

iFuse Implant System

Dr. Philip McCowin is trained in the latest minimally invasive surgical (MIS) techniques, including use of the iFuse Implant System® from SI-BONE®, Inc., a medical device company pioneering MIS sacroiliac (SI) joint treatment. The iFuse Implant System is intended for sacroiliac joint fusion for some causes of SI joint pain. SI joint treatment using the patented triangular design of the iFuse Implant™ has produced unparalleled clinical results. More than thirty published, peer-reviewed articles demonstrate safety and effectiveness of the iFuse Implant System.¹ iFuse is the only SI joint fusion system with clinical studies demonstrating that treatment improved pain, patient function, and quality of life.² 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/risks

The SI joint is a significant cause of lower back pain. Clinical publications have identified the SI joint as a pain generator in 15-30% of chronic lower back pain patients.³⁻⁶ In addition, the SI joint is a pain generator in up to 43% of patients with continued or new onset lower back pain after a lumbar fusion.⁷

Visit SI-BONE's YouTube channel to view the latest videos:

<https://www.youtube.com/user/thesacroiliacjoint>

References:

1. Polly, D.W. *et al.*, Neurosurgery. 2015. A list of additional published studies is available at www.si-bone.com/results – Dr. Polly is an investigator on a clinical research study sponsored by SI-BONE. He has no financial interest in SI-BONE. Research was funded by SI-BONE, Inc.
2. Duhon, B. *et al.*, Triangular Titanium Implants for Minimally Invasive Sacroiliac Joint Fusion: 2-Year Follow-Up from a Prospective Multicenter Trial. *Int J Spine Surg.* 2016;10:Article 13. – Dr. Duhon is a paid consultant of and conducts clinical research for SI-BONE Inc. Research was funded by SI-BONE, Inc.
3. Bernard TN, *et al.* Recognizing specific characteristics of nonspecific low back pain. *Clin Orthop Relat Res.* 1987;217:266–80.
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