

Bravo® pH Monitoring Fact Sheet

The Bravo® pH Monitoring System is the only commercially available, catheter-free ambulatory pH test. Ambulatory pH testing is considered the gold standard for pH measurement and monitoring of gastric reflux, helping clinicians manage gastroesophageal reflux disease (GERD). By eliminating the physical and social discomfort associated with catheter based testing, Bravo allows patients to maintain their regular diets and activities, more accurately reflecting normal physiologic conditions.

Overview

- Patient-friendly alternative to traditional catheter-based pH tests
- Standard study lasts for 48 hours, but up to 96 hours of pH data collection is possible, providing up to four times the data of conventional catheter-based tests
- Capsule position remains fixed throughout the study, improving accuracy of pH measurements

How It Works

- Small pH capsule is temporarily attached to the wall of the esophagus
- Capsule transmits pH data via radio frequency telemetry to a small, external, pager-sized receiver

Procedure

- Capsule is placed in the esophagus via the Bravo delivery system
- Delivery device allows for intuitive capsule attachment to the esophagus
- Patient wears small, external pager-sized receiver, to which data is transmitted
- After the test is completed, natural digestive contractions propel the disposable Bravo capsule through the gastrointestinal tract

Benefits Over Traditional Methods

- Significantly more data are collected during study under conditions that more accurately reflect normal activities
- Placement procedure is simple
- User-friendly software
- Capsule position remains fixed for better accuracy
- Patient satisfaction:
 - Less invasive
 - Minimal outward indication of procedure, enhancing comfort and convenience
 - Able to maintain regular diet and activities

Risk Information

Bravo® pH monitoring risks include: premature detachment, discomfort, failure to detach, tears in the mucosa, bleeding, and perforation. Endoscopic or transnasal placement may present additional risks. Medical, endoscopic, or surgical intervention may be necessary to address any of these complications, should they occur.