Restorative Neurostimulation for Chronic Low Back Pain

— A disease modifying pain medicine therapy

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Introduction

- Chronic low back pain (CLBP) afflicts considerable portions of the adult population
- Some with **mechanical CLBP** do not have adequate symptom relief from optimal management strategies
- **Restorative neurostimulation** has shown to be effective at mechanical CLBP arising from impaired multifidus function
- **Aim:** Evaluate clinical trial published data across multiple studies with restorative neurostimulation

Methods

- Data analyzed from patient-reported outcomes (PROs) from consented patients with restorative neurostimulation implantations in 3 major trials (ReActiv8-B (US, UK, EU, AUS), ReActiv8-C (Germany), ReActiv8-PMCF (UK))¹⁻³
- Analyzed data at pre-op, 6-, 12-, and 24-months post-op
- PROs:
 - Numeric rating scale (NRS) or Visual Analog Scale (VAS) recorded as response
 - Oswestry Disability Index (ODI)
 - EuroQol 5-Dimension 5-Level (EQ-5D-5L)

References:

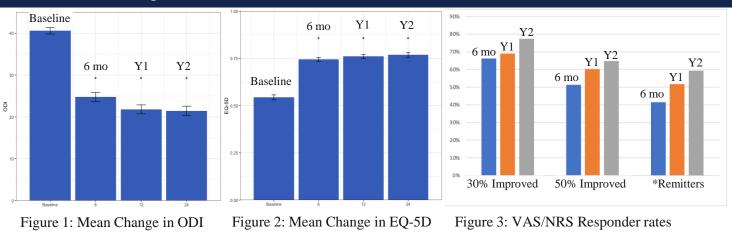
¹Gilligan C, et al. Pain. (2021); ²Ardeshiri A, et al. World Neurosurg. (2022); ³Thomson S, et al. British Journal of Pain. (2023)

Results

Complete patient data at 2 years: N=261/333; F51%; Age=49.1±0.7yrs; BMI=28.4±0.3kg/m²

➤ ODI improved from 41 to 21

- ► 65% had >50% reduction in pain
- ➤ 60% improved ODI by >15-points
- 60% classified as Remitters* (*≤2.5 on VAS or ≤3 on NRS)
- > EQ-5D-5L improved from 0.544 to 0.769



Discussion

Evidence across multiple clinical studies showed positive changes from baseline in VAS/NRS, ODI, and EQ-5D-5L in patients with mechanical CLBP and multifidus dysfunction

Conclusion

Restorative neurostimulation, an additional treatment option, provides sustained pain, function and quality of life improvements long-term for patients with multifidus dysfunction resulting from mechanical CLBP

