

# New Hope for Herniated Disc Patients

Significantly Reduce Your  
Risk of Reherniation and  
Repeat Surgery

**An Introductory Guide**

Actual  
Barricaid Patient



Get help  
**NOW**

**BARRICAID**<sup>®</sup>

## Introduction

If you are reading this pamphlet, you've just been informed you that you most likely have a herniated disc. In many cases, these ruptured discs can heal on their own through the right combination of physical therapy and injections. Often, however, a surgical procedure called a discectomy is required in order to relieve symptoms.

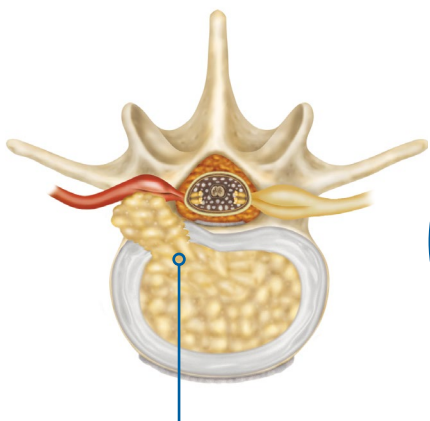


This guide will explain the symptoms of a herniated disc, surgical solutions, and provide an introduction to **Barricaid**, a preventive device that has been proven to prevent reherniations and reoperations.

## Common Symptoms

The most common symptoms of a herniated disc are associated with sciatic pain including:

- Weakness
- Tingling while walking
- Lower back and/or leg pain and numbness



Disc herniation causing pain



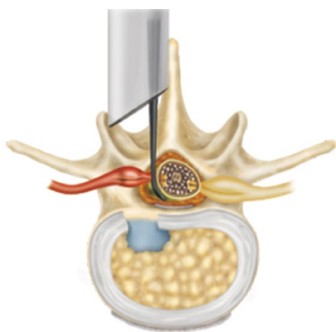
Herniation

## Causes

Your disc is made of a soft center cushion called a nucleus and a thicker outer ring called an annulus. A herniated disc occurs when an opening develops in the outer ring of the disc and tissue protrudes out of the opening. The tissue puts pressure on the nerves, causing pain.

## The Most Common Surgical Treatment: Discectomy

If non-surgical therapies have failed, a discectomy surgery is typically recommended. A lumbar discectomy is a surgical procedure that is performed to relieve back and leg pain caused by a herniated disc. The goal of the procedure is to remove the portion of the disc that is pressing against the spinal nerves.



Discectomy leaves a hole behind

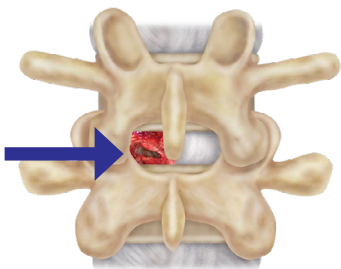
Through a small skin incision, the disc material pressing on the nerves is removed through the hole in the side of the disc caused by the herniation. After the discectomy procedure, the hole is traditionally left to scar over. This procedure is typically very successful in relieving pain and allowing patients to return to full activity.

## What Are the Risks of Discectomy?

If the size of the hole caused by the herniation is larger than the width of a standard pencil top eraser (approximately 6mm), patients are at a greater risk of reherniation and potential second operation. In fact, 73%<sup>1</sup> of all reoperations come from those patients with larger annular defects.

# 73%

of all reoperations  
come from large  
defects in the  
annulus.<sup>1</sup>



A large hole can allow for additional material to be pushed out causing:

- Repeat symptoms
- Repeat herniation
- Repeat operation
- Potential fusion

## Reherniation can be devastating



Dealing with the aftermath of a failed discectomy can be daunting. Meet Melanie...



I **wish** I could have **had the opportunity** to try Barricaid.



Hear Melanie's  
**STORY**

# Can My Surgeon Reduce the Risk of Reherniation and Return of Symptoms?

The good news is that a new surgical device was developed specifically to treat discs with large holes. The device is called Barricaid and is designed to reduce the risk of a return of symptoms and minimize the chance of a repeat surgery.

”

**Barricaid restored my existing disc... and I don't have to worry about reherniation.**



Hear Marc's  
**STORY**

Actual Barricaid Patient

# Barricaid is designed to prevent reherniation and repeat surgery.

## Barricaid:

- Creates a barrier that prevents additional disc material from reherniating
- Allows your surgeon to preserve more of your disc with less risk of reherniation
- Anchors to healthy bone
- Does not restrict motion

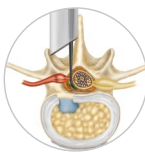


## How Barricaid Works:

Your surgeon will perform the following steps:

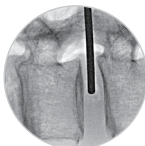
### Limited discectomy

Remove disc fragments.



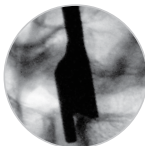
### Defect measurement

Measure size of annular defect with trials.



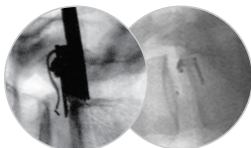
### Alignment Trial

Confirm access to the disc space with angle parallel to endplate.



### Implantation

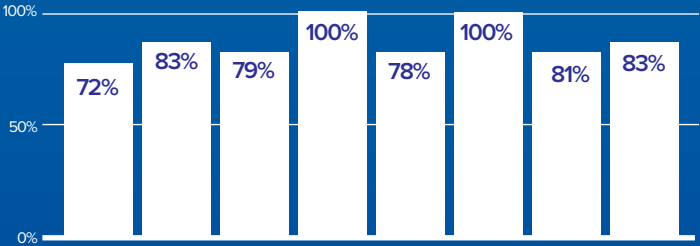
Insert Barricaid and confirm placement under x-ray imaging.



Watch Patient  
**VIDEO**

# Barricaid is proven superior to discectomy alone...

% Reduction in Reoperation to Treat Reherniations



**81% Reduction**  
In reoperations for reherniations<sup>2</sup>

<sup>2</sup>Some studies outside US indications. Values at Minimum 1 year PostOp. Minimum study size of 20 Barricaid patients.



For citations & published studies visit: [info.barricaid.com/8studies](http://info.barricaid.com/8studies)

One of the **most studied** devices in spine.

**70+**

peer reviewed clinical papers

**11,000+**

patients implanted

**FDA PMA**

approved

# Key questions about the Barricaid procedure

## **Is Barricaid safe?**

The Barricaid implant was rigorously tested in multiple clinical studies and approved for use by the U.S. Food and Drug Administration (FDA) through the PMA process which is the gold standard for measuring safety. Barricaid has been implanted in over 11,000 patients with follow-up durations as long as 10+ years.

It is important that you discuss all of the risks and benefits of Barricaid with your surgeon. For more information talk to your doctor or, to see for complete Safety Information, visit <https://www.barricaid.com/instructions-for-use>.

## **Is Barricaid Effective?**

Barricaid has been studied in 8 distinct study populations, including 2 Randomized Controlled Trials. The studies report that Barricaid provides an 81% reduction<sup>2</sup> in reoperations for reherniations.

## **Is there still a risk of reherniation and reoperation following a Barricaid surgery?**

No device can provide a 100% guarantee of effectiveness. Although Barricaid greatly reduces the risk of reherniation and associated reoperation rates, the risk is not reduced to zero. Your surgeon will provide post-operative instructions to follow to ensure you receive the best possible outcomes.

## **Will Barricaid change my recovery time or post-surgery therapy?**

Clinical studies showed that recovery outcomes were similar between discectomy surgeries with or without Barricaid. But because Barricaid provides protection against reherniation, patients are often able to return to work faster than traditional discectomy patients. In fact, a recent study has shown that 92% of Barricaid patients are back to work within 90 days<sup>3</sup>.



”

This is it.  
Exactly what I was  
looking for.



Hear Diego's  
**STORY**

Actual Barricaid Patient

### **Will my insurance cover Barricaid?**

Nearly all insurance companies cover discectomy procedures. Barricaid is in addition to the discectomy procedure and requires additional approval. Since Barricaid is a new and innovative treatment option, some insurance companies may not be familiar with Barricaid and may require additional information.

The Patient Service Advocates are here to guide you, your surgeon, and your insurance company to navigate the prior authorization process. Health insurance policies vary and the authorization process can be unique to each patient. Ask your surgeon for more information about our Patient Journey Program or contact us directly through [www.barricaid.com](http://www.barricaid.com) to get started.

### **Will Barricaid set off a metal detector?**

It is highly unlikely that Barricaid will be detected by a metal detector. The metal portion of the device is smaller than most shirt buttons and is made of titanium which is less likely to set off the detector than other metals<sup>4</sup>.

### **What are patients and surgeons saying about Barricaid?**

Scan QR code to view patient testimonial and surgeon explanation videos.



Scan for  
**FAQS**

**Designed to**



## **Every patient is unique**

Your lifestyle, job, activities, pain tolerance, body type, and defects in your spine are part of your unique profile. It is important that you and your surgeon discuss all of the benefits, risks and alternatives to spine surgery so that you may make an informed decision about the best treatment option for you.

## **Is Barricaid another form of fusion?**

Barricaid is significantly different from fusion. In a standard lumbar fusion, two vertebrae are joined together with metal hardware and interbody spacer that promote bone bridging to lock the spinal segment. Barricaid is a non-fusion device that is only anchored to one vertebral body and moves with the patient providing unrestricted motion.

## **Talk to an Expert**

If you have any questions about the Barricaid treatment or how to get access to Barricaid, you may ask your doctor or contact the a Patient Journey Team Member at [www.barricaid.com](http://www.barricaid.com).

# Prevent Reherniation and Repeat Surgery



**GOAL:**

# Make Your First Surgery, Your Last



Get help  
**NOW**

<sup>1</sup>J Bone Joint Surg Am. 2003 - Carragee, et al

<sup>2</sup>Some studies outside US indications. Values at Minimum 1 year PostOp. Minimum study size of 20 Barricaid patients.

<sup>3</sup>Nunley, et al 2023

<sup>4</sup>Fabricant et al, 2013

For more information talk to your doctor or, to see for complete Safety Information, visit <https://www.barricaid.com/instructions-for-use>

**Intrinsic Therapeutics, Inc.**

30 Commerce Way

Woburn, MA 01801 USA

+1 781 932 0222

[info@barricaid.com](mailto:info@barricaid.com)

[www.barricaid.com](http://www.barricaid.com)

®Registered trademarks of Intrinsic Therapeutics, Inc.

©2024 Intrinsic Therapeutics, Inc. All Rights Reserved.

LT65-A-EN Rev. B