

Living with chronic pain affects not just your body but also your mind. It can make getting around and getting along equally difficult.

But with innovation in health technology comes hope. Abbott has developed a new device found to be more effective than traditional therapy at relieving chronic pain.

## **About Chronic Pain**

Dealing with chronic pain lasting more than six months is a way of life for 11 percent of Americans, according to the [National Institutes of Health](#). Injuries and infections can cause pain and discomfort, but chronic pain happens when the nervous system doesn't function properly. A common cause of chronic pain is Complex Regional Pain Syndrome (CRPS).

CRPS is nerve damage that's usually caused by an injury. Pain in the limbs may cause them to swell or change in color or temperature. Patients with confirmed nerve injuries are categorized as having CRPS-II (also known as causalgia), while patients without confirmed nerve injury are classified as having CRPS-I (previously called reflex sympathetic dystrophy syndrome or RSDS).

These conditions may cause chronic pain with signs and symptoms such as:

- A burning or freezing feeling.
- Throbbing pain.
- Sharp, jabbing pain.
- Pins and needles sensation.
- Numbness.
- The feeling a body part is being squeezed.
- Sensitivity to touch.
- Loss of coordination.
- Muscle weakness or an inability to move part of the body.

## **Treatment for Chronic Pain**

Traditionally, doctors have prescribed medications to treat chronic pain, including opioids, which can lead to addiction and overdose. Treatment plans for chronic pain may also include physical therapy, psychological interventions, nerve blocks, and surgery.

When these treatments fail, people with chronic pain can turn to a different therapy. Spinal cord stimulation is an option that blocks pain signals from reaching the brain in the first place. For this treatment, a surgeon places a small device in your body that sends electrical signals to your spinal cord. [Research](#) has found that 40 to 50 percent of people who have CRPS achieve pain relief from spinal cord stimulation.

Although the development of traditional spinal cord stimulation was a big step forward, it still left many people without a solution to their chronic pain.

## **Groundbreaking New Treatment: DRG Stimulation**

Researchers turned their attention to the dorsal root ganglion (DRG), a bundle of nerves located on the outside of the spinal cord.

The DRG was once thought to have no connection to pain, but researchers now know that this nerve bundle plays a key role in nerve pain for CRPS I and II patients. According to a 2017 study published in [Pain](#), stimulating the DRG helps relieve pain more effectively than spinal cord stimulation.<sup>1</sup>

To help people with chronic pain finally find relief and live healthier, fuller lives, Abbott launched the [Proclaim™ DRG Neurostimulation System](#). This DRG stimulation therapy involves surgically placing a stimulator that targets the dorsal root ganglion to relieve pain of the lower limbs due to CRPS. Individuals have a hand-held iPod controller that changes the stimulation settings within prescribed limits.

This new technology has made a significant difference in the treatment of chronic pain. The 2017 [Pain](#) study found that people with chronic pain in a lower limb from CRPS experienced superior pain relief after 12 months with DRG stimulation. The numbers speak for themselves:

- 74.2 percent of people experienced meaningful pain relief with DRG stimulation, compared to 53 percent who received traditional spinal cord stimulation.
- One-third had more than 80 percent pain relief and no tingling sensation, which is a common side effect with traditional spinal cord stimulation.
- DRG stimulation led to a better quality of life compared to traditional spinal cord stimulation.

Abbott is a leader in healthcare technology and chronic pain treatment. With innovative devices like the [Proclaim DRG Neurostimulation System](#), living with pain doesn't have to sidetrack your life.

## **Focus on Limb Loss and Amputee Pain**

Abbott and the National Amputee Coalition recently partnered to share a webinar on &quot;Pain Management: Choices and Developments for People Living With Limb Loss.&quot; To find a physician near you trained in DRG Therapy, please visit [www.drgspecialist.com](http://www.drgspecialist.com) and search by city, state, or zip code. If you have further questions, please email [drginfo@abbott.com](mailto:drginfo@abbott.com)

<sup>1</sup>Deer, TR, Levy, RM, Kramer, J, et al. (2017). Dorsal root ganglion stimulation yielded higher treatment success rate for complex regional pain syndrome and causalgia at 3 and 12 months: a randomized comparative trial. Pain. 158(4): 669-681. <http://dx.doi.org/10.1097/j.pain.0000000000000814> ACCURATE IDE STUDY, St. Jude Medical. (n=152)

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## Rx Only

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**Indications for Use:** Spinal column stimulation via epidural and intra-spinal lead access to the dorsal root ganglion as an aid in the management of moderate to severe chronic intractable\* pain of the lower limbs in adult patients with Complex Regional Pain Syndrome (CRPS) types I and II.

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*\*Study subjects from the ACCURATE clinical study had failed to achieve adequate pain relief from at least two prior pharmacologic treatments from at least two different drug classes and continued their pharmacologic therapy during the clinical study.*

*\*\*Please note that in 1994, a consensus group of pain medicine experts gathered by the International Association for the Study of Pain (IASP) reviewed diagnostic criteria and agreed to rename reflex sympathetic dystrophy (RSD) and causalgia, as complex regional pain syndrome (CRPS) types I and II, respectively.*

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

**Warnings/Precautions:** Diathermy therapy, implanted cardiac systems or other active implantable devices, magnetic resonance imaging (MRI), computed tomography (CT), electrosurgery devices, ultrasonic scanning equipment, therapeutic radiation, explosive or flammable gases, theft detectors and metal screening devices, lead movement, operation of machinery and equipment, pediatric use, pregnancy, and case damage.

**Adverse Effects:** Painful stimulation, loss of pain relief, surgical risks (e.g., paralysis). Implant Manual must be reviewed for detailed disclosure. Refer to the User's Manual for detailed indications, contraindications, warnings, precautions and potential adverse events.

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