

The Sacroiliac Joint As a Cause of Lower Back Pain



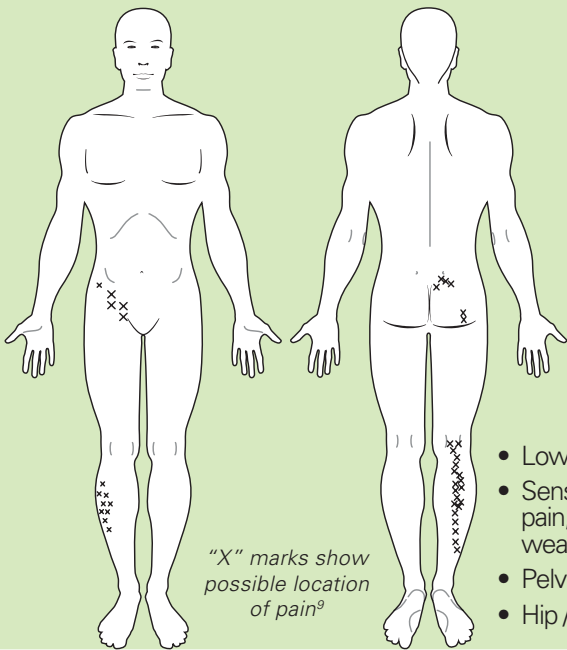
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SI Joint in Lower Back Pain

15-30% of patients with lower back pain had symptoms related to the sacroiliac (SI) joint.¹⁻⁵ Yet, most published studies on differential diagnosis for lower back pain fail to consider the SI joint in their algorithms.^{6,7}

CAUSES: • Degenerative disease • History of trauma • Pregnancy/childbirth • Prior lumbar fusion

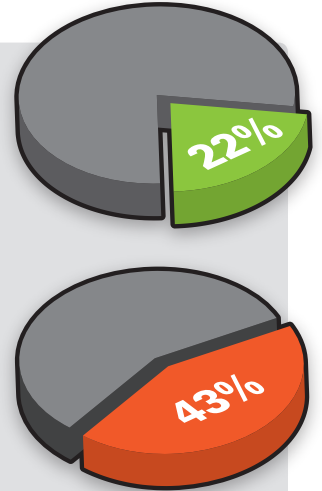
SYMPTOM PRESENTATION



- Lower back pain (below L5)
- Sensation of lower extremity: pain, numbness, tingling, weakness
- Pelvis / buttock pain
- Hip / groin pain

• According to a study by *Bernard*¹, over **22% of individuals with lower back pain complaints** actually had problems in their sacroiliac (SI) joint.

• *DePalma*⁸ studied lumbar fusion patients who were experiencing persistent or new lower back pain (LBP) post-operatively. The results demonstrated that **43% of post-lumbar fusion patients** were symptomatic for SI joint disorders based on diagnostic blocks.



SI joint dysfunction may present with symptoms similar to those of lumbar disc, lumbar facet, or hip joint pain.⁹

DIAGNOSIS

Provocative Tests^{10,11} followed by *Diagnostic Injection(s)* when indicated, are recommended to confirm pain is coming from the SI joint.

PROVOCATIVE TESTS: 3 OF 5 POSITIVE^{10,11}



Distraction



Thigh Thrust



FABER*



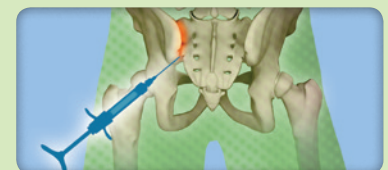
Compression



Gaenslen's

* Flexion, Abduction, External Rotation

SI JOINT DIAGNOSTIC INJECTIONS



- Fluoroscopic guidance
- 0.3 – 0.5 cc contrast medium
- 1.4 – 2.0 cc local anesthetic
- Post-injection pain reduction:
 - ≥ 50% SIJ is likely the source of pain
 - < 50% Should consider other pain sources, but SIJ may be a component

NON-SURGICAL TREATMENT

Treatment goals for SI joint pain include reducing symptoms and improving patient function. Non-surgical treatment options may include:

- Oral pain medications (NSAIDs, opioids, etc.)
- SI belt
- Physical therapy
- Chiropractic treatments
- Therapeutic SI joint injections
- RF ablation

iFuse Implant™

The iFuse Implant, with its patented triangular implant design, has produced **unparalleled clinical results**.¹² Multiple published, peer-reviewed articles demonstrate the safety and effectiveness of the iFuse Implant, including results from prospective multicenter clinical trials.¹³⁻¹⁶ The iFuse Implant is the only SI joint device system with clinical studies demonstrating that treatment improved pain, patient function, and quality of life.

SURGERY: SI JOINT FUSION

Patients refractory to non-surgical management may benefit from minimally invasive surgical (MIS) fusion of the SI joint.



UNIQUE TRIANGULAR DESIGN

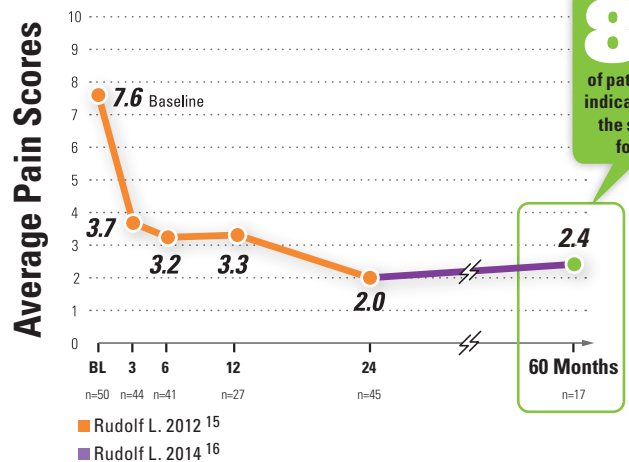


- Triangular implant profile minimizes rotation and an interference fit minimizes micromotion

- Implant's large porous surface area allows for bony ongrowth/ingrowth¹⁹
- Rigid titanium construction and implant geometry provide immediate stabilization

Rapid and Sustained Pain Relief

0=No Pain; 10=Worst pain imaginable



If you have patients who have failed non-surgical treatment, please call **866-811-4159** to find an iFuse trained surgeon.

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The iFuse Implant System[®] is intended for sacroiliac fusion for conditions including sacroiliac joint dysfunction that is a direct result of sacroiliac joint disruption and degenerative sacroiliitis. This includes conditions whose symptoms began during pregnancy or in the peripartum period and have persisted postpartum for more than 6 months. There are potential risks associated with the iFuse Implant System. It may not be appropriate for all patients and all patients may not benefit. For information about the risks, visit www.si-bone.com Rx Only.

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