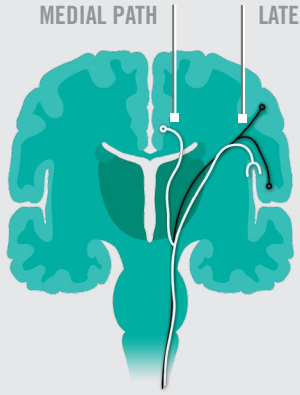

BURSTDR™
STIMULATION
naturally
SUPERIOR
ST. JUDE MEDICAL

# IS ONLY TREATING THE PAIN ENOUGH?

BURSTDR™ STIMULATION

**BurstDR™ stimulation,* exclusively from St. Jude Medical,** is a proven technology inspired by nature[1] that advances neurostimulation therapy by treating the whole patient. Not only does BurstDR stimulation offer your patients superior pain relief over tonic stimulation, it also relieves the suffering† associated with their chronic pain.[2,3]

## A BETTER RESPONSE, NATURALLY.



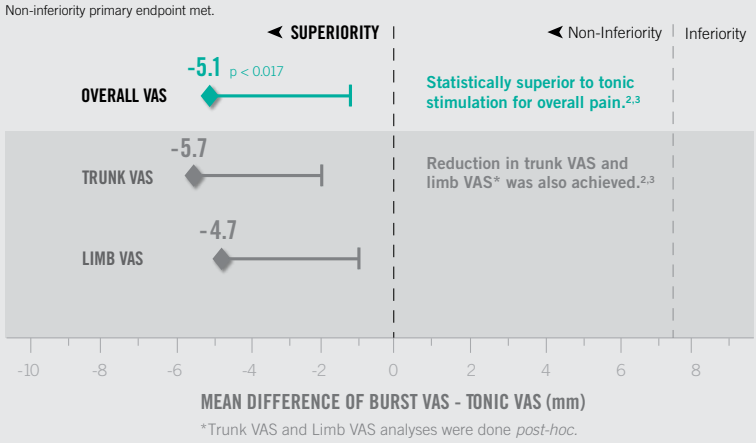

BURSTDR™ STIMULATION

**By emulating natural firing patterns in the brain,** BurstDR stimulation is believed to effectively modulate both the sensory and emotional pathways in the brain—**giving your patients relief from both the pain and the suffering† associated with the pain.**[1,4,5]

†Pain and suffering as measured by VAS.

## SUPERIOR RELIEF FROM PAIN AND SUFFERING.

**Available only from St. Jude Medical,** BurstDR stimulation has been proven to provide superior pain relief from overall pain and a reduction in back and leg pain compared to tonic.[2,3]




*Trunk VAS and Limb VAS analyses were done *post-hoc*.

## INVISIBLE THERAPY™ FOR A BETTER PATIENT EXPERIENCE.


**The Proclaim Elite™ SCS System—along with BurstDR™ stimulation—** offers your patients the advantages of Invisible Therapy,™ allowing patients to focus on their lives instead of their pain, through:

- A recharge-free device
- Reduced or no paresthesia[2,3]
- Familiar Bluetooth® wireless technology and Apple™ mobile digital devices

## MAKE THE NATURALLY SUPERIOR CHOICE.

Contact a St. Jude Medical representative today to learn more.

➤ Or visit SJM.com/BurstDR

*BurstDR™ stimulation, patented technology exclusively from St. Jude Medical, is also referred to as Burst stimulation in clinical literature.

†Pain and suffering as measured by VAS.


1. De Ridder, D., Vanneste, S., Plazier, M., Vancamp, T., (2015). Mimicking the Brain: Evaluation of St. Jude Medical's Prodigy Chronic Pain System with Burst Technology. *Expert Review of Medical Devices,12*(2), 143–150.
2. St. Jude Medical™ Proclaim™ Neurostimulation System Clinician's Manual. Plano, TX. 2016.
3. St. Jude Medical™ Prodigy™ Neurostimulation System Programming and Reference Manual. Plano, TX. 2016.
4. Van Havenbergh T., Vancamp T., Van Looy P., Vanneste S., De Ridder D. 2014. Spinal Cord Stimulation for the Treatment of Chronic Back Pain Patients: 500-Hz vs. 1000-Hz Burst Stimulation. *Neuromodulation 2014*; E-pub ahead of print. DOI: 10.1111/ner.12252.
5. Schu S., Slotty P.J., Bara G., von Knop M., Edgar D., Vesper J. 2014. A Prospective, Randomized, Double-blind, Placebo-controlled Study to Examine the Effectiveness of Burst Spinal Cord Stimulation Patterns for the Treatment of Failed Back Surgery Syndrome. *Neuromodulation 2014*; e-pub ahead of print. DOI: 10.1111/ner.12197.


CE marking does not necessarily indicate regulatory approval status for all markets. Please refer to the instructions for use for a full listing of indications, contraindications, warnings and precautions.

**Rx Only**
**Brief Summary:** Prior to using these devices, please review the Instructions for Use for a complete listing of indications, contraindications, warnings, precautions, potential adverse events and directions for use.

**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 and intractable low back and leg pain. **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, magnetic resonance imaging (MRI), explosive or flammable gases, theft detectors and metal screening devices, lead movement, operation of machinery and equipment, postural changes, pediatric use, pregnancy, and case damage. Patients who are poor surgical risks, with multiple illnesses, or with active general infections should not be implanted. **Adverse Effects:** Painful stimulation, loss of pain relief, surgical risks (e.g., paralysis). Clinicians manual must be reviewed for detailed disclosure.

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