

INTRACEPT™
Vertebrogenic Pain Relief

You hold the
power of
**transformational
pain relief**



The **first and only**
FDA-cleared procedure
proven to relieve
vertebrogenic pain



When you can tell a patient there's a way
to treat their pain. **That's living proof.**



"In the many years of caring for spine conditions,
I have found the Intracept™ Procedure to have
the greatest life-changing impact on chronic low
back pain."

Erik Ekstrom, MD

Summit Orthopedics
Plymouth, MN



"I was one of the first people to have the
Intracept Procedure ... it's been 5½ years
that I've been pain-free."

Alison T.

Intracept™ Procedure Patient

INTRACEPT™
Vertebrogenic Pain Relief



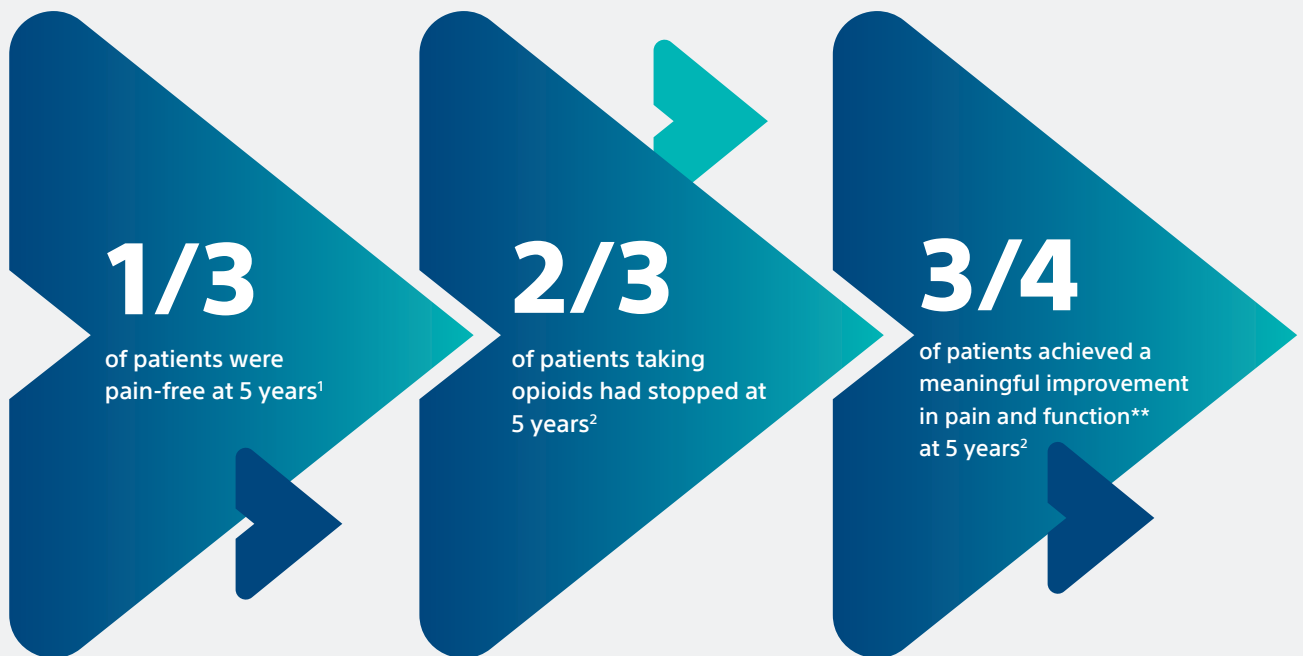
Watch physician
and patient videos

Unmatched 5+ year durability

INTRACEPT™
Vertebrogenic Pain Relief

99.7%

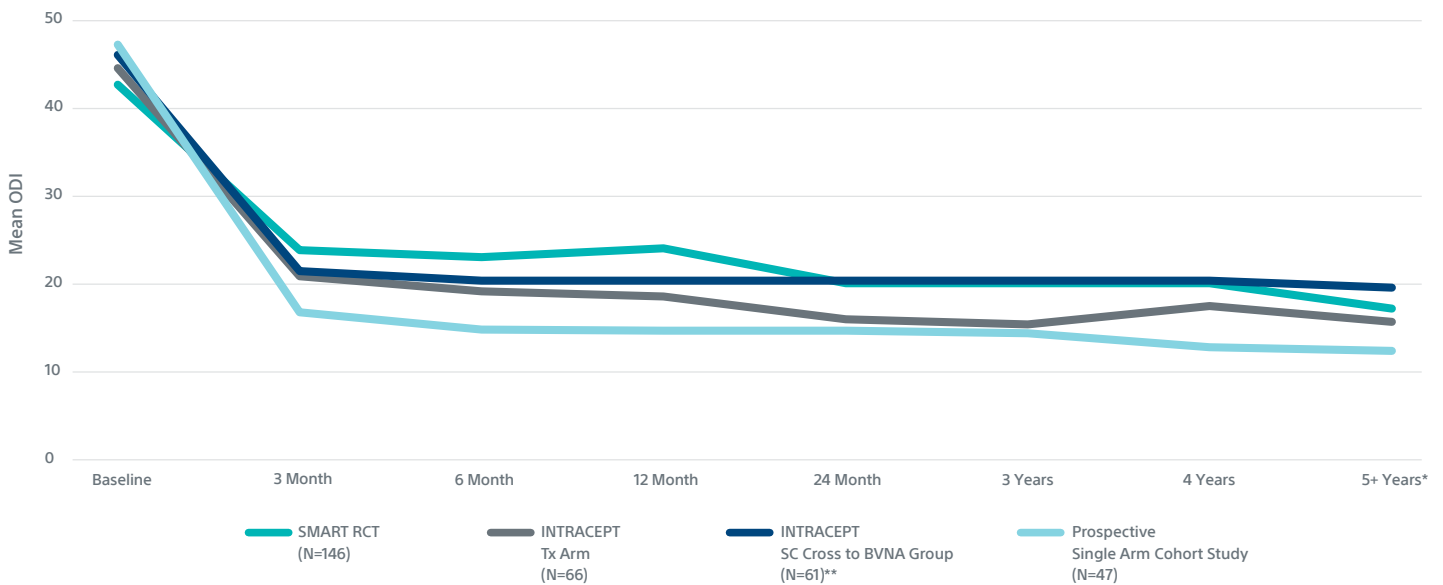
of patients free of serious device and device-procedure-related adverse events in clinical trials*



*Data on file
** ≥15-point ODI and ≥2-point VAS

Reproducible Outcomes in Functional Improvement¹⁻⁸

BVN Ablation Treatment in Multiple Studies: Mean Oswestry Disability Index (ODI) Over Time



* SMART RCT US per protocol treatment arm at mean of 6.4 years
** Standard arm re-baselined and offered active treatment at a median of 5.8 months



Understanding vertebrogenic pain, **pioneering the diagnosis**

Thirty years of science, research, and clinical evidence identified an unknown source of pain and led to a new diagnosis—vertebrogenic low back pain.

Vertebrogenic pain is **common**



Activity



Bending



Lifting

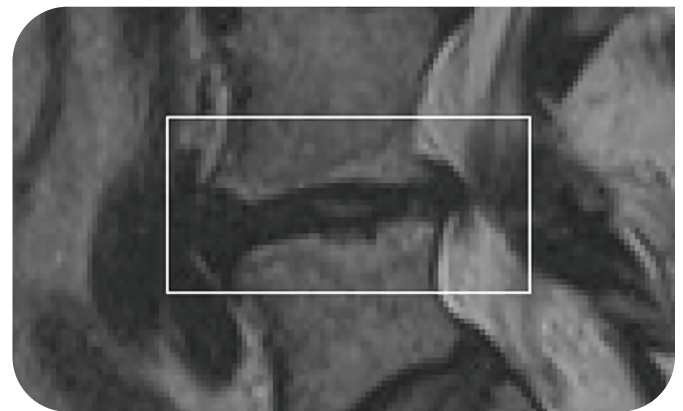


Sitting

A straightforward diagnosis with an objective biomarker



The basivertebral nerve (BVN) innervates the endplates and proliferates in damaged and degenerated endplates^{9,10}



Modic changes are an objective imaging biomarker that can confirm diagnosis of vertebrogenic pain

In 2021, a new ICD-10-CM diagnosis code (M54.51) was created for vertebrogenic low back pain



Now, you have a way to diagnose vertebrogenic pain.
Differentiate your practice with the Intracept™ Procedure.

Unparalleled support and expertise to help build your program

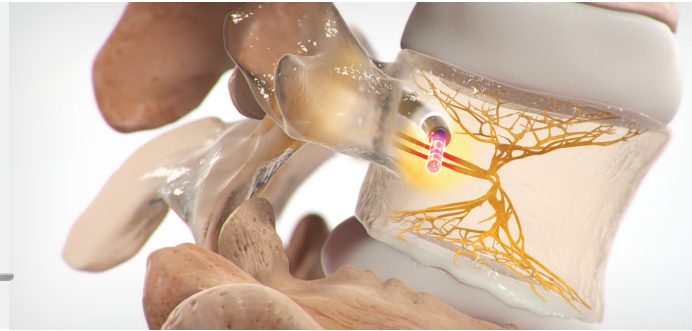
Experience, information, insights, resources—we bring it all together to help your program get started and run smoothly.



- Patient marketing support and co-marketing resources
- Advanced peer-led simulator training
- Robust patient approval and reimbursement support
- Experienced clinical case support
- Comprehensive program development tools

A proven treatment

Purpose-built instruments for predictable and precise targeting of the basivertebral nerve

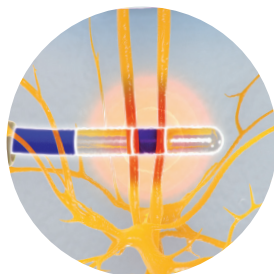


Precise targeting

Designed to create a curved access path to enable precise targeting

Controlled ablation

Temperature-controlled RF ablation creates repeatable and controlled lesion



Steerability

True steerability allows for controlled targeting adjustments

Predictability

Consistent performance even in hard bone



Watch Intracept
procedural videos

References

1. Fischgrund J, Rhyne A, Macadaeg K, et al. Long-term outcomes following intraosseous basivertebral nerve ablation for the treatment of chronic low back pain: 5-year treatment arm results from a prospective randomized double-blind sham-controlled multi-center study. *Eur Spine J.* 2020;29(8):1925-34. <http://doi.org/10.1007/s00586-020-06448-x>
2. Khalil, J. Intraosseous basivertebral nerve ablation: 5-year outcomes from three long-term follow-up studies. Abstract presented at: American Society of Pain & Neuroscience annual meeting; July 11-14, 2024. Miami, FL.
3. Koreckij T, Kreiner S, Khalil JG, Smuck M, Markman J, Garfin S. Prospective, randomized, multicenter study of intraosseous basivertebral nerve ablation for the treatment of chronic low back pain: 24-month treatment arm results. *NASSJ.* Published online October 26, 2021. doi: 10.1016/j.xnsj.2021.100089
4. Macadaeg K, Truumees E, Boody B, et al. A prospective, single arm study of intraosseous basivertebral nerve ablation for the treatment of chronic low back pain: 12-month results, *North American Spine Society Journal (NASSJ)* (2020). doi: 10.1016/j.xnsj.2020.100030
5. Fischgrund JS, Rhyne A, Franke J, et al. Intraosseous basivertebral nerve ablation for the treatment of chronic low back pain: a prospective randomized double-blind sham-controlled multi-center study. *Eur Spine J.* 2018;27(5):1146-56. doi: 10.1007/s00586-018-5496
6. Fischgrund JS, Rhyne A, Franke J, et al. Intraosseous basivertebral nerve ablation for the treatment of chronic low back pain: 2-year results from a prospective randomized double-blind sham-controlled multicenter study. *Int J Spine Surg.* 2019;13(2):110-9. doi: 10.14444/6015
7. Smuck M, Khalil J, Barrette K, et al. Prospective, randomized, multicenter study of intraosseous basivertebral nerve ablation for the treatment of chronic low backpain: 12-month results. *Reg Anesth Pain Med.* 2021 Aug;46(8):683-693. doi: 10.1136/rapm-2020-102259. Epub 2021 May 24.
8. Smuck M, Truumees E, Macadaeg K, Jaini AM, Chatterjee S, Levin J. Intraosseous basivertebral nerve ablation: pooled long-term outcomes from two prospective clinical trials. *Interventional Pain Medicine.* 2023; 2(2). doi: 10.1016/j.inpm.2023.100256
9. Bailey JF, Liebenberg E, Degmetich S, Lotz JC. Innervation patterns of PGP 9.5-positive nerve fibers within the human lumbar vertebra. *Journal of Anatomy* 2011;218(3):263-70.
10. Lotz JC, Fields AJ, Liebenberg EC. The role of the vertebral end plate in low back pain. *Global Spine J.* 2013;03:153-64.

Indications for Use: The Intracept™ Intraosseous Nerve Ablation System is intended to be used in conjunction with radiofrequency (RF) generators for the ablation of basivertebral nerves of the L3 through S1 vertebrae for the relief of chronic low back pain of at least six months duration that has not responded to at least six months of conservative care, and is also accompanied by features consistent with Type 1 or Type 2 Modic changes on an MRI such as inflammation, edema, vertebral endplate changes, disruption and fissuring of the endplate, vascularized fibrous tissues within the adjacent marrow, hypointense signals (Type 1 Modic change), and changes to the vertebral body marrow including replacement of normal bone marrow by fat, and hyperintense signals (Type 2 Modic change).

Contraindications: Use of the Intracept Intraosseous Nerve Ablation System is contraindicated in: Patients with severe cardiac or pulmonary compromise, patients with active implantable pulse generators (e.g. pacemakers, defibrillators), patients where the targeted ablation zone is < 10 mm away from a sensitive structure not intended to be ablated, including the vertebral foramen (spinal canal), patients with active systemic infection or local infection in the area to be treated, patients who are pregnant, and/or skeletally immature patients (generally ≤ 18 years of age). Refer to the Instructions for Use provided with the Intracept Procedure or www.relievant.com/intracept/ for potential adverse effects, warnings, and precautions prior to using this product.

Caution: U.S. Federal law restricts this device to sale by or on the order of a physician.