



AtriCure Launches Solution for Treatment of Post-Thoracotomy Pain

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The CryoICE® cryo ablation probe is now available for cryoanalgesia therapy

WEST CHESTER, Ohio--(BUSINESS WIRE)--Mar. 18, 2015-- [AtriCure, Inc. \(Nasdaq: ATRC\)](#), a leading innovator in technologies for the surgical treatment of atrial fibrillation (Afib) and left atrial appendage management, today announced that it has launched the availability of its cryoICE cryo ablation probe (CRYO2) to provide cryoanalgesia for temporary pain management. AtriCure's cryoICE is the first FDA cleared cryo ablation probe for the treatment of cardiac arrhythmias and for the temporary ablation of peripheral nerves to block pain.

Cryoanalgesia is a method of temporarily relieving pain by cryo ablating the affected nerve, causing an interruption of pain impulses to the brain. For cardiac and thoracic surgery patients, the pain impulses are blocked by ablating the intercostal nerve bundle(s), thereby alleviating the pain associated with a thoracotomy incision. When applied appropriately, cryoanalgesia can relieve pain for several days and in some cases weeks.

"The expanded indication provides patients and physicians with options to manage the pain associated with a thoracotomy," said Mike Carrel, president and chief executive officer of AtriCure. "Broadening the cryoICE indication displays AtriCure's commitment to collaborating with surgeons on new solutions to deliver improved patient care."

AtriCure has a portfolio of products that include radio frequency and cryo ablation devices that are used during cardiac surgery. AtriCure's cryoICE cryo ablation system has been indicated to freeze target tissue for the treatment of cardiac arrhythmias. The recently expanded indication for the cryoICE probe "for use in blocking pain by temporarily ablating peripheral nerves" provides surgeons with an additional option to treat post-thoracotomy pain.

"The pain management options available today are not optimal," stated Dr. Andrea Trescot, past president of the American Society of Interventional Pain Physicians. "Cryoanalgesia has been studied for many years, and has been shown to successfully block pain with no long term neural effects."

Currently, surgeons use epidurals, intercostal nerve blocks and prescription narcotics for pain management. Studies have suggested that cryoanalgesia is a useful method for both short- and long-term relief from pain related to thoracotomy access.¹ It is estimated that more than 25,000 cardiac and thoracic surgeries are performed in the US every year using a thoracotomy approach.²

"I have used cryoanalgesia as an adjunct to conventional pain relief techniques in nearly 75 cases of mitral valve surgeries via mini-thoracotomies," stated Dr. Francis Shannon, cardiothoracic surgeon, Beaumont Health System. "I have been very impressed with the reduction in respiratory complications after surgery as well as narcotic requirements for chest pain."

More information can be found at www.AtriCure.com.

About AtriCure

AtriCure, Inc. is a medical device company providing innovative atrial fibrillation (Afib) solutions designed to produce superior outcomes that reduce the economic and social burden of atrial fibrillation. AtriCure's Synergy™ Ablation System is the first and only surgical device approved for the treatment of persistent and longstanding persistent forms of Afib in patients undergoing certain open concomitant procedures. AtriCure's AtriClip left atrial appendage management (LAAM) exclusion device is the most widely sold device worldwide that's indicated for the occlusion of the left atrial appendage. The company believes cardiothoracic surgeons are adopting its ablation and LAAM devices for the treatment of Afib and reduction of Afib related complications such as stroke. Afib affects more than 33 million people worldwide.³ For more information visit AtriCure.com or follow us on [Twitter @AtriCure](#).

1 Moorjani N, Zhao F, Tian Y, Liang C, Kaluba J, Maiwand O. "Effects of cryoanalgesia on post-thoracotomy pain and on the structure intercostal nerves: a human prospective randomized trial and a histological study." *Eur J Cardiothoracic Surg*. 2001 Sep; 20 (3): 502-7.

2 STS Adult Cardiac Surgery Database, 3rd Harvest 2014. STS General Thoracic Surgery Database, Fall Harvest 2014.

3 Chugh SS, Havmoeller R, Narayanan K, Singh D, Rienstra M, et al., "Worldwide epidemiology of atrial fibrillation: a Global Burden of Disease 2010 Study." *Circulation*. 2014 Feb 25; 129 (8):837-47.

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AtriCure, Inc.

Media Relations

Valerie Storch-Willhaus, 612-605-3311

Director, Corporate Marketing and Communications

vstorch-willhaus@atricure.com

or

Investor Relations

Andy Wade, 513-755-4564

Senior Vice President and Chief Financial Officer

awade@AtriCure.com