

iovera^o

STOP PAIN COLD.

iovera^o RELIEVES PAIN BEFORE AND AFTER SURGERY

iovera^o harnesses the power of cold to immediately reduce pain. Cryoanalgesia (targeted cold therapy) using the patented iovera^o system delivers a localized nerve block.

- FDA-cleared to block pain
- Provides immediate, long-lasting relief of acute (postsurgical) and chronic pain
- The iovera^o treatment is localized and does not inject any drugs into the body

**DON'T LET
PAIN STOP YOU
FROM ACTIVITIES
THAT YOU
ENJOY!**



THE iovera^o TREATMENT CAN BE PERFORMED PRIOR TO KNEE SURGERY TO HELP REDUCE PAIN AFTER SURGERY

ACUTE (POSTSURGICAL PAIN)

Surgery may be in your future, but a painful recovery doesn't have to be. The iovera^o treatment uses the body's natural response to cold to block the signaling portion of a nerve, temporarily reducing pain during the critical weeks following surgery.¹ The results of a clinical trial show that iovera^o patients had:



FEWER OPIOID PRESCRIPTIONS

Patients who received iovera^o treatment requested **45%** fewer opioid prescriptions at **12 weeks** after knee replacement surgery¹



REDUCTION IN KNEE PAIN

Two weeks after surgery, patients treated with iovera^o experienced less pain¹



FASTER DISCHARGE

More patients treated with iovera^o were discharged within **2 days** of surgery¹

A clinical study was conducted comparing patients treated with iovera^o to those who received standard of care treatment, which did not include iovera^o.



iovera^o CAN ALSO BE USED TO TREAT CHRONIC PAIN DUE TO OSTEOARTHRITIS OF THE KNEE

CHRONIC PAIN

The iovera^o treatment can be used to treat chronic pain due to osteoarthritis of the knee. A clinical study showed that most iovera^o patients experienced pain relief that lasted up to 90 days.² The results of this study show that iovera^o patients had:



DECREASED KNEE PAIN

Patients who received iovera^o treatment continued to experience pain relief at **30, 60, and 90** days after treatment²



LESS STIFFNESS

Patients treated with the iovera^o system experienced less stiffness **30** days after treatment²



IMPROVED PHYSICAL FUNCTION

Patients in the iovera^o treatment group had improved physical function at **90** days²

A clinical study compared patients with knee osteoarthritis treated with the iovera^o system to those who received a placebo treatment.

FREQUENTLY ASKED QUESTIONS (FAQs)

What kind of results can I expect?

Results from the iovera^o treatment can be felt immediately after treatment. When the treatment is applied to a specific nerve, it will interrupt that nerve's ability to send a pain signal, providing an immediate reduction in pain.

How does iovera^o work?

The iovera^o system has revolutionized the delivery of cryoanalgesia. With the iovera^o system, doctors are able to deliver a concentrated, focused cold zone through a handheld device. This closed-end needle based procedure is safe and does not damage or destroy the surrounding tissue.

The iovera^o treatment blocks targeted sensory nerves from sending pain signals. Small closed-end needles (also referred to as Smart Tip) are inserted into the treatment region and a treatment cycle is performed. A precise cold zone is formed under the skin—cold enough to temporarily stop the nerve from sending pain signals without damaging surrounding tissue. This is repeated until the nerve is blocked, providing pain relief until the nerve regenerates.

The iovera^o treatment is used to treat specific nerves so the pain relief is focused only on the part of the body that is being treated. One treatment with the iovera^o system can last 90 days.²

Are there any side effects?

Common side effects include local pain, tenderness, swelling, bruising, and tingling or numbness. Typically, these reactions are mild, and resolve with no physician intervention.

Visit www.iovera.com to see more FAQs.



TALK TO YOUR DOCTOR ABOUT iovera^o

Indication

The iovera^o system is used to destroy tissue during surgical procedures by applying freezing cold. It can also be used to produce lesions in peripheral nervous tissue by the application of cold to the selected site for the blocking of pain. It is also indicated for the relief of pain and symptoms associated with osteoarthritis of the knee for up to 90 days. The iovera^o system is not indicated for treatment of central nervous system tissue. The iovera^o system's "1x90" Smart Tip configuration (indicating one needle which is 90 mm long) can also facilitate target nerve location by conducting electrical nerve stimulation from a separate nerve stimulator.

Important Safety Information

The iovera^o system should not be used in people with the following conditions:

- Blood that thickens when patient is exposed to cold (cryoglobulinemia), blood appearing in the urine when patient is exposed to the cold (paroxysmal cold hemoglobinuria), skin rash that appears when patient is exposed to the cold (cold urticaria), narrowing of the blood vessels in the hands and feet when patient is exposed to the cold (Raynaud's disease), and open and/or infected wounds at or near the treatment site

Patients being treated with the iovera^o system (a needle-based therapy) may experience certain reactions, including, but not limited to:

- Bruising, swelling, inflammation and/or redness, local pain and/or tenderness, and altered feeling at the site of application

Proper use of the device as described in the User Guide can help reduce or prevent the following reactions:

- In the area(s) where you were treated: damage to the skin from being exposed to cold or heat, darkening or lightening of the skin, and dimples in the skin
- Outside the area(s) where you were treated: muscles may not work or move normally

For more information, visit www.iovera.com.

REFERENCES: 1. Dasa V, Lensing G, Parsons M, Harris J, Volaufova J, Bliss R. Percutaneous freezing of sensory nerves prior to total knee arthroplasty. *Knee*. 2016;23(3):523-528.
2. Radnovich R, Scott D, Patel AT, et al. Cryoneurolysis to treat the pain and symptoms of knee osteoarthritis: a multicenter, randomized, double-blind, sham-controlled trial. *Osteoarthritis Cartilage*. 2017;25(8):1247-1256.

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