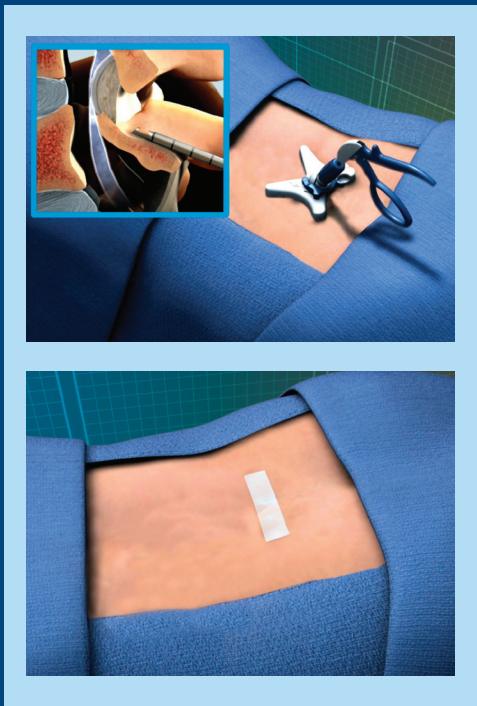


*when surgery is too much and
medication isn't enough,*

*there's now a less
invasive alternative* ⊗

*introducing
mild* for
LSS patients.



Vertos | *mild*[®]
MEDICAL | Minimally Invasive
Lumbar Decompression

LSS by the numbers: making the case for *mild*.

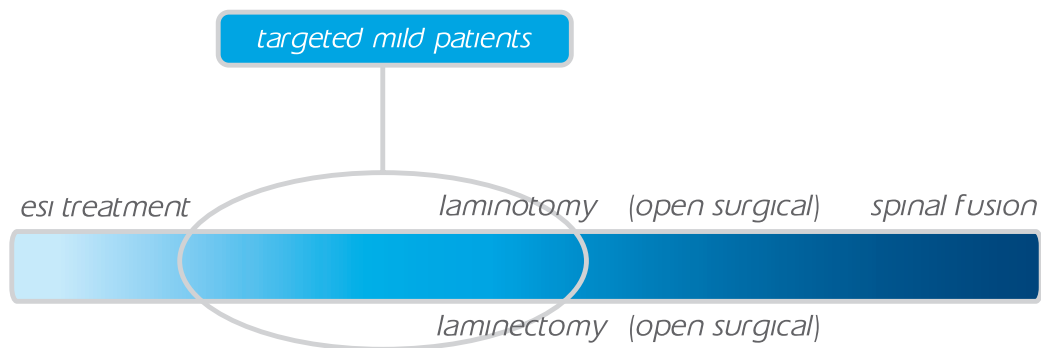
1,200,000	patients are receiving some form of treatment for LSS each year ¹
220,000+	undergo surgery
660,000+	are in the pre-surgery pipeline receiving some form of pain treatment for LSS



Many Americans suffer from chronic back pain and reduced mobility brought on by lumbar spinal stenosis (LSS). The result of nerve pressure caused by a degenerative narrowing of the lower spinal canal, LSS is an age-related condition that is often past the point of relief through conventional pain killers, although not always severe enough to warrant major surgery.

As the population over age 50 grows, the number of LSS patients is expected to increase by 18 million over the next 10 years. Fortunately there's a new method of treatment for these patients that doesn't require open surgery or even, potentially, ongoing medication.

mild: a new option that fills the treatment gap.



Until now, there have been only two main approaches to LSS treatment: conservative and open surgery. The more conservative methods involve exercise, physical therapy, chiropractic therapy and acupuncture, followed by epidural steroid injections (ESI's) as the next line of defense. But when ESI treatments fail over time, the patient is faced with the more dire choice of opiates or open back surgery. Yet because of the potential complications associated with open surgical procedures such as laminectomy, laminotomy and spinal fusion, several years may pass before the patient's LSS symptoms become severe enough to warrant such an operation.

Now there's a safe middle ground. Research suggests that most of the **600,000+ patients** currently in the pre-surgery pipeline may be candidates for *mild*.

mild instruments combined with epidurogram provide maximum patient safety.

The *mild* procedure is performed using fluoroscopy in a contra-oblique angle. An epidurogram provides a real-time visual landmark between the dura and the *mild* Tissue Sculpter, which indicates to the physician of the exact instrument location during the procedure. Furthermore, the cutting surface of the unique, patented tip of the *mild* Tissue Sculpter is located on the top arm, which allows tissue to be cut only when the instrument is positioned at a 40° to 60° angle. The snowplow-shaped tip of the lower arm, coupled with spring action, protects against inadvertent forward movement when the instrument is not held at the appropriate angle.



Safety is the hallmark of the *mild* procedure. It was developed by physicians and engineers with the understanding that in order for the procedure to gain acceptance, it must be highly effective as well as exceptionally safe and reliable. *the results speak for themselves.*

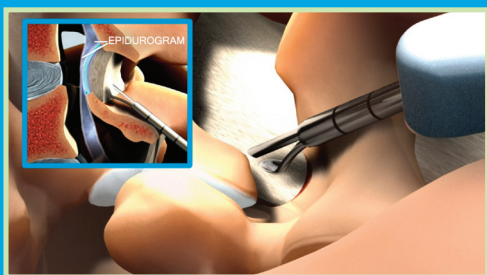
mild is a safe, uncomplicated procedure to perform.

	<i>mild</i> Patients	Open Surgery*
	N>500	N=394
Intra-Operative Blood Transfusion	0%	10%
Post-Operative Blood Transfusion	0%	5%
Dural Tear	0%	9%
Anesthesia Time—Median	Local / MAC	2 Hours
Hospital Days—Average	< 24 Hours	3.5 Days

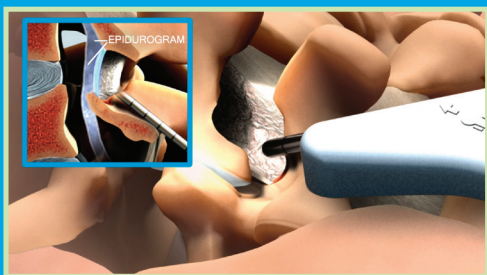
*Weinstein, et al, for the SPORT Investigators. Surgical versus Nonsurgical Therapy for LSS. NEJM 2008;358:794-810.

basics of the mild procedure:

A common cause of LSS is hypertrophic ligamentum flavum. The ligamentum flavum, normally a 2mm-thick ligament, can expand to >4mm, pressing on the patient's spinal canal, causing discomfort. The unique, patented *mild* Tissue Sculpter enables the physician to gently debulk this ligament through a 5.1mm access port with minimal disruption to surrounding tissues.

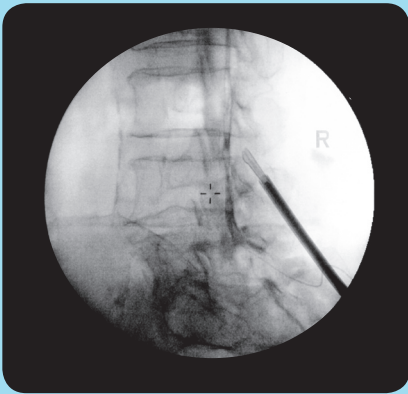


Ligament before debulking.

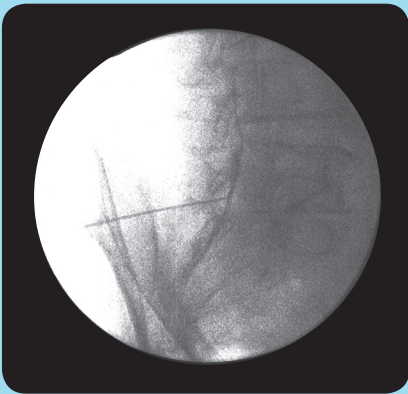


Ligament after debulking.

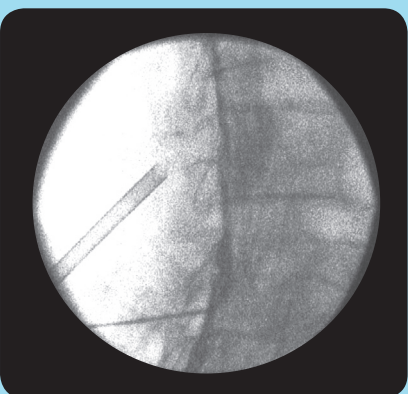
the effect is immediate. Yet the entire operation for a bi-lateral mild procedure on a single level generally takes *less than 20 minutes.* Patients who arrive using a walker often leave it behind as they exit the treatment room.



Epidurogram provides safety margin for Tissue Sculpter.



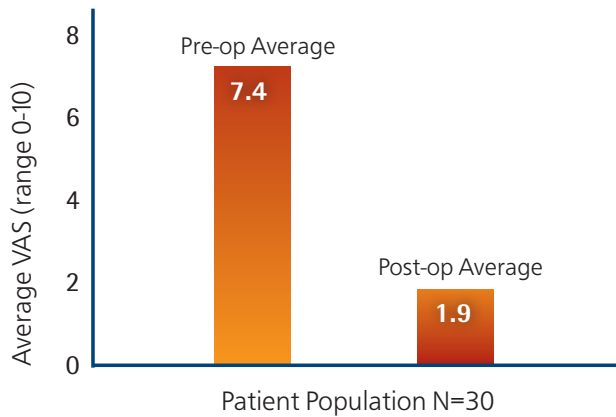
Pre-*mild* epidurogram displays limited contrast flow.



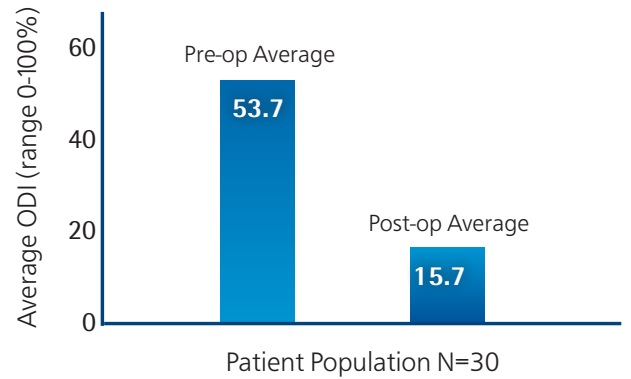
Post-*mild* epidurogram displays an increased contrast flow, providing a visual confirmation of decompression.

the results anything but mild.

Initial patients treated with the *mild* procedure experienced a reduction in pain of better than 74% and a mobility improvement of more than 70%.



VAS COMPARISON
Pre-op Average vs. Post-op Average (6 weeks or >)



ODI COMPARISON
Pre-op Average vs. Post-op Average (6 weeks or >)

more good news: *mild* patients are not hindered from receiving additional surgery in the future should it be deemed necessary. In fact, even patients who ultimately need further back surgery are often healthier following the *mild* procedure because of the increased mobility and physical activity it allows.

mild physicians: highly trained with exceptional experience.

Physicians who perform the *mild* procedure have years of experience performing fluoroscopically guided spine procedures such as spinal cord stimulators, pain pumps and vertebroplasties. In addition, they are required to attend an extensive *mild* training course in Aliso Viejo, California, which consists of both didactic and hands-on cadaveric workshop sessions. A common response following the training: *"mild is much simpler and safer to perform than my other spine procedures."*

*Not every LSS patient is a candidate for surgery.
Nor can medication alone relieve symptoms
in every case. Now there's a safe,
effective alternative: mild.*