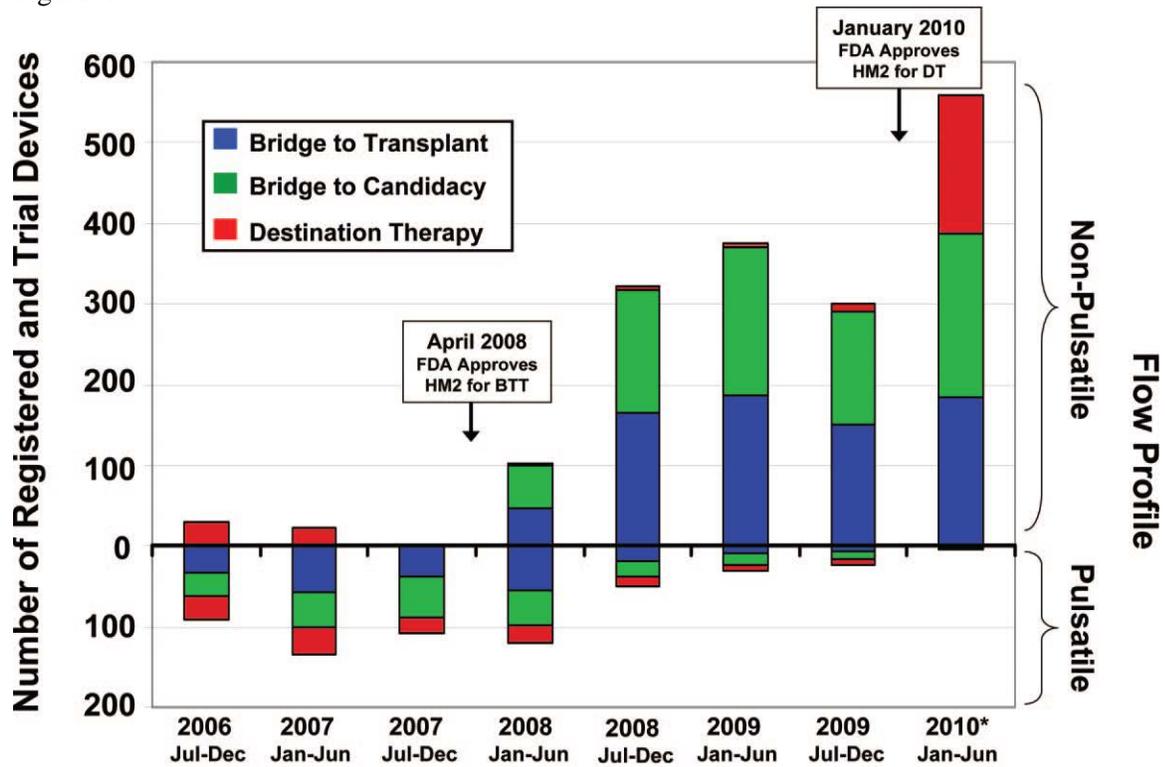




Figure 1.



* Estimated from first 4 months

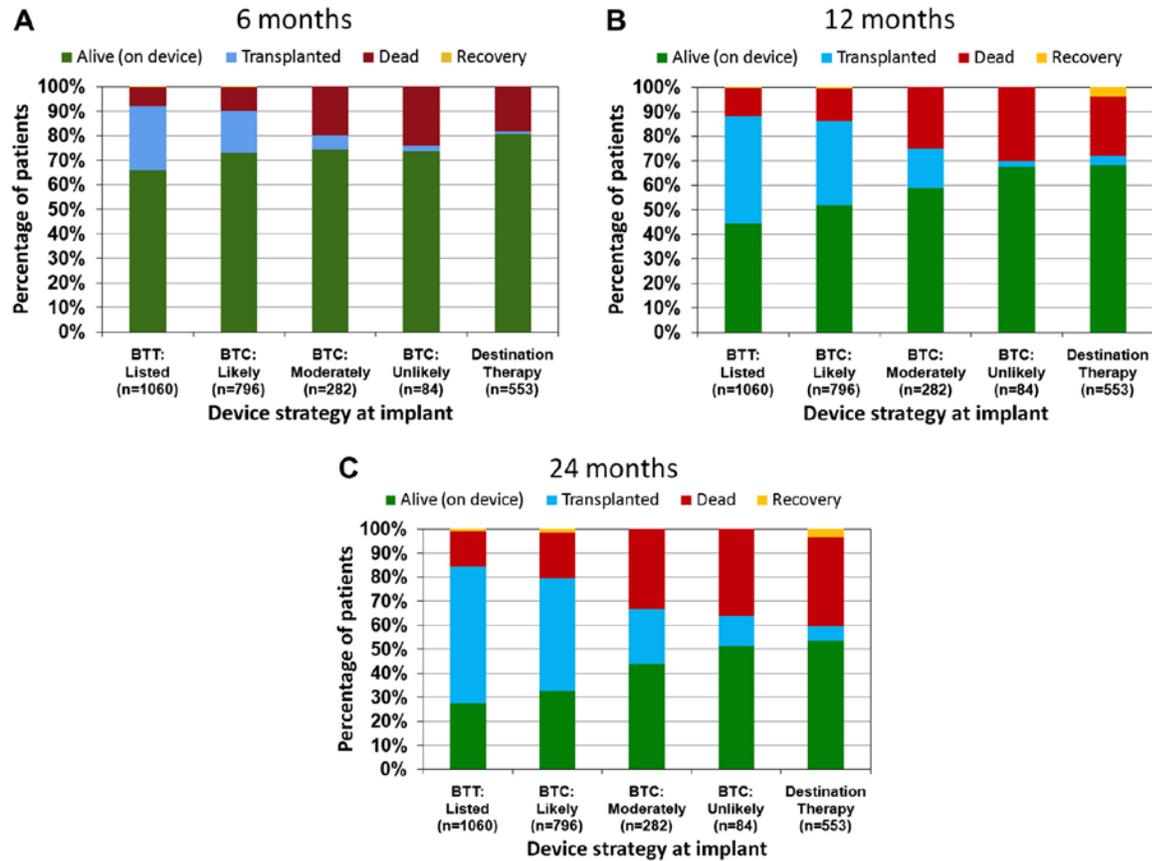
Figure 2. Accelerating utilization of left ventricular assist devices (LVADs) 2006 to 2010. This figure depicts recent utilization of approved implantable devices according to flow profile (pulsatile or nonpulsatile), and intended strategy of bridge to transplant (BTT), bridge to transplant candidacy, or life-time support (destination therapy, DT). Data derived from INTERMACS update as of June 2010 provided courtesy of D. Naftel, University of Alabama Birmingham. Sentinel dates of Food and Drug Administration approval of the Heartmate II (HM2) continuous-flow device for BTT and DT are indicated. Earlier time periods have been supplemented to show relative volume of HM2 device implantation while still investigational.⁴

Stewart GS et al. Keeping Left Ventricular Assist Device Acceleration on Track. (in Controversies: Is Left Ventricular Assist Device Therapy Underutilized?) *Circulation* 2011; 123: 1559-1568.





Figure 2.



Teuteberg JJ et al. Implant Strategies Change Over Time and Impact Outcomes: Insights from INTERMACS, Journal of the American College of Cardiology Heart Failure 2013, in press.

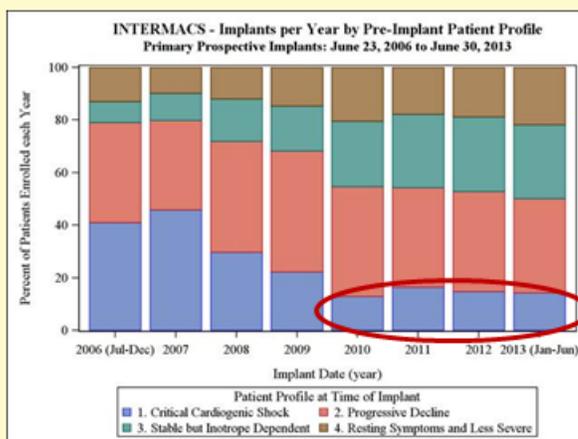


Figure D

Figure 3. Decreasing proportion of implantable LVADs in patients with INTERMACS Profile 1 (Critical cardiogenic shock “Crash and Burn”) from 2006 to 2010.

