

INTRODUCTION: CAUSES & CONTROL OF HEART FAILURE IN U.S.

Heart Failure (HF) May Be the Biggest Human & Financial Problem in U.S. Today.

With 1 million hospitalizations, 300,000 deaths & \$39 billion in care-costs a year, HF may be the biggest human and financial problem in the U.S. today.

The 10 chapters in this volume describe how a new hemodynamic monitor, the noninvasive VeriCor® monitor, could reduce HF deaths, hospitalizations and costs by 60 to 80% in every state in the U.S.

New Noninvasive VeriCor® Monitor More Accurate For LVEDP than Highly Invasive ICU Catheters. LVEDP (left ventricular end-diastolic pressure) is the pressure of blood entering the heart from the lungs. It is the most reliable indicator of the presence and severity of HF and of the efficacy of HF treatment. For more than 5 decades, estimating LVEDP required passing a catheter through the heart and the pulmonary artery into the lungs.

Recently, credible scientific studies have shown that the noninvasive VeriCor® monitor is more accurate for LVEDP than catheter measurements made in hospital ICUs. LVEDPs can now be measured anywhere in the community from the homes of HF patients to the emergency units of hospitals.

VeriCor® Monitor Proves Clinical Assessment Is Ineffective. Clinical studies using the new noninvasive FDA-cleared VeriCor® monitor have shown that clinical assessment, the current “standard-of-care” for HF treatment, is ineffective and leads directly to most HF deaths, hospitalizations and higher care-costs.

HF Treatment Centers Featuring VeriCor® Monitor Could Reduce HF Deaths, Hospitalizations & Costs Dramatically In U.S. States. A network of HF treatment centers featuring the VeriCor® monitor could identify HF patients at-risk for death and hospitalization because of elevated LVEDPs and reduce those elevated pressures to the low-risk range. By maintaining LVEDPs in the low-risk (≤ 20 mmHg), HF deaths could be reduced by more than >60% while hospitalizations and care-costs could be reduced by as much as 80%.

This could prevent 800,000 HF hospitalizations and 100,000 HF deaths a year while saving more than \$18 billion in HF care-costs annually in U.S.

Purpose of This Volume. The purpose of this report is to present the technical, financial and scientific evidence showing that the new VeriCor® monitor could prevent thousands of HF deaths and hospitalizations and save billions of dollars a year in the U.S.

For example, Chapter 2 quantifies the likely reductions in HF deaths, hospitalizations and costs with comprehensive VeriCor® monitoring and includes the FDA’s letter providing clearance to market for the VeriCor® monitor. Chapter 3 shows that 90% of cardiologists surveyed would like to have the VeriCor® monitor to help managing HF patients.

VeriCor® Monitor Could Prevent >2,000 Deaths a Year in Connecticut (Chapter 5) & Save >\$400 Million a Year in Massachusetts (Chapter 6). Chapters 5 & 6 present the human and financial benefits of comprehensive VeriCor® monitoring in Connecticut & Massachusetts while Chapter 7 indicates the number of states in which the VeriCor® monitor could prevent more than 5,000 deaths a year while reducing HF care-costs by more than \$400 million a year.

CVP Revenues from Controlling HF Outcomes & Costs. Monitoring revenues to CVP are expected to reach \$87 billion a year (Chapter 8).

Independent Expert Projects CVP Monitoring Revenues Will Reach \$30 Billion in 5 Years.

Chaired professor at internationally known universities projected revenues from home monitoring of HF patients to reach \$30 billion a year in 5-years (Chapter 9).

CVP Diagnostics Patent Portfolio. Patents have been granted in the U.S. and Japan and are pending in Europe, Australia and Canada (Chapter 10).