

# Repensando o Controle da Dor Crônica

Em meio a uma crise de opioides em andamento, a maioria dos pacientes não está ciente das opções de tratamentos não medicamentosos

## O impacto da dor crônica é vasto para os indivíduos e para o sistema de saúde



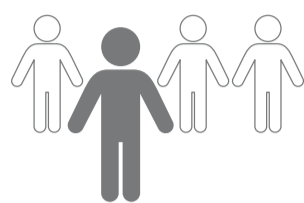
Mais de **50 milhões de pessoas** nos EUA convivem com dor crônica (dor que dura mais de seis meses)<sup>1</sup>



**55% das pessoas** receberam opioides no passado ou atualmente, para controlar sua dor crônica<sup>4</sup>



Pessoas com dor crônica têm **três vezes** mais chances de desenvolver sintomas de depressão ou ansiedade<sup>2</sup>



**1 em cada 4 pessoas** que recebem terapia de longo prazo com opioides em um ambiente de atenção primária luta contra o vício<sup>5</sup>



**19,6 milhões de adultos** sofrem com dor crônica de alto impacto que interfere nas atividades cotidianas ou de trabalho<sup>3</sup>



## A PANDEMIA AMPLIOU O EFEITO DA DOR CRÔNICA



O uso indevido de opioides prescritos custa **US\$ 78,5 bilhões ao ano<sup>6</sup>** para o sistema de saúde dos EUA



**Quase metade das pessoas** relatou que sua dor crônica havia piorado durante a pandemia<sup>4</sup>



**1 em cada 3 pessoas** sentiu que a pandemia impactou negativamente sua capacidade de lidar com problemas de saúde mental, incluindo depressão, ansiedade ou estresse<sup>4</sup>

## As pessoas não conseguem encontrar alívio duradouro e desconhecem as terapias não medicamentosas

**60%**

**das pessoas** com dor crônica dizem estar insatisfeitas ou indiferentes ao seu tratamento atual<sup>4</sup>

**58%**

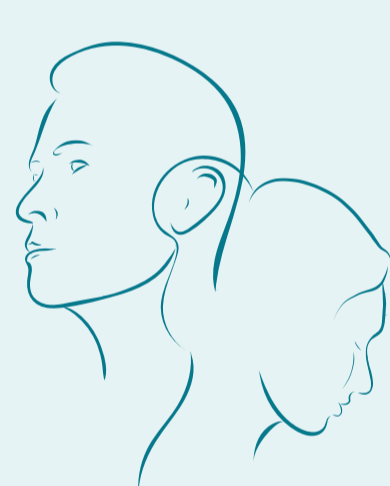
**desconhecem** procedimentos intervencionistas não medicamentosos para dor<sup>4</sup>

**94%**

**disseram que experimentariam** uma alternativa não medicamentosa aprovada pela FDA para ajudar a controlar sua dor crônica<sup>4</sup>

**MAIS DE 50%**

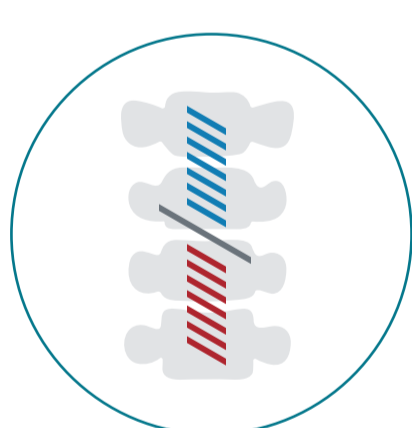
**não consultaram um médico/especialista em dor** para sua dor crônica<sup>4</sup>



## Duas pessoas não sentem a dor da mesma maneira, o que dificulta o tratamento.

É por isso que o atendimento personalizado de um especialista é fundamental. Pessoas com dor crônica precisam de educação e acesso a opções não medicamentosas que possam proporcionar alívio adequado, duradouro e personalizado da dor.

## Os médicos especialistas têm opções não medicamentosas para tratar a dor crônica



**A terapia de estimulação da medula espinal (SCS)** usa um dispositivo implantado para fornecer impulsos elétricos leves que interrompem os sinais de dor que os nervos enviam pela medula espinal. Isso pode ajudar a evitar a percepção da dor, além de auxiliar no alívio de dores crônicas na coluna lombar, pernas e pés.



**A Ablação por radiofrequência (RFA)** é um procedimento ambulatorial minimamente invasivo que usa energia térmica para interromper os sinais de dor na origem. Pode ajudar a aliviar dores crônicas no pescoço, ombros, coluna lombar, quadris, joelhos e pés.

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.

### SCS

Indications for Use. The Boston Scientific Spinal Cord Stimulator Systems are indicated as an aid in the management of chronic intractable pain of the trunk and/or limbs including unilateral or bilateral pain associated with the following: failed back surgery syndrome, Complex Regional Pain Syndrome (CRPS) Types I and II, intractable low back pain and leg pain. Associated conditions and etiologies may be: radicular pain syndrome, radiculopathies resulting in pain secondary to failed back syndrome or herniated disc, epidural fibrosis, degenerative disc disease (herniated disc pain refractory to conservative and surgical interventions), arachnoiditis, multiple back surgeries.

Contraindications. The Spinal Cord Stimulator systems are not for patients who are unable to operate the system, have failed trial stimulation by failing to receive effective pain relief, are poor surgical risks, or are pregnant.

Boston Scientific's ImageReady™ MRI Technology makes safe MRI head scans possible. Patients implanted with the Precision Spectra™ or Spectra WaveWriter™ Spinal Cord Stimulator Systems with ImageReady™ MRI Full Body Technology are "MR Conditional" only when exposed to the MRI environment under the specific conditions defined in the applicable ImageReady™ MRI Head Only Guidelines for Precision Spectra™ or Spectra WaveWriter™ Spinal Cord Stimulator Systems.

Boston Scientific's ImageReady™ MRI Full Body Technology makes safe MRI scans possible. The Precision Montage™ MRI, WaveWriter Alpha™ and WaveWriter Alpha™ Prime SCS Systems with ImageReady™ MRI Full Body Technology are "MR Conditional" only when exposed to the MRI environment under the specific conditions defined in the applicable ImageReady™ MRI Full Body Guidelines for Precision Montage™ MRI or WaveWriter Alpha™ and WaveWriter Alpha™ Prime Spinal Cord Stimulator Systems.

Warnings. Patients implanted with Boston Scientific Spinal Cord Stimulator Systems without ImageReady™ MRI Technology should not be exposed to Magnetic Resonance Imaging (MRI). Exposure to MRI may result in dislodgement of the stimulator or leads, heating of the stimulator, severe damage to the stimulator electronics and an uncomfortable or jolting sensation. As a Spinal Cord Stimulation patient, you should not have diathermy as either a treatment for a medical condition or as part of a surgical procedure. Strong electromagnetic fields, such as power generators or theft detection systems, can potentially turn the stimulator off, or cause uncomfortable jolting stimulation. The system should not be charged while sleeping. The Spinal Cord Stimulator system may interfere with the operation of implanted sensing stimulators such as pacemakers or implanted cardiac defibrillators. Advise your physician that you have a Spinal Cord Stimulator before going through with other implantable device therapies so that medical decisions can be made and appropriate safety measures taken. Patients should not operate motorized vehicles or potentially dangerous machinery with therapeutic stimulation switched "on." Your doctor may be able to provide additional information on the Boston Scientific Spinal Cord Stimulator systems. For complete indications for use, contraindications, warnings, precautions, and side effects, call 866.360.4747 or visit [Pain.com](http://Pain.com).

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

### RF

The Boston Scientific Radiofrequency Generators, associated Radiofrequency Lesion Probes and RF Cannula are indicated for use in procedures to create radiofrequency lesions for the treatment of pain or for lesioning nerve tissue for functional neurosurgical procedures. The Boston Scientific RF Injection Electrodes are used for percutaneous nerve blocks with local anesthetic solution for radiofrequency lesioning of peripheral nerve tissue only. The Boston Scientific LCCED and Stereotactic TCD Electrodes are indicated for use in radiofrequency (RF) heat lesioning of nervous tissue including the Central Nervous System.

Warnings: For a patient with a cardiac pacemaker, contact the pacemaker company to determine whether the pacemaker needs to be converted to fixed rate pacing during the radiofrequency procedure. Refer to the Instructions for Use provided with Boston Scientific generators, electrodes and cannulas for potential adverse effects, additional warnings and precautions for using these products.

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