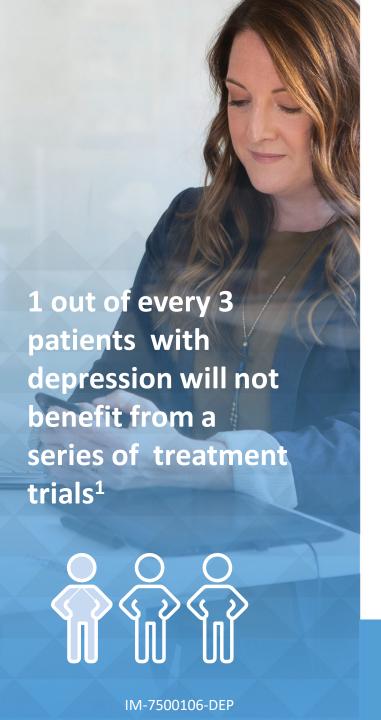
WHAT IF

small things became easier?

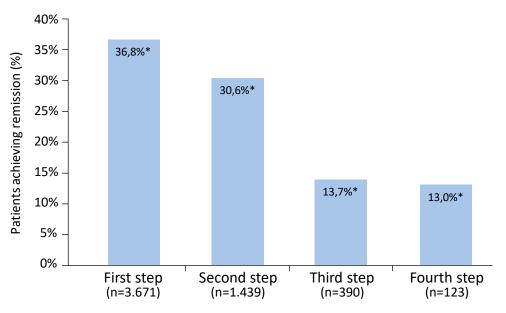


SYMMETRY

Treat Depression Differently



Success becomes less attainable with each oral medication¹



* Remission defined as QIDS-SR¹⁶ score ≤ 5 at exit from the indicated treatment step

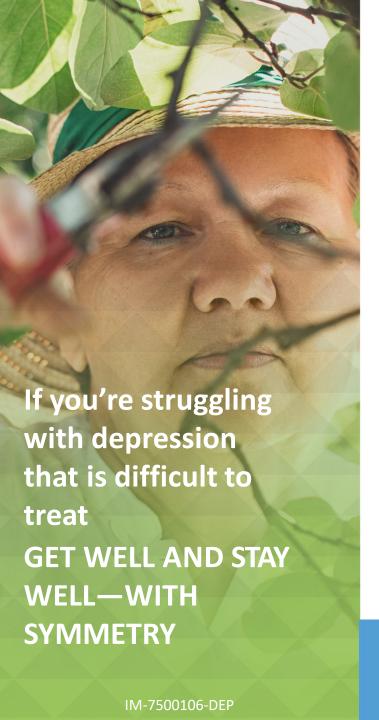
Approximately 50% of all patients with depression will experience a chronic or recurrent course of illness and can be considered Difficult to Treat**2.

** Difficult to Treat Depression (DTD) = Depression that continues to cause significant burden despite usual treatment efforts³.

^{1.} Rush AJ et al. Am J Psychiatry 2006;163:1905-17.

^{2.} Keitner GA et al. Psychiatr Clin N Am 2012;35:249-65.

McAllister-Williams RH et al. J Affect Disord 2020;267:264-82.



VNS Therapy: The antidepressant therapy that provides longterm protection with a one-time procedure^{1,2}

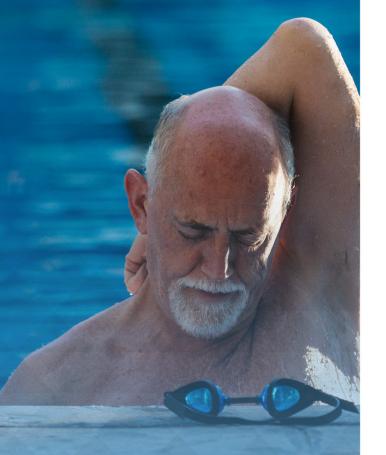
VNS Therapy® is indicated for the treatment of chronic or recurrent depression in patients who are in a treatment-resistant or treatment-intolerant major depressive episode³.

- The procedure consists of a small generator and lead implanted under the skin below the collarbone (similar to a pacemaker)¹.
- An attached electrode passes stimulation to the vagus nerve, which in turn sends electrical pulses to areas of the brain associated with mood regulation⁴.
- VNS Therapy is a proven technology with 100,000 patients implanted across multiple diseases⁵.



- 1. livaNova VNS Therapy® Patients Guide for Depression. September 2019. 2. Aaronson ST et al. Am J Psychiatry 2017;174:640-48. 3. EC Design-Examination Certificate;DEKRA,issued nov 29,2019. 4. Nemeroff CB et al. Neuropsychopharmacol 2006;31:1345-55. 5. LivaNova Data on File
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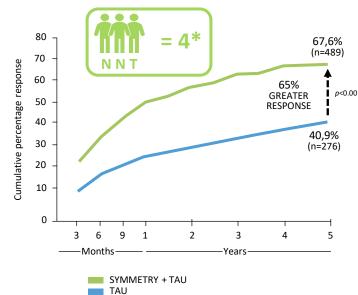




Nearly 7 in 10 people significantly improved with SYMMETRY

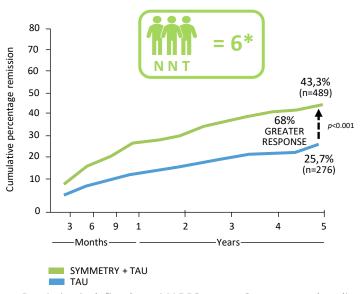
Symmetry (+TAU) is more effective in terms of cumulative response and cumulative remission vs treatment as usual alone

FIRST-TIME RESPONSE



Response is defined as a decrease of ≥50% in baseline MADRS score at any post baseline visit during the 5-year study.

FIRST-TIME REMISSION



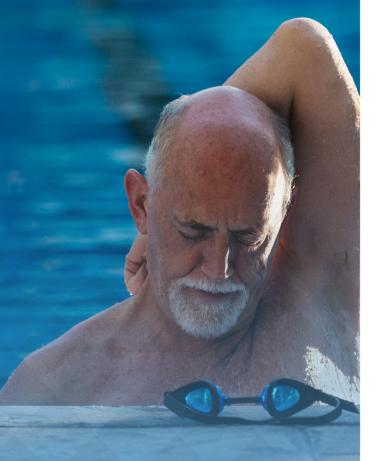
Remission is defined as a MADRS score \leq 9 at any post baseline visit during the 5-year study.

More than 4 in 10 people fully or almost fully recovered from their depression

Aaronson ST et al. Am J Psychiatry 2017;174:640-48.

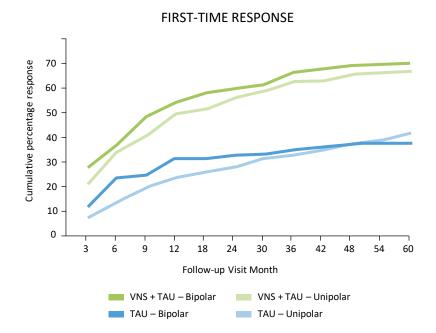


^{*} The Number Needed to Treat (NNT) is the inverse of the Absolute Risk Reduction (ARR).



7 in 10 bipolar patients significantly improved with SYMMETRY

Symmetry (+TAU) is equally efficacious in both unipolar and bipolar depression and significantly better than TAU



Response is defined as a decrease of ≥50% in baseline MADRS score at any post baseline visit during the 5-year study.

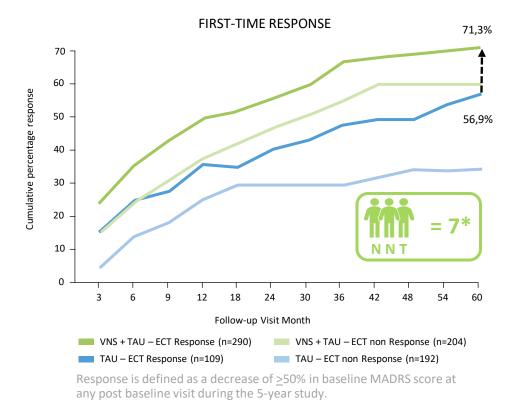
Results with Symmetry get stronger over time

Aaronson ST et al. Am J Psychiatry 2017;174:640-48.



SYMMETRY is more effective in terms of cumulative response vs treatment as usual alone

MADRS response by history of prior ECT response



The 5-year cumulative response rate for patients with VNS Therapy (+TAU) who had previously responded to ECT was significantly greater compared with patients with TAU (p=0.006)

VNS (+TAU): 71,3%

• TAU: 56,9%

A significant difference was seen at 9 months, and it was maintained for the duration of the study.

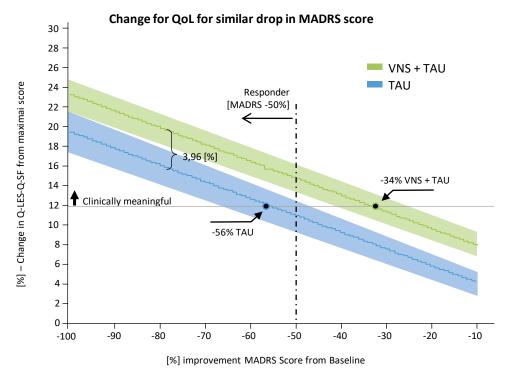
Aaronson ST et al. Am J Psychiatry 2017;174:640-48.



^{*} The Number Needed to Treat (NNT) is the inverse of the Absolute Risk Reduction (ARR).



Symmetry shows a significant improvement in the quality of life

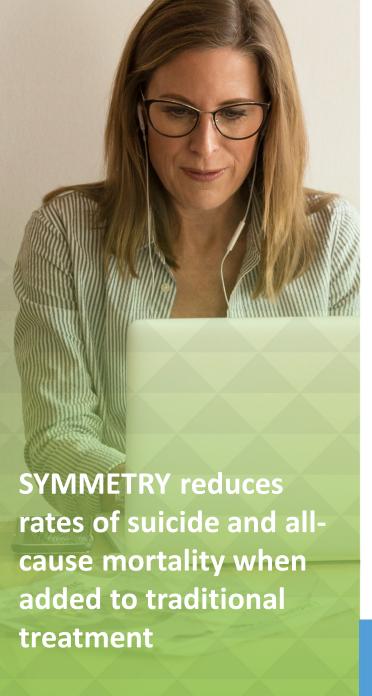


Patients treated with
Symmetry (+TAU) experienced
quality of life improvements
with MADRS reductions far
below the classical 50%
improvement definition of
depression response.

The TAU patients achieved the same increase when the MADRS drop from baseline is much bigger (at least 56%)

Conway CR et al. J Clin Psychiatry 2018;79:18m12178.





Efficacy that protects your patients most at risk

SYMMETRY + TAU (=n489)

RATE OF SUICIDE

(Reduction in suicide rate per 1.000 person years at 5 years)



Rate of suicide decreased by 50%

ALL-CAUSE MORTALITY

(Reduction in suicide rate per 1.000 person years at 5 years)



All-cause mortality decreased by 60%

Aaronson ST et al. Am J Psychiatry 2017:174:640-48.





There is safety in our numbers

Initial Implant-related adverse events (>10%) ¹	Stimulation-related adverse events (>10%) ¹
Incision pain (36%)	Voice alteration (55%)
Voice alteration (33%)	Increased cough (24%)
Incision-site reaction (29%)	Dyspnea (19%)
Device-site pain (23%)	Neck pain (16%)
Device-site reaction (14%)	Dysphagia (13%)
Pharyngitis (13%)	Laryngismus (11%)
Dysphagia (11%)	Paresthesia (10%)
Hypersthesia (11%)	

Symmetry is well tolerated and side effects were less noticeable over time³

More than

25 years of patient experience ^{2*}

100.000 patients implanted ^{2*}

1.000.000 patient-years of Experience ^{2*}

Indications and warnings

Indication for Use – The VNS Therapy System is indicated for the treatment of chronic or recurrent depression in patients that are in a treatment-resistant or treatment-intolerant major depressive episode.

Contraindications – The VNS Therapy System cannot be used in patients after a bilateral or left cervical vagotomy. Do not use short-wave diathermy, microwave diathermy, or therapeutic ultrasound diathermy on patients implanted with the VNS Therapy System.

Warnings – All potential risks and adverse events are discussed in the VNS Therapy System physician's manuals.

VNS Therapy may not be a cure for depression. Individual results will likely vary. Beneficial results might not become evident for months. Most patients will continue to require antidepressant medications and/or electroconvulsive therapy (ECT) in addition to VNS Therapy. Patients being treated with adjunctive VNS Therapy should be observed closely for clinical worsening and suicidality, especially at the time of VNS Therapy stimulation parameter changes or drug dose changes. Patients who have pre-existing swallowing, cardiac, or respiratory difficulties (including, but not limited to, obstructive sleep apnea and chronic pulmonary disease) should discuss with their physicians whether VNS Therapy is appropriate for them, since there is the possibility that stimulation might worsen their condition. Patients with the VNS Therapy System implanted should have MRI procedures performed only as described in the MRI Chapter of the Physician Manual.

Adverse Events – The most commonly reported side effects from stimulation include hoarseness (voice alteration), paresthesia (prickling feeling in the skin), dyspnea (shortness of breath), sore throat and increased coughing. Other adverse events reported during clinical studies as statistically significant are ataxia (loss of the ability to coordinate muscular movement); dyspepsia (indigestion); hypesthesia (impaired sense of touch); insomnia (inability to sleep); laryngismus (throat, larynx spasms); nausea; pain; pharyngitis (inflammation of the pharynx, throat); and vomiting. These typically occur only during stimulation, and are well tolerated and noticed less as time goes on. The most commonly reported side effect from the implant procedure is infection.

For full safety information, please see our website at www.symmetryvns.com.

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SYMMETRY

Treat Depression Differently

LIVANOVA USA, INC.

LIVANOVA BELGIUM NV

