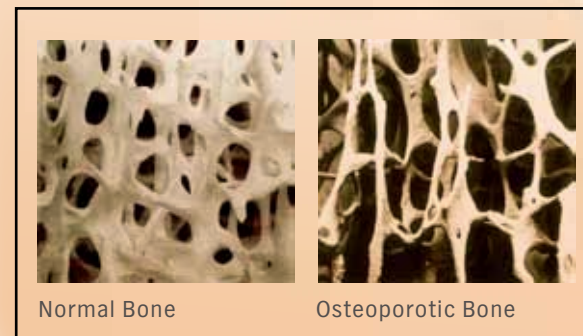


This information is designed to help you make an informed decision about Osseoplasty™. Please read the contents completely. Only a physician can determine if you are a suitable candidate for this procedure.

Osteoporosis

Osteoporosis or porous bone is often called the “silent disease” because bone loss occurs without symptoms. The disease is characterized by low bone mass and structural deterioration of bone tissue. Loss of bone mass leads to bones becoming weak and brittle, leading to an increased risk of fractures in the vertebrae. A bump or fall can cause a vertebra to collapse, causing significant pain and subsequent loss of mobility. In some cases the vertebrae become so weak that spinal fractures occur during normal activities.



Normal Bone

Osteoporotic Bone

osseoplasty™



For more information
please visit www.osseon.com

Osteoporosis Information Resources:

- National Osteoporosis Foundation - www.nof.org
- Society of Interventional Radiology - www.sirweb.org
- Spine Universe - www.spineuniverse.com
- Foundation for Osteoporosis Research & Education - www.fore.org
- Spine-health - www.spine-health.com
- International Osteoporosis Foundation - www.iofbonehealth.org
- WebMD - www.webmd.com/osteoporosis
- MedicineNet - www.medicinenet.com/osteoporosis

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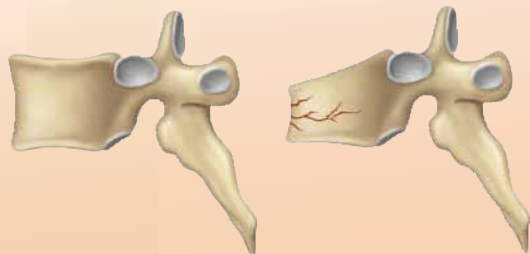
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IT'S TIME TO MOVE™

What Causes A Vertebral Compression Fracture (VCF)?

Vertebrae are the bones of the back which join together to make up the spinal column. A spinal fracture or vertebral compression fracture (VCF) occurs when the vertebral body collapses. The presence of one compression fracture significantly increases the risk of another.

Multiple compression fractures may cause spinal deformity. Sometimes this is seen in the form of stooped posture, or a forward curvature of the spine. This curvature can make normal activities such as reaching for objects or even walking, difficult and painful.



Normal Vertebra

Vertebra with a
Compression Fracture



Osseoplasty

Osseoplasty is a minimally invasive percutaneous procedure that uses a flexible, steerable needle to deliver bone cement into the vertebral body to treat symptomatic vertebral compression fractures.

The needle enables direct access to the entire vertebral body through one incision. The flexibility and steerability allows the doctor to precisely deliver bone cement and stabilize your vertebral fracture.

Complications rarely occur but as with any surgical procedure, there are potential risks. These risks should be discussed with your physician.

Who is a Candidate for this Procedure?

Patients who have been diagnosed with painful compression fractures of the vertebral spine caused by injury, osteoporosis, joint disease, or benign or malignant lesions, such as metastatic cancers and myeloma, are candidates for this procedure.

How the procedure works



1. A flexible needle is guided into the fractured vertebra through a single small incision in the skin.



2. Channels are created with the needle near the fracture and bone cement is injected into the vertebra, filling the spaces within the bone.



3. Post operatively the bone cement hardens to stabilize the fracture in the vertebra and relieve pain.

What to Expect

Before Treatment

Your medical examination will include a physical, x-rays and/or MRIs. These tests will be reviewed by a doctor to diagnose and locate fractures.

Procedure

A small single incision is made in the skin. The steerable, flexible needle is inserted into the vertebra to create channels or space and to deliver bone cement to the fracture.

After Treatment

Typically patients are released after one to two hours of observation and may resume normal activities within 24-48 hours. In most cases, pain caused by vertebral compression fractures may be relieved or diminished within 48 hours.

Post-procedure Patient Benefits:

- o Reduction of back pain.
- o Improved mobility and ability to resume normal daily activities.
- o Improved quality of life.

Frequently Asked Questions:

What causes osteoporosis?

There are several risk factors that can lead to osteoporosis. The leading risk factors are:

- o Caucasian and Asian women have the greatest risk
- o The risk rises in women over 50 and increases with age
- o Thin women are at higher risk
- o Men and women who smoke lose bone mass much faster than non-smokers
- o Post-menopausal women

What are the symptoms of osteoporosis?

A person may not be aware they have osteoporosis until a fracture occurs. There are symptoms such as backache, loss of height, a stooped posture, and fractures of the spine, wrist or hip.

What are the symptoms of vertebral compression fractures (VCF)?

Pain associated with a compression fracture can vary from patient to patient. For some people the pain may subside as the bone heals which can take up to two or three months. In other people the pain may continue even after the fracture has healed.

Sudden severe back pain, especially in older women, may signal a vertebral compression fracture.

One or more symptoms can be:

- o Sudden severe back pain
- o Worsening back pain when walking or standing
- o Some pain relief when lying down
- o Difficulty and pain when bending or twisting
- o Curved or stooped posture

How can I prevent vertebral compression fractures?

It is important to treat the osteoporosis that caused your fracture to prevent future fractures. Your doctor may recommend taking a calcium supplement, getting more vitamin D, and doing weight-bearing and strength-building exercises. Your doctor may also recommend medications to halt or slow osteoporosis.



Facts about Osteoporosis:

- o Osteoporosis is a major public health threat
- o Approximately one in two women will have an osteoporosis related fracture in their lifetime
- o Vertebral fractures are the most common type of osteoporotic fracture, with an estimated annual incidence of 547,000 vertebral fractures in the U.S.
- o While osteoporosis is often thought of as an older person's disease, it can strike at any age