About Your SI Joint



The SI joints are located between the iliac bones and the sacrum, connecting the spine to the hips. The two joints provide support and stability, and play a major role in absorbing impact when walking and lifting. Strong ligaments and muscles support the SI joints. There is a very small amount of motion in the joint for normal body flexibility. As we age our bones become arthritic, ligaments stiffen, cartilage wears down and bones may rub together causing pain. In addition to age, SI joint pain can occur as the result of a fall, work injury, car accident, pregnancy and childbirth, or as a result of hip or spine surgery. Further, scientific data shows pain from the SI joint can feel like disc or lower back pain. For this reason, SI joint disorders should always be considered in lower back pain diagnosis.1 Consult your doctor to help distinguish if pain is from spinal disorders or SI joint dysfunction.

1. Weksler, Natan, et al. 2007. "The Role of Sacroiliac Joint Dysfunction in the Genesis of Back Pain: The Obvious Is Not Always Right." Archives of Orthopaedic and Trauma Surgery 127 (10): 885–88.



The PsiF_® system is intended to treat SI joint dysfunction from conditions associated with sacroiliac joint disruption and degenerative sacroiliitis by stabilizing the SI joint. Like any surgical procedure, there are potential risks associated with the PsiF_® system. It may not be appropriate for all patients and all patients may not benefit. Speak to your healthcare provider to learn more about SI joint disorders or contact Omnia Medical at (304) 413-4851 or visit www.OmniaMedical. com to learn more about the PsiF_® system.





Omnia Medical 6 Canyon Road, Suite 300 Morgantown, WV 26508 Ask your doctor about diagnostic and treatment options

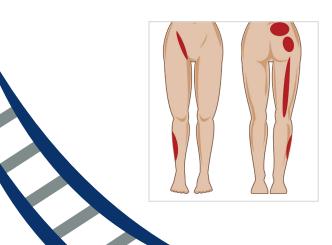
Sacroiliac (SI)
Joint Dysfunction



Do You Have SI Joint Dysfunction?

Do you experience one or more of the symptoms listed below?

- Lower back pain
- Sciatic-like pain in buttocks or down back of leg
- Hip/Pelvis/Groin pain
- Stiffness and reduced range-of-motion
- Pain climbing stairs, running or jogging
- Pain lying on one side
- Leg instability, numbness, weakness
- Disturbed sitting patterns
- Pain moving from sitting to standing
- Disturbed sleep patterns due to pain



Making a Diagnosis

A variety of tests performed during physical examination, including: FABER test, sacral thrust test, distraction test and palpation test all may help determine whether the SI joint is a source of your symptoms. Additionally, X-ray, CT and/or MRI may be helpful in the diagnosis of SI joint-related problems. The most reliable method to accurately determine whether the SI joint is the cause of your pain is to inject the SI joint with a local anesthetic. The injection will be delivered under fluoroscopic or CT guidance to verify accurate placement of the needle in the SI joint. If your symptoms are decreased by at least 75%, the SI joint may either be the source, or major contributor, to your lower back pain.

SI Joint Dysfunction Causes

There are several factors that can predispose someone to SI joint pain, most of which include forces that place a significant amount of stress to the joint. These include disruption of the lining of the joint, ligament injury, arthritis, spondyloarthropathy, trauma, infection, cystic disease, pregnancy, obesity, spinal deformities, previous spinal surgery, etc.

Important to note the following:

- □ 15-25% of patients presenting with low back pain actually have SI joint dysfunction ²
- Up to 75% of postoperative lumbar fusion patients will develop significant SI joint degeneration after 5 years 3

Treatment Options

Treatments for SI joint dysfunction typically focus on alleviating pain and restoring normal motion in the joint. Most cases are effectively managed using non-surgical treatments, including:

- Brief rest period of 1 to 2 days
- Applying ice or heat
- Pain medication
- Physical therapy
- Supports or braces
- SI joint injections
- Radiofrequency ablation

Surgery should only be considered if all non-surgical treatment options have been tried and do not provide relief. If surgery is needed, SI joint stabilization procedure can be performed to relieve your pain.

SI Joint Stabilization with PsiF®

PsiF allows your doctor to stabilize your SI joint from a familiar posterior approach by inserting strategically designed implants directly into the joint. The procedure is done through a small incision and typically takes less than one hour. Patient testimonials have demonstrated that treatment with the PsiF® system (available since early 2014) improved pain, patient function, and quality of life.

^{2.} Cohen SP. Sacroiliac joint pain: a comprehensive review of anatomy, diagnosis, and treatment. Anesth Analg, Nov '05, 101(5):1440-53

^{3.} Kee-Yong Ha, MD; Jun-Seok Lee, MD; Ki-Won Kim, MD. Degeneration of Sacroiliac Joint After Instrumented Lumbar cumbosacral Fusion: A Prospective Cohort Study Over Five-Year Follow-up. Spine. May '08, Vol 33-11, pp1192-1198