



CONTICURE

White Paper



Prepared by

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INTRODUCTION

Urinary incontinence (UI) is a health problem that affects the quality of life of patients who suffer from it and the impact is different depending on the severity, the type of UTI and the woman's experience of this problem. The diagnosis and treatment and treatment of UI in women is presented in the form of algorithms with accompanying notes that incorporate existing evidence and assigned a level of evidence (NE) and a grade of recommendation (GR) Using magnetic field therapy, a current is induced in the cell which causes a contraction of the pelvic floor muscles. This strengthening of the muscles leads to improvement of incontinence problems.

ContiCure offers the appropriate treatment parameters for each patient. Select the treatment goal from one of the 4 predefined programmes. This enables treatment of stress, mixed, and urge incontinence, and general pelvic floor training can be selected.

ContiCure has a large applicator which is inserted in the treatment chair for the therapy. The intensity can be individually adjusted during therapy depending on the patient's sensation.

Objective: Prospective study to evaluate the safety and preliminary effectiveness of the use of CONTICURE magnetic stimulation in urinary incontinence.

Method: 42 patients with DIFFERENT DEGREE of urinary incontinence were recruited for a 8 week long session of treatments.

First 4 weeks (2 sessions per week); following 4 weeks (one session per week).

week 1-4	week 5-8
two sessions per week	one session per week

Follow-up after three months.

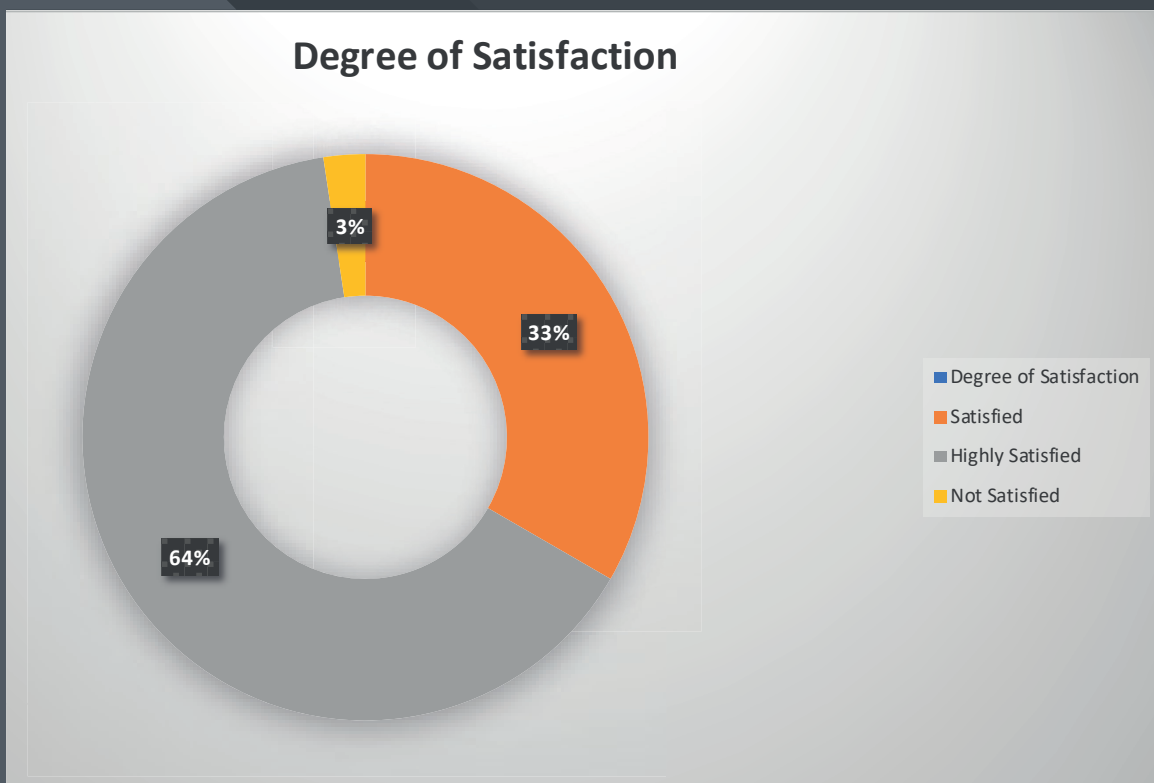
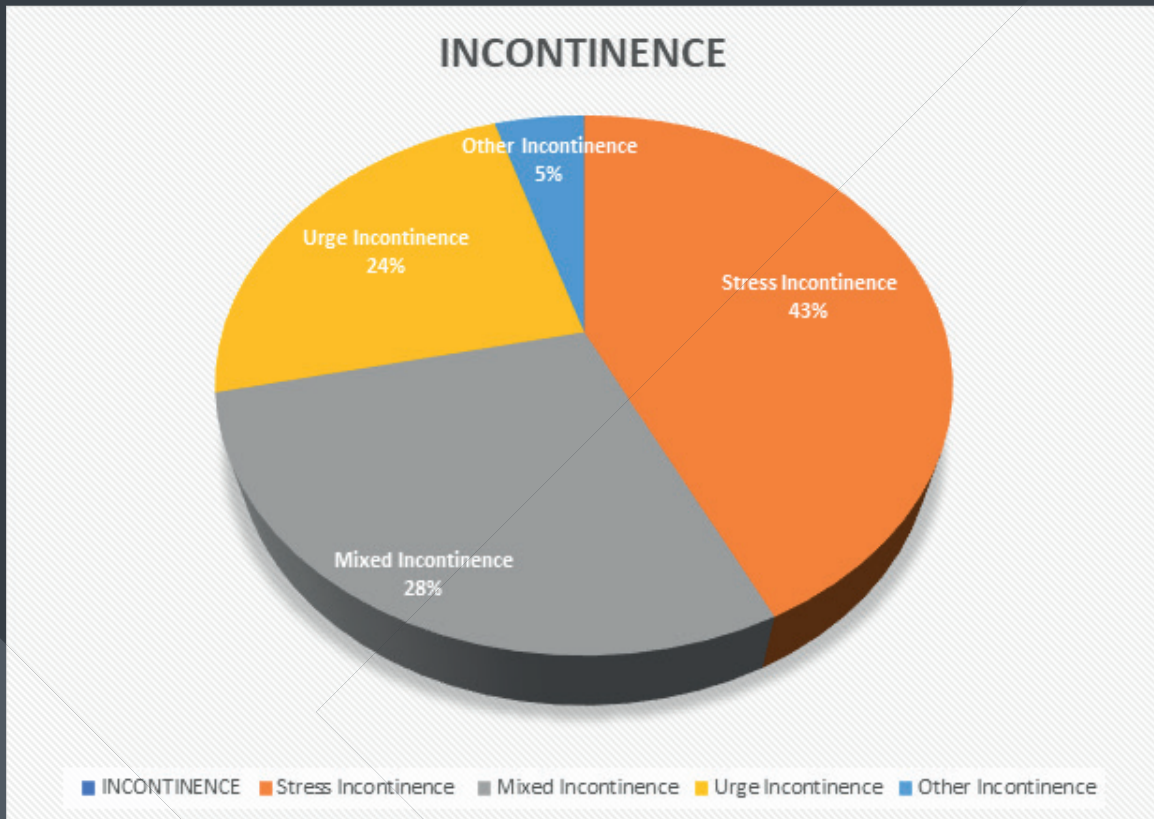
The patients received sessions completing the different treatment protocols. Initially the patients underwent a quality of life test before and after treatment, evaluation with MRI, advanced ultrasound using elastography to measure the initial tissue's elasticity and be able to compare after treatment, clinical functional evaluation and urodynamic test.

Results: No adverse reactions were observed. All the patients finished the treatment sessions. Only five patients reported increased pain after treatment in the first session corresponding to a VAS scale greater than 5 with duration greater than three hours. The treatment was **satisfactory in 97%** of the patients. After the first three months the improvement was maintained in **more than 90 %** of the patients. No muscle injuries were observed. Elastographic changes and improvement of muscle tone were detected by advanced ultrasound (elastography) in **95,2%** of patients.

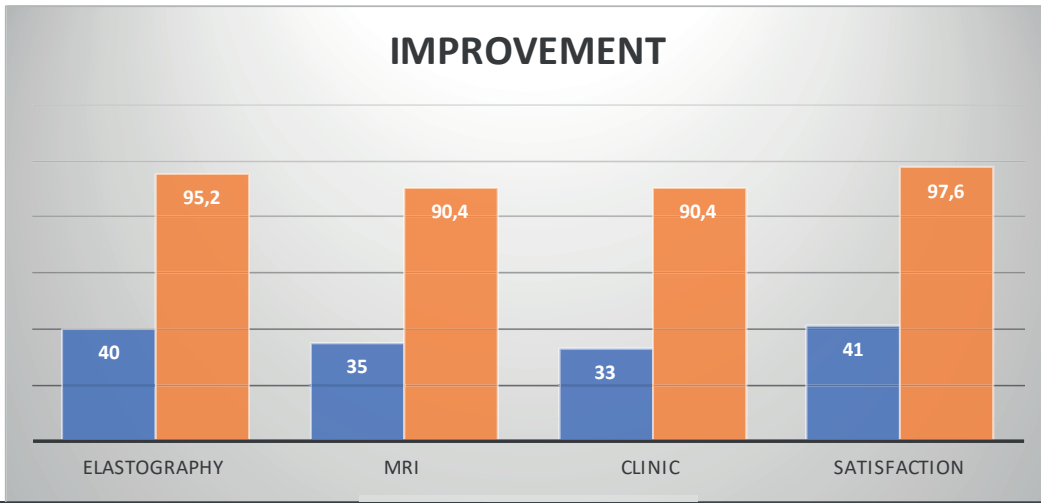
Conclusions: CONTICURE is safe, well tolerated and effective for the treatment of mild and moderate urinary incontinence. The observed elastographic changes demonstrate the improvement of pelvic floor muscle tone after treatment. A reduction in the symptoms of urinary incontinence was demonstrated.

RECOMMENDATIONS:

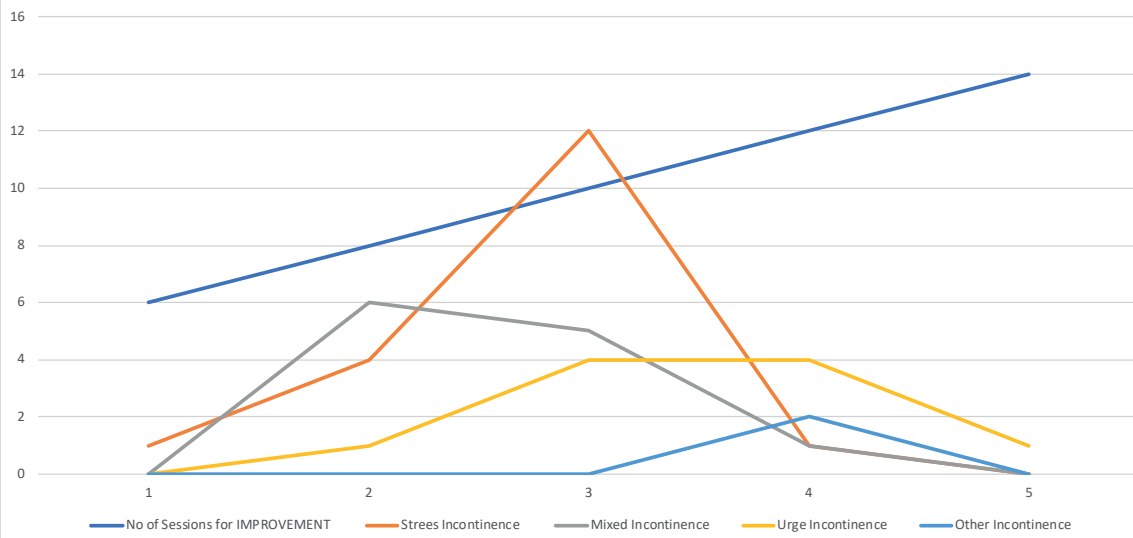
Continue increasing the number of cases for research and increase the variables that we have decided to incorporate in the next research section such as MRI and pressure calculation.



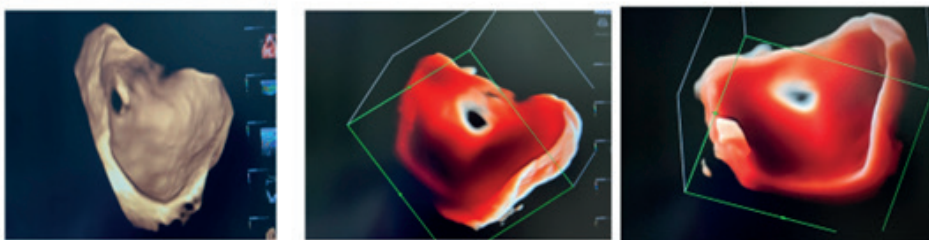
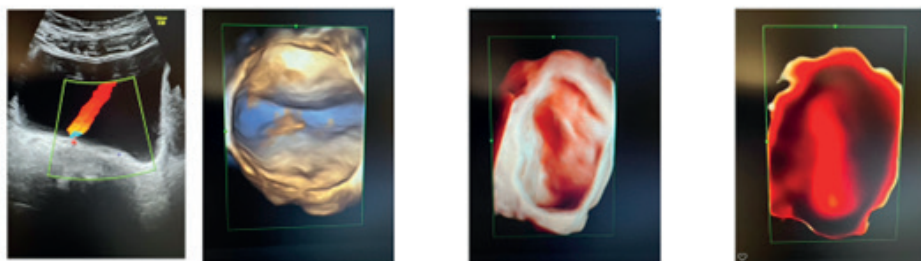
IMPROVEMENT



NO of Sessions for Improvement



MIXED INCONTINENCE ADVANCED ULTRASOUND EVALUATION

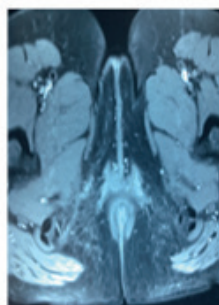
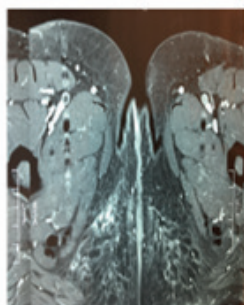
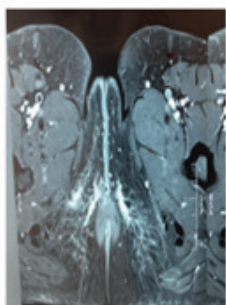


MRI EVOLUTION

INITIAL

AFTER 1 MONTH

AFTER 3 MONTHS





CIMEG MADRID CIMEG / ZIMMER MEDIZINSYSTEME

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