

WHY COOLIEF* MIGHT BE THE RIGHT SOLUTION FOR YOU

Chronic pain is a massive nationwide issue, and pain management physicians are facing mounting pressure and new challenges in treating a growing patient population. Today, approximately 100 million U.S. adults suffer from chronic pain conditions, and the problem is worsening. For example, knee replacement procedures for chronic knee pain will increase from 450,000 in 2005 to 3.48m in 2030¹.



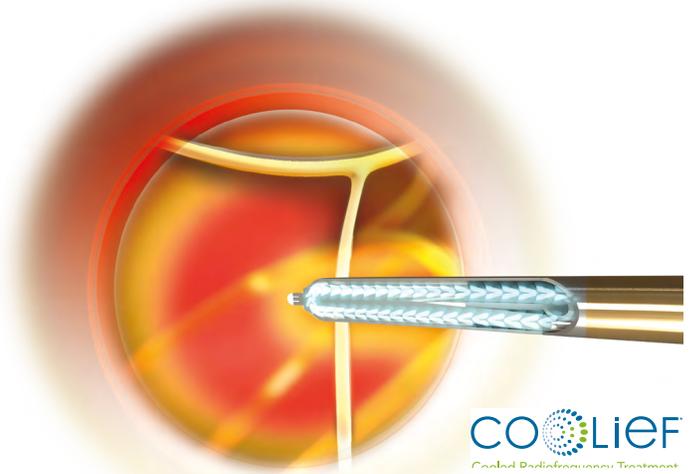
Pain management physicians could be the frontline of defense for these patients, but they face many challenges in treating chronic pain, including:

- managing patient expectations
- balancing risk and treatment effectiveness
- their late appearance in a patient's treatment journey
- limited treatment options

Both physicians and chronic pain patients can find the pain treatment landscape difficult to navigate. On average, patients suffer with chronic pain for nine years before undergoing surgery¹. The level

of treatment chronic pain patients can require is daunting. On average, they require 4.5 primary care physician visits and 3.1 orthopedic surgeon visits per year. Additionally, 38% of chronic pain patients will consult more than one practitioner, and 20% will consult three or more. Understandably, patients in pain are often frustrated.

But patients are not the only ones who are frustrated—pain management physicians are as well. They often feel like they are a last resource during a patient's journey despite the potential to provide relief earlier. As a result, many chronic pain patients have already exhausted many other treatment options, such as prescription opioids or intra-articular steroid injections, and are dissatisfied by the time they arrive in a pain management physician's practice. Dissatisfied patients—who tell nine to 10 people about their experience, on average—may choose to seek treatment elsewhere, or discontinue treatment altogether. This can result in unnecessary suffering for the patient, and negatively impact the provider as well.





TYPICAL TREATMENTS

There is a difference between a treatment working, and a treatment working well. Managing chronic pain can be a challenge within today's treatment algorithm. Common treatments include short- and long-term options, and while these treatments may work for some patients, there can be significant downsides for both patients and practices. When patients have a negative experience of insufficient pain relief they'll discuss it with others, and they may seek new providers. This negative feedback can hurt a physician's reputation and damage the perception of potential patients about their efficacy. Therefore, it is important to devise the appropriate treatment algorithm.

Short-term treatment options include anti-inflammatory medications and prescription opioids, which typically provide patients with relief from their chronic pain for a few hours per dose. However, studies show opioid use for chronic pain may worsen pain and functionality.

Additionally, opioids have many potential undesirable side effects, including nausea, constipation, respiratory depression and falls. They also involve serious risk, including the potential for abuse and misuse. Pain management physicians may also consider offering patients steroid or hyaluronic acid



injections, which can provide relief for a few months, but may have to be repeated, which limits their usefulness as a long-term solution. Patients suffering from chronic pain may consider a surgical procedure to repair or replace the affected joint.

THE GAP IN TREATMENT

Orthopedic surgeons struggle with striking a balance of appropriate pain relief based on the risks of procedures and the available options. Between 50% and 80% of their patients have chronic pain and are not immediate candidates for surgery for a number of reasons, including age, contraindications or prior surgeries¹. Other patients may eventually become candidates for surgery, but need pain relief solutions in the interim. For these patients and their providers, there is a gap in the treatment algorithm. Closing this gap would help

improve patient outcomes and satisfaction, which in turn builds a physician's reputation for providing effective pain management.



COOLIEF*

Cooled Radiofrequency (RF) can provide a needed

solution for pain management physicians and other providers working with chronic pain patients. COOLIEF* is a minimally invasive, non-narcotic, outpatient treatment option to target and treat the nerves causing chronic pain. It targets chronic pain sources that have been clinically documented to provide patients up to 24 months of pain relief, improved physical function and reduced drug use. Cooled RF electrodes create larger, spherically-shaped lesions that provide greater distal projection than the ovoid lesions produced by standard RF, increasing the likelihood that cooled RF lesions will fully capture target nerves with known nerve path complexity and variability.

BENEFITS OF COOLIEF*

COOLIEF* is an option for a wide range of chronic pain patients, as it is effective in treating chronic knee, cervical, lumbar back, sacroiliac joint, thoracic facet, discogenic back and hip joint pain². For patients diagnosed with osteoarthritis (OA) of the knee, for example, study results conclude that COOLIEF* Cooled

COOLIEF*

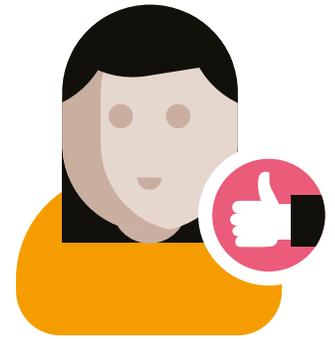
Cooled Radiofrequency Treatment

RF provides significantly greater and longer-lasting pain relief, improved physical function and higher patient satisfaction than intra-articular steroid injections. Patients are able to resume normal activity much quicker than with surgery, and with reduced need for narcotics. Additionally, their physical function improves and their pain and disability decreases². COOLIEF* could also reduce time and fluoroscopic exposure through straightforward, familiar placement techniques. COOLIEF* provides a solution for patients who aren't surgery candidates or choose to avoid surgical options.

COOLIEF* is a treatment option that fosters opportunities for collaboration between surgical and pain management physicians. With COOLIEF*, pain management physicians can focus on helping manage their patients' pain by providing non-narcotic relief sooner, while letting surgeons focus on mobility. Patients can potentially receive long-term, non-narcotic relief and a better quality of life before surgery, or after surgical options are no longer available.

MOVING FORWARD IN THE TREATMENT LANDSCAPE

In an increasingly complex pain treatment landscape, COOLIEF* provides a needed treatment option for chronic pain patients and their providers alike. Patients can potentially receive needed relief from chronic pain when they've exhausted other options, or feel those options aren't a fit for their lifestyle. For pain management physicians and surgeons, offering COOLIEF* may improve outcomes and increase patient satisfaction. That—combined with the full-service support from Avanos Medical, including hands-on training and clinical training—may be the needed solution that helps close the treatment gap for chronic pain patients.



To find a COOLIEF* representative in your area, please visit [avanospainmanagement.com](https://www.avanospainmanagement.com)

1. Avanos Medical. Managing Chronic Pain Can Be A Challenge With Today's Treatment Algorithm
2. Avanos Medical. COOLIEF* Knee: Cooled Radiofrequency

There are inherent risks in all medical devices. For more detail on indications, cautions, warnings and contraindications, [click here](#).

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[avanospainmanagement.com](https://www.avanospainmanagement.com)

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