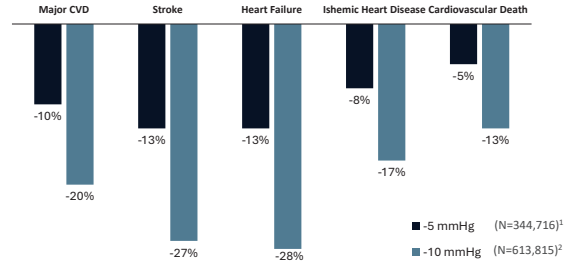
- Over 56% of US hypertensive patients are not controlled to below 140 mmHg
- Over 35% of US treated hypertensive patients are uncontrolled



Muntner P, et al. JAMA. 2020; 323(10):1000-1009.

Beth Israel Deaconess Medical Center | Robert A. and Jean E. Roth Center for Outcomes Research in Cardiology | HARVARD MEDICAL SCHOOL TEACHING HOSPITALS

Relative Risk Reduction Proportional to Decrease in OSBP Irrespective of Baseline BP or CVD History in 2 Meta-Analyses



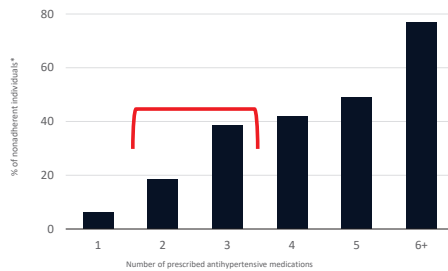
¹ Blood Pressure Lowering Treatment Trialists' Collaboration. Lancet. 2021;397(10283):1825-36

² Embree D, et al. Lancet. 2020;395(10222):957-67

Beth Israel Deaconess Medical Center | Robert A. and Jean E. Roth Center for Outcomes Research in Cardiology | HARVARD MEDICAL SCHOOL TEACHING HOSPITALS

Non-Adherence Increased with Pill Burden

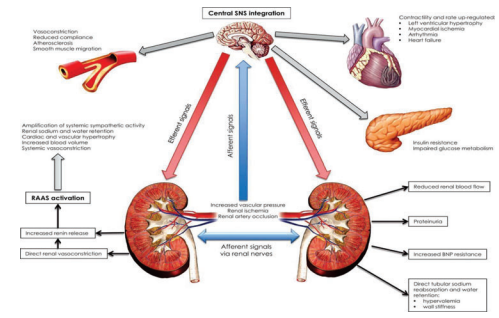
- Going from 2 to 3 medications doubled non-adherence
- Patients on 5 medications are nearly 50% non-adherent
- Majority of patients prescribed 6+ medications were nonadherent



3

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History of Renal Denervation: Mechanistic Reasoning



4

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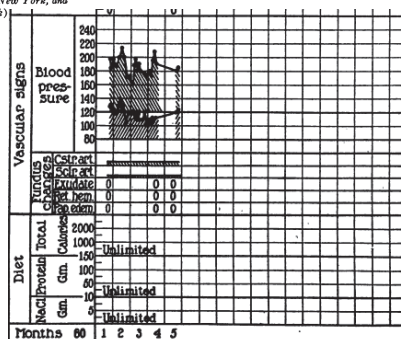
THE EFFECT OF RENAL DENERVATION ON THE LEVEL OF ARTERIAL BLOOD PRESSURE AND RENAL FUNCTION IN ESSENTIAL HYPERTENSION

By IRVINE H. PAGE AND GEORGE J. HEUER JCI 1935

(From the Hospital of the Rockefeller Institute for Medical Research, New York, and the Department of Surgery, New York Hospital, New York)

(Received for publication September 12, 1934)

25-year-old woman who reported easy fatigability and had severe headaches and BP in the range of 208/140 mm Hg. The patient underwent surgical staged, bilateral renal sympathectomy



AJS The American Journal of Surgery

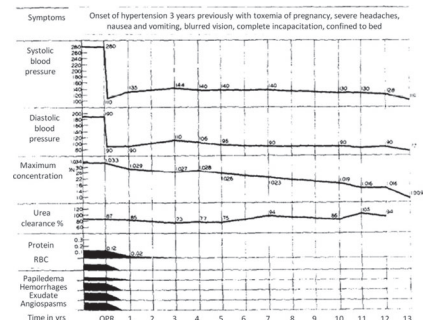
Hypertension and its surgical treatment by bilateral supradiaphragmatic splanchnicectomy

Max Minor Peet, M.D.

ORIGINAL ARTICLE | VOLUME 75, ISSUE 1, P48-68, JANUARY 1948

22-year-old patient with known severe hypertension for >3 years.

- Bedrest for 8 months because of the severity of symptoms
- BP remained at 280/190 mm Hg.
- Fundoscopy examination revealed stage IV retinopathy with evidence of early papilledema, flame-shaped hemorrhages, and cotton wool exudates.



SPLANCHNICECTOMY FOR ESSENTIAL HYPERTENSION

RESULTS IN 1,266 CASES

Reginald H. Smithwick, M.D.

and

Jesse E. Thompson, M.D., Boston

JAMA. 1953;152(16):1501-1504.

Many forms of therapy have been used in an effort to control hypertension. The principal ones may be classified under three headings: (1) diets low in sodium and fat, (2) drugs with a hypotensive or sedative effect, and (3) surgery. The form of surgical therapy that has been used most extensively is intervention on the sympathetic nervous system. There are many data in the literature

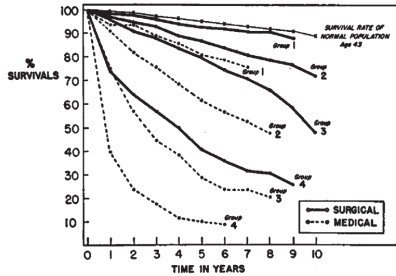


TABLE 1.—Numerical Value of Various Factors That Influence Prognosis

Factor	Numerical Value of Each Factor
Cerebrovascular accident with or without minor residual	1
Abnormal electrocardiogram	
Enlarged heart	
Impending congestive failure	
Phenolsulfonphthalein excretion, less than 25% in 15 min. or less than 60% in 2 hr.	2
Age 50 or over	
Mild angina	3
Cerebrovascular accident, with residual*	
Frank congestive failure, moderate angina	4
Phenolsulfonphthalein excretion, less than 20% in 15 min.	
Unsatisfactory response to sedation	4
Phenolsulfonphthalein excretion, less than 15% in 15 min.	
Nitrogen retention	4

* Cerebral deterioration or definite involvement of arm and/or leg.

- Unfortunately, this was a morbid surgery and frequently resulted in severe orthostatic hypotension and syncope

Thoracolumbar splanchnicectomy was the standard of care for malignant hypertension for 20 years, until...

TREATMENT OF ESSENTIAL HYPERTENSION WITH CHLOROTHIAZIDE (DIURIL)

ITS USE ALONE AND COMBINED WITH OTHER ANTIHYPERTENSIVE AGENTS

Edward D. Freis, M.D., Annemarie Wanko, M.D., Ilse M. Wilson, M.D.

and

Alvin E. Parrish, M.D., Washington, D. C.

J.A.M.A., Jan. 11, 1958

TABLE 2.—Addition of Chlorothiazide to Other Antihypertensive Regimens

TABLE 1.—Antihypertensive Effects of Chlorothiazide Alone in Ten Hypertensive Patients

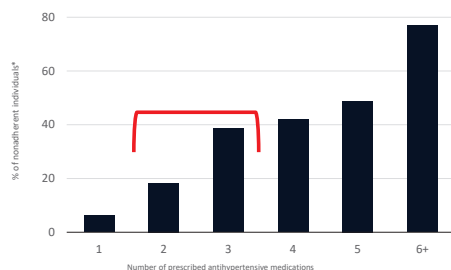
Blood Pressure Levels	Av.	Range
Pretreatment, mm.Hg.	175/108	140/94 to 187/127
Post-treatment, mm.Hg.	136/98	129/78 to 162/104
% decrease in systolic	-18.7	(-10 to -37)
% decrease in diastolic	-12.9	(-4 to -20)
% decrease in mean*	-16.9	(-9 to -25)

* Mean blood pressure = $\frac{\text{systolic} + 2 \times \text{diastolic}}{3}$

Antihypertensive Regimen	No. of Patients	Av. Pretreatment Blood Pressure, Mm. Hg.		% Decrease in Blood Pressure Level	
		Systolic	Diastolic	Before Chlorothiazide	After Chlorothiazide
Ganglionic blocker alone	10	225	135	12.5	28.7
with reserpine	12	214	130	9.6	23.7
with reserpine & hydralazine	8	236	134	29.9	34.8
with hydralazine	3	203	115	7.5	18.3
Veratrum alone	5	210	120	9.7	25.4
with reserpine	12	208	122	6.8	22.6
with reserpine & hydralazine	2	240	132	15.6	32.9
Reserpine	7	175	120	12.3	26.2
Reserpine & hydralazine	14	198	118	8.9	28.3
Total	78				
Mean		211	126	11.0	27.0

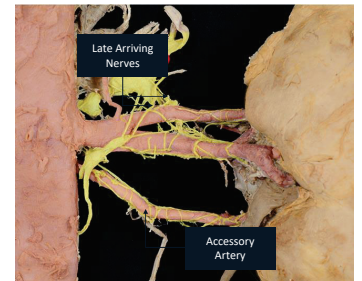
Non-Adherence Increased with Pill Burden

- Going from 2 to 3 medications doubled non-adherence
- Patients on 5 medications are nearly 50% non-adherent
- Majority of patients prescribed 6+ medications were nonadherent



Renal nerve anatomy

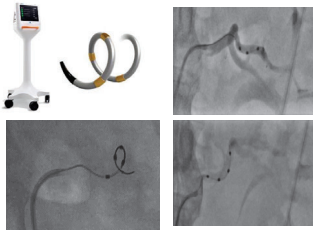
- Renal nerves often bypass the main renal artery and converge on the branches¹
- 63% of kidneys had renal nerves that joined distal to the main renal artery bifurcation²
- 30% of cadavers had accessory arteries and were highly innervated³



¹Freis ED, Wanko A, et al. *Hypertension*. 2005;45:1240-1246.
²Freis ED, Wanko A, et al. *Hypertension*. 2005;45:1240-1246.
³Morgan S, et al. *Am J Clin Anat*. 2005;29:600-604.

Medtronic SPYRAL HTN Catheter

SYMPLECTIC SPYRAL™ CATHETER AND SYMPLECTIC G3™ GENERATOR

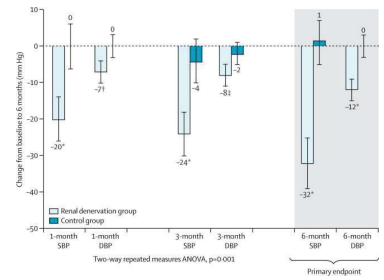
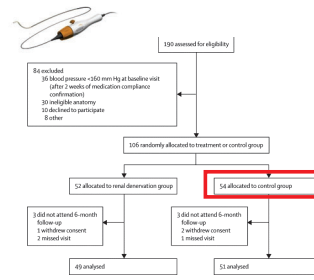


Nitinol catheter automatically positions electrodes to generate 360-degree ablations
 Consistent, repeatable four-quadrant ablation pattern
 60-second simultaneous energy delivery
 Temperature and impedance feedback to control energy delivery

Able to ablate distal main renal artery branches, and accessories
 Vessel diameter range: 3–8 mm

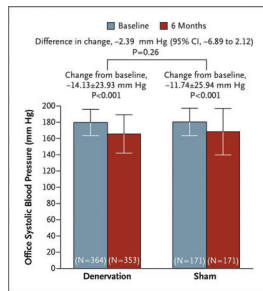
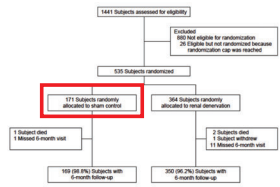
CAUTION: Investigational device.

Symplcity HTN-2 Trial: The Impact of No Sham



Symplcity HTN-2 Investigators. Lancet 2010.

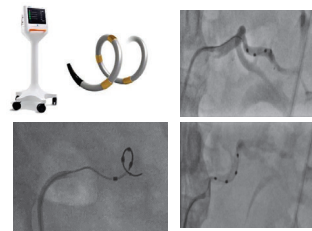
Symplcity HTN-3 Trial: Sham Controlled



DL Bhatt, et al. NEJM 2014.

Medtronic SPYRAL HTN Catheter

SYMPLECTIC SPYRAL™ CATHETER AND SYMPLECTIC G3™ GENERATOR

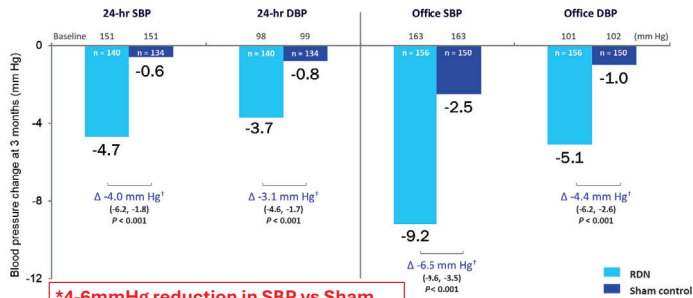


Nitinol catheter automatically positions electrodes to generate 360-degree ablations
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 Temperature and impedance feedback to control energy delivery

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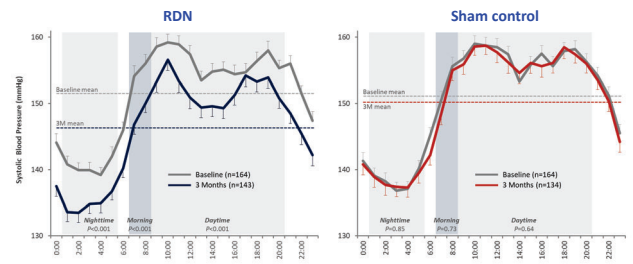
CAUTION: Investigational device.

SPYRAL HTN-OFF MED Pivotal Study Results: 3 Months



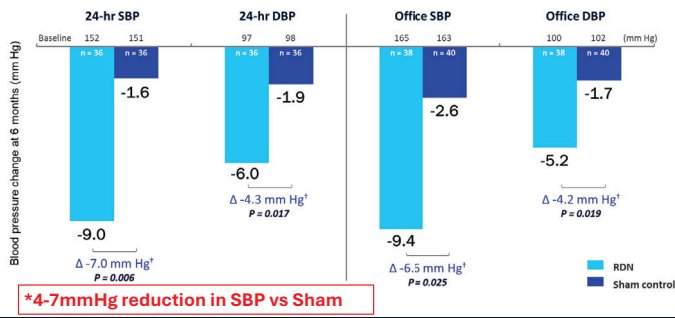
***4-6mmHg reduction in SBP vs Sham**

SPYRAL HTN-OFF MED Pivotal Study Results: 3 Months

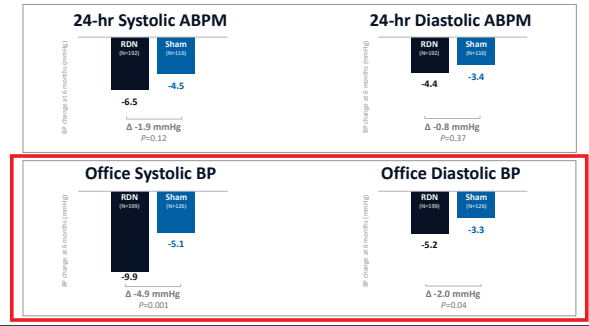


The nighttime/early morning period is associated with increased risk for stroke and cardiovascular events.^{2,3}

SPYRAL HTN-ON MED Pilot Study Results: 6 Months



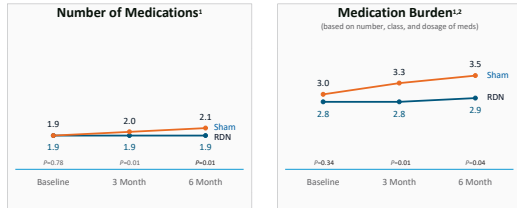
SPYRAL HTN-ON MED Study Results: 6 Months



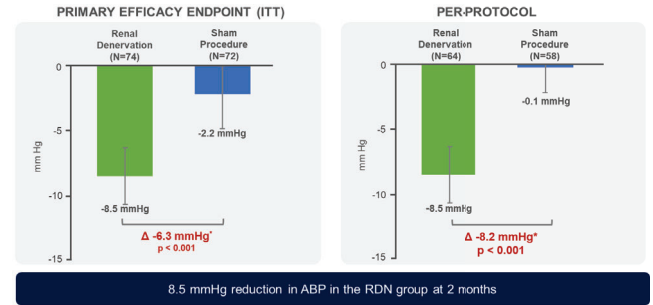
SPYRAL HTN-ON MED Study Results: 6 Months

Antihypertensive Medication Use

Significantly Higher Medication Number and Burden in Sham Control Over Follow-up

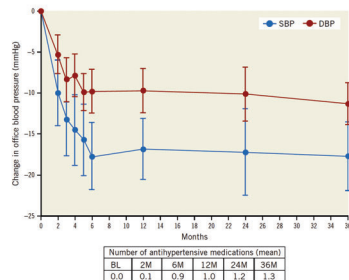


RADIANCE HTN SOLO (Off Med) Results: 2 Months

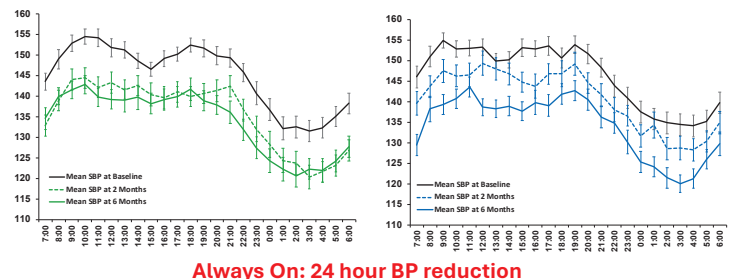


RADIANCE HTN SOLO (Off Med) Results: 3 Years

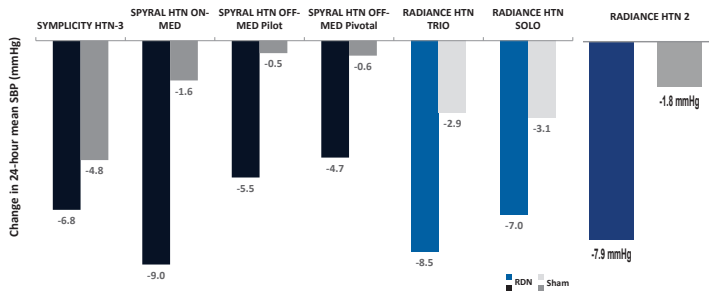
Persistent reduction in both SBP/DBP out to 3 years



RADIANCE-HTN TRIO (On Med) Results: 6 Months



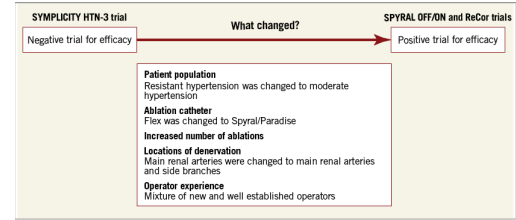
SUMMARY OF RDN TRIALS



Renal denervation reliably reduces BP across different patient populations and device platforms

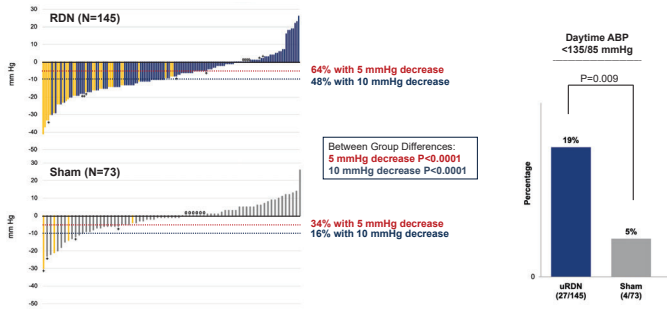
Adapted from: Kandzari D.....Secemsky EA. CCI 2021.

So what happened



<https://eurointervention.pconline.com/article/renal-artery-denervation-a-lot-done-and-more-to-do>

MORE WINNERS THAN LOSERS



Kirtane A, et al. TCT 2022.

2 RDN Devices Approved by FDA in November 2023

November 7, 2023 FDA Approves Recor Medical's Paradise Renal Denervation System for Hypertension Treatment

November 7, 2023 - Recor Medical announced it has received United States FDA approval for its Paradise ultrasound renal denervation (RDN) system for the treatment of hypertension. A subsidiary of Otsuka Medical Devices Co. Ltd., Recor notes that the Paradise system is intended as an adjunctive treatment option when lifestyle changes and medications have not adequately controlled a patient's blood pressure.

An FDA Advisory Committee Panel reviewed data supporting the Paradise system in August 2023, resulting in a [positive decision](#). The company's RADIANCE II clinical trial met its primary safety and efficacy endpoints, and its data were published in the *Journal of the American Medical Association* in TCT 2023 in October. Razaie Kirtane, MD, presented positive results from a combined analysis of 6-month follow-up data from the three RADIANCE II global clinical studies evaluating the Paradise system. The data demonstrated maintenance of blood pressure reduction compared to sham, with fewer hypertensive treatments. The study results were simultaneously published by Mitchell Azouf, MD, et al online in *Circulation*.

Recor says its ultrasound-based Paradise system denervates the sympathetic nerves that surround the renal arteries, the overactivity of which can lead to hypertension. It includes a HydroCooling system that circulates sterile water through the balloon catheter to help protect the renal artery wall, the company notes. The platform passed CE Mark in 2022 and is available in Europe. It is currently an investigational device in Japan, the company notes.

"It is truly remarkable to witness the approval of a difficult-to-control hypertension who are in need of medications," said Dr. Kirtane in comments to CCI thank all of the collaborators and the many past and present patients, allowing this to come to fruition. Vagelos College of Physicians and Surgeons and

November 17, 2023 Medtronic's Symplix Spyral Renal Denervation System Gains FDA Approval for Hypertension Treatment

November 17, 2023 - Medtronic announced it has received United States Food and Drug Administration (FDA) approval for its Symplix Spyral Renal Denervation System for the treatment of hypertension. The company plans to begin patient enrollment in a large-scale clinical trial.

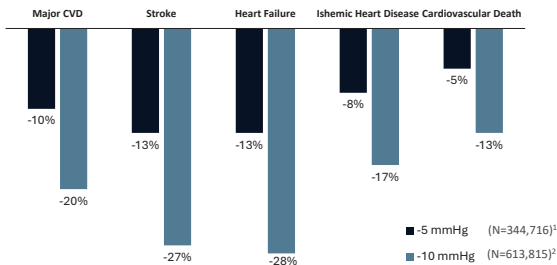
The Symplix procedure denervates the renal arteries using radiofrequency energy to reduce blood pressure. Medtronic's SPYRAL HTN Global Clinical Program includes more than 20,000 patients across 15 countries, including Europe and the United States. The program includes a patient preference study and a blood pressure reduction study. A patient preference study will also be conducted, which the company notes has not been presented with an interventional treatment and blood pressure reduction and general use in the United States of the procedure, approximately one-third of patients are likely to choose the intervention.

Results from Medtronic's clinical program were announced at a 3-day FDA advisory panel session in August 2023, along with those of Recor Medical, which has also gained approval for its renal denervation system.

"The Symplix blood pressure procedure is safe and effective, providing significant 'wins' over blood pressure reduction in patients," said Frank Kirtane, MD, a hypertension researcher at the University of Michigan and Cardiovascular Services and Co-Principal Investigator of the SPYRAL Global Program. "This landmark approval is the culmination of intense scientific study and clinical trials, including long-term, sham-controlled studies in the presence and absence of medication, and the largest renal denervation study."

"This approval paves the way for a transformation in hypertension treatment, offering a solution that complements medications and lifestyle changes," stated Stephen Townsend, MD, PhD, Director, Division of Hypertension Research in the Department of Internal Medicine at the University of Pennsylvania School of Medicine. He was also Principal Investigator of the SPYRAL Global Program. "The Symplix blood pressure procedure is a promising treatment option for clinicians and patients alike and offers opportunity to build a significant and diverse hypertension care, especially for those patients who are dependent on existing additional approaches to get their blood pressure down."

Relative Risk Reduction Proportional to Decrease in OSBP Irrespective of Baseline BP or CVD History in 2 Meta-Analyses



¹ Blood Pressure Lowering Treatment Trialists' Collaboration. *Lancet*. 2021;397(10233):1423-36

² Emberson D, et al. *Lancet*. 2016;387(10022):957-67