

Renal denervation as third option for the treatment of high blood pressure

The Task Force for the management of arterial hypertension of the European Society of Hypertension (ESH) endorsed by the European Renal Association (ERA) and the International Society of Hypertension (ISH) published their guidelines and declared renal denervation (RDN) as third therapy option to treat hypertension.



1 Lifestyle change



2 Medication



3 Renal denervation with ultrasound

What is renal denervation (RDN) with ultrasound?

- One-off, safe, minimally invasive treatment that has been proven to reduce high blood pressure.²⁻⁵
- Rapid recovery allows a smooth return to daily routine.
- Provides 24-hour blood pressure reductions.²⁻⁵

More information at:
www.recormedical.eu



Contact an experienced center:



Referring health care professional:



Contact information center

Contact details

Sources: 1. Mancia et al. Journal of Hypertension 2023, 41:1874-2017; 2. Azizi M. JAMA. 2023;329(8):651-661; 3. Azizi M. et al. Lancet. 2018 Jun 9;391(10137):2335-2345 ; 4. Azizi M. et al. Lancet. 2021 Jun 26;397(10293):2476-2486 ; 5. Kirtane A. et al. JAMA Cardiol. 2023;8(5):464-473

Indications for Use: The Paradise Catheter is indicated for percutaneous renal denervation. For further information on indications, contraindications, warnings, precautions, adverse events and risks, please refer to the full instructions for use.

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Screening form for renal denervation (RDN)

PATIENT

1 Patients with uncontrolled blood pressure

- Office systolic blood pressure ≥ 140 mmHg AND/OR
- Uncontrolled out of office blood pressure (home or ABPM)

2 Blood pressure lowering medication

- ≥ 3 maximally tolerated antihypertensive medications (ACE-I or ARB + CCB + diuretic as a double or triple combination)
- < 3 with intolerance

3 Patient has expressed interest in renal denervation

- Yes

EXCLUSION CRITERIA (no candidate)

- Known forms of secondary hypertension listed below*
- Pregnancy
- Under 18 years

ADDITIONAL RISK FACTORS (optional)

- Prior stroke
- Transient Ischemic Attack
- Prior Myocardial Infarction
- Coronary Artery Disease
- Heart Failure
- Atrial Fibrillation
- Smoking
- Diabetes mellitus
- Peripheral Vascular Disease

HTN related hospitalizations (admissions) in last 12 months

Emergency room visits related to HTN in the last 12 months

* Primary aldosteronism, pheochromocytoma/paraganglioma, Cushing's syndrome, primary hyperparathyroidism and mineralocorticoid excess syndromes