

ABBOTT'S NEUROSTIMULATION SYSTEM

A NEW PATH TO RELIEF FROM PAIN CAUSED BY DIABETIC PERIPHERAL NEUROPATHY

Abbott's neurostimulation therapy is a medication-free* option that relieves pain caused by diabetic peripheral neuropathy.



A MEDICATION-FREE* OPTION FOR TREATING PAIN CAUSED BY DIABETIC PERIPHERAL NEUROPATHY

If you have diabetes, you may be at risk for a condition called diabetic peripheral neuropathy (DPN). These symptoms can be very uncomfortable and can make it hard for you to do your everyday activities.^{1,2}



Approximately **one in five** patients who have been diagnosed with diabetes will develop DPN with:

- Paresthesia
- Burning
- Shooting pain²

Oral medications are commonly prescribed to treat DPN, but there are alternative treatments available if you are experiencing lack of pain control or poor side effects such as:

- Weight gain
- Drowsiness
- Dry mouth
- Blurred vision
- Dizziness
- Uncoordinated movement
- Swelling of the hands, feet and ankles²



of patients reported negative side effects from their medications.³



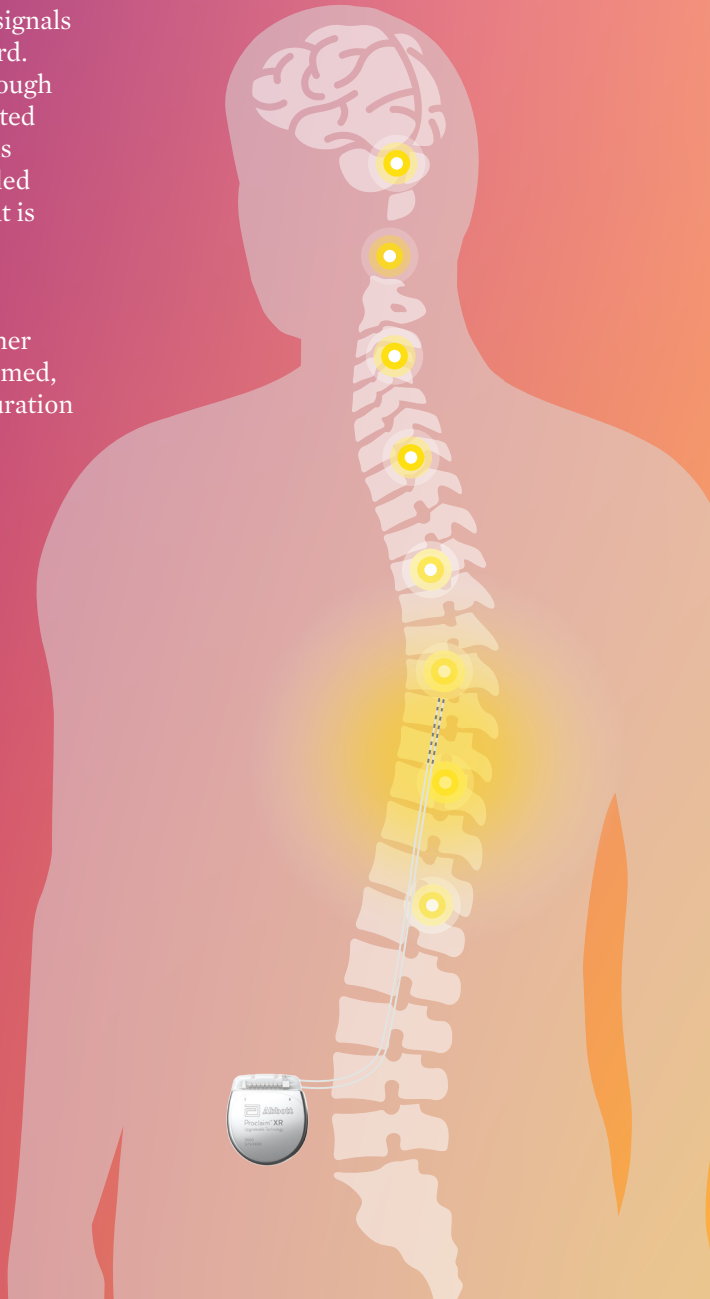
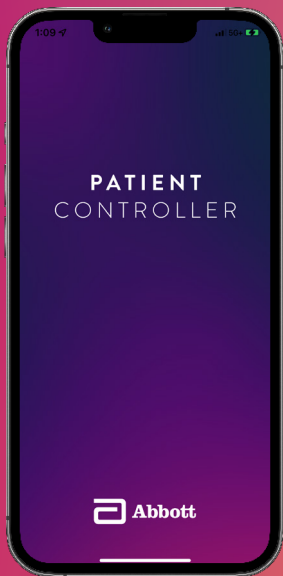
are interested in alternative treatment options.³

Spinal cord stimulation (SCS) therapy offers an alternative option to oral medications, providing safe and effective long-term relief for pain caused by diabetic peripheral neuropathy in the lower extremities.^{4,5,6,7}

A DIFFERENT APPROACH TO PAIN RELIEF

Neurostimulation is a well-established pain treatment used by doctors for more than 50 years. It is a treatment option for chronic pain that involves the use of electrical signals to stimulate the nerves in the spinal cord. The electrical signals are delivered through small electrodes on leads that are inserted near the spinal cord. Stimulation travels through these leads, which are controlled by a device called a pulse generator that is implanted under the skin.

Neurostimulation is typically used to treat pain that has not responded to other treatments. Once treatment is programmed, patients can adjust the intensity and duration of their therapy discreetly via their Apple® mobile device.



START YOUR JOURNEY

Learn how neurostimulation could help you find relief from your pain caused by DPN.



1 SPEAK WITH YOUR DOCTOR

Meet with the doctor who is managing your diabetic peripheral neuropathy and discuss if neurostimulation is a viable option for you.



2 FIND A PAIN SPECIALIST

The doctor who is managing your diabetic peripheral neuropathy will then refer you to a pain management doctor or spine surgeon to discuss the potential benefits and risks of neurostimulation. The doctor will ask about your medical history and pain symptoms and may recommend other tests or procedures to determine if neurostimulation is a good option for you.



3 TRIAL PERIOD

If you and your doctor decide to proceed with neurostimulation, you will then likely go through a trial period. The process begins with a short procedure, often performed at your pain physician's office, a hospital or a day surgery center. During this time, your doctor will place thin wires in your body, called leads, which deliver low-energy electrical pulses that interrupt your pain signals. The leads will

be connected to a small external battery. During the evaluation, the battery will be worn outside of the body, typically on your lower back. The evaluation will give you an opportunity to see how well the therapy controls your pain throughout the day and during different activities. The typical evaluation period lasts 5-7 days, after which you and your doctor will decide if Abbott neurostimulation is right for you.



4 IMPLANTATION

If you experience significant pain relief during the trial period, you will have a permanent implant placed. This is typically done as an outpatient procedure, meaning you do not need to stay in the hospital overnight. The implant consists of a small generator that is placed under the skin, usually in the lower back, and leads that are placed near the spinal cord. The implant is usually placed using a minimally invasive procedure, which means that only small, 1" to 2" incisions are made.



5 RECOVERY AND FOLLOW-UP CARE

After the implantation procedure, you will need to rest for a few days and follow the doctor's instructions for caring for the incision site. You will also need to follow up with the doctor regularly to make sure the implant is working properly and to adjust the settings as needed.

Neurostimulation can help make chronic pain relief possible, but it's important to discuss your symptoms and options with a specialist first. Abbott can help you find a specialist in your area who is familiar with advanced treatment options for chronic pain like spinal cord stimulation (SCS).



Scan here to start your journey today.

CONVENIENT, COMFORTABLE & DISCRETE

Abbott provides a neurostimulation portfolio with medication free* options that offer you pain relief, on platforms designed to fit seamlessly into your life.



LOW-MAINTENANCE THERAPY

Abbott's SCS therapies are offered on systems with little or no recharge burden.



EXPANDED MRI ACCESS

Full-body MR conditional systems⁶ allow patients to safely undergo MRI scans if necessary.⁸



EASY-TO-USE MOBILE APP

Convenient and direct access to manage therapy from an Abbott-provided Apple⁺ device or your own personal Apple⁺ mobile device⁷.



PAIN RELIEF AND BEYOND

Patients demonstrated significant reduction in pain utilizing Abbott's SCS therapy for treatment of chronic intractable pain in the trunk and limbs. Patients also demonstrated improvements in anxiety and physical function.⁹



NEUROSPHERE™ VIRTUAL CLINIC

Virtual care options to connect with your doctor using in-app video chat for follow-up care and programming adjustments in real time, from home or wherever you are.

NEUROSPHERE™ VIRTUAL CLINIC



Refer to Clinicians Manual for Indications for Use for all Abbott Neuromodulation Systems.

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*Follow your physician's guidance for your current medication regimen and do not make any changes to your medication usage without consulting with your healthcare provider.

†Available on eligible Apple® mobile digital devices. For a list of personal Apple® mobile digital devices compatible with Abbott's St. Jude Medical Patient Controller app, visit www.NMmobiledevicesync.com/cp.

§Within approved parameters. Refer to the Instructions for Use for full details on the MR Conditional scan parameters.

1. National Institute of Diabetes and Digestive and Kidney Diseases (NIH NIDDK) Accessed on January 20, 2023. <https://www.niddk.nih.gov/health-information/diabetes/overview/preventing-problems/nerve-damage-diabetic-neuropathies/peripheral-neuropathy>
2. Pop-Busui R, Boulton AJ, Feldman EL, et al. Diabetic neuropathy: a position statement by the American Diabetes Association. *Diabetes Care*. 2017;40(1):136-154. doi:10.2337/dc16-2042

3. Abbott. GLG survey on the complications and treatment of diabetic peripheral neuropathy. Completion date: November 17, 2022; Austin, Texas. n = 30 DPN patients.
4. Staudt MD, Prabhala T, Sheldon BL, et al. Current strategies for the management of painful diabetic neuropathy. *J Diabetes Sci Technol*. 2022;16(2):341-352. doi:10.1177/1932296820951829
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6. de Vos CC, Meier K, Zaalberg PB, et al. Spinal cord stimulation in patients with painful diabetic neuropathy: a multicentre randomized clinical trial. *Pain*. 2014;155(11):2426-2431. doi:10.1016/j.pain.2014.08.031
7. Abbott. Clinical Summaries: Spinal Cord Stimulation Systems. *Clinician's Manual*; 2023.
8. Abbott. MRI Procedure Information, Abbott Medical MR Conditional SCS and DRG System. *Clinician's Manual*. 2022.
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Rx Only

Brief Summary: Prior to using Abbott devices, please review the Clinician's Manual for a complete listing of indications, contraindications, warnings, precautions, potential adverse events, and directions for use. The system is intended to be used with leads and associated extensions that are compatible with the system

Indications for Use: Spinal cord stimulation as an aid in the management of chronic, intractable pain of the trunk and/or limbs, including unilateral or bilateral pain associated with the following: failed back surgery syndrome, intractable low back and leg pain, and diabetic peripheral neuropathy of the lower extremities.

Contraindications: Patients who are unable to operate the system or who have failed to receive effective pain relief during trial stimulation.

Warnings/Precautions: Diathermy therapy, implanted cardiac systems or other active implanted devices, magnetic resonance imaging (MRI), electrosurgery, explosive and flammable gases, theft detectors and metal screening devices, lead movement, operation of machinery, equipment and vehicles, pediatric use, pregnancy and nursing, use in patients with diabetes, stimulation modes and case damage. Patients who are poor surgical risks, with multiple illnesses, or with active general infections should not be implanted.

Adverse Effects: Unpleasant sensations, undesirable changes in stimulation, stimulation in unwanted places, lead or implant migration, epidural hemorrhage, hematoma, infection, spinal cord compression, or paralysis from placement of a lead in the epidural space, cerebrospinal fluid leakage, paralysis, weakness, clumsiness, numbness, sensory loss, or pain below the level of the implant, pain at the electrode or IPG site, seroma at IPG site, allergic or rejection response, battery failure, changes in blood glucose levels in response to any adverse effect. Clinician's Manual must be reviewed for detailed disclosure.

™ Indicates a trademark of the Abbott group of companies.

‡ Indicates a third party trademark, which is property of its respective owner.

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