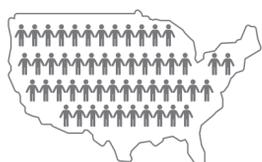


Rethinking Chronic Pain Management

Amidst an Ongoing Opioid Crisis, Most Aren't Aware of Drug-Free Treatment Options

The Impact of Chronic Pain is Vast for Individuals, the Healthcare System



Over **50 million people** in the U.S. live with chronic pain (pain that lasts more than six months)¹



55% of people have received opioids either in the past or currently, to manage their chronic pain⁴



People with chronic pain are **three times** more likely to develop symptoms of depression or anxiety²



1 in 4 people receiving long-term opioid therapy in a primary care setting struggles with opioid addiction⁵



19.6 million adults experience high-impact chronic pain that interferes with daily life or work activities³



The Pandemic Has Amplified the Effect of Chronic Pain



Prescription opioid misuse costs the U.S. healthcare system **\$78.5 billion a year**⁶



Nearly half of people reported that their chronic pain had worsened during the pandemic⁴



1 in 3 people felt that the pandemic negatively impacted their ability to manage mental health issues, including depression, anxiety, or stress⁴

People Can't Find Lasting Relief and Are Unaware of Drug-Free Therapies

60%

of people with chronic pain say that they are dissatisfied with or indifferent to their current treatment⁴

58%

are unaware of drug-free, interventional pain procedures⁴

94%

said they would try an FDA-approved, drug-free alternative to help manage their chronic pain⁴

MORE THAN 50%

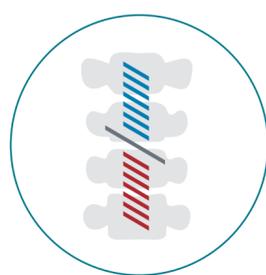
haven't seen a pain physician/specialist for their chronic pain⁴



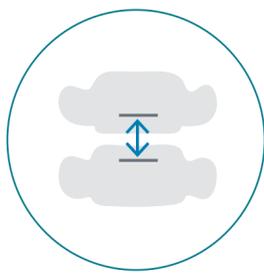
No two people experience pain the same way, making it difficult to treat.

That's why personalized care from a specialist is critical. People with chronic pain need education about and access to drug-free options that can provide adequate and lasting, personalized pain relief.

Pain Physicians have Drug-Free Options to Address Chronic Pain



Spinal cord stimulation (SCS) therapy uses an implanted device to deliver mild electrical impulses that interrupt pain signals the nerves send through the spinal cord. This can help prevent someone from perceiving the pain. It can help to relieve chronic pain in the lower back, legs and feet.



The Vertiflex™ Procedure is a minimally invasive outpatient procedure that uses a small spacer to relieve pain associated with moderate lumbar spinal stenosis. It can help to relieve chronic pain in the lower back, legs, groin and buttocks.



Radiofrequency ablation (RFA) is a minimally invasive outpatient procedure that uses thermal energy to interrupt pain signals at the source. It can help to relieve chronic pain in the neck, shoulders, lower back, hips, knees and feet.

To learn more about chronic pain or to find a pain management specialist, visit www.pain.com

1. Prevalence of Chronic Pain and High-Impact Chronic Pain Among Adults — United States, 2016. Morbidity and Mortality Weekly Report. U.S. Centers for Disease Control and Prevention. *Weekly* / September 14, 2018 / 67(36);1001–1006 <https://www.cdc.gov/mmwr/volumes/67/wr/mm6736a2.htm#:~:text=in%202016%2C%20an%20estimated%202020.4,adults%20with%20public%20health%20insurance>. Last accessed on 8/16/2020
 2. Harvard Health Publishing. Depression and pain. <https://www.health.harvard.edu/mind-and-mood/depression-and-pain>. Last accessed on 10/27/20
 3. U.S. Department of Health and Human Services (2019, May). Pain Management Best Practices Inter-Agency Task Force Report: Updates, Gaps, Inconsistencies, and Recommendations. Retrieved from U. S. Department of Health and Human Services website: <https://www.hhs.gov/ash/advisory-committees/pain/reports/index.html>. Last accessed 1/12/21.
 4. Schlesinger online survey of 518 people living with chronic pain on behalf of Boston Scientific. Conducted August 12-24, 2020.
 5. U.S. Centers for Disease Control and Prevention. Prescription Opioids. <https://www.cdc.gov/drugoverdose/opioids/prescribed.html>. Last accessed 10/27/20.
 6. Florence CS, Zhou C, Luo F, Xu L. The Economic Burden of Prescription Opioid Overdose, Abuse, and Dependence in the United States, 2013. *Med Care*. 2016;54(10):901-906. doi:10.1097/MLR.0000000000000625.