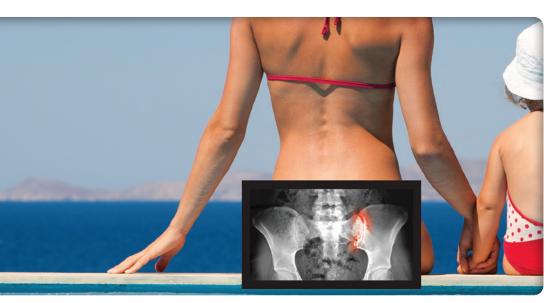
# Postpartum Pelvic Girdle Pain and the SI Joint





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**Postpartum Pelvic Girdle Pain (PPGP)** 

Persistent pregnancy-related lower back pain and pelvic girdle pain (or postpartum pelvic girdle pain, PPGP) is a major health issue among postpartum women.<sup>1</sup>

#### **PREVALENCE**

About 50% of women have pelvic girdle pain **during** pregnancy and approximately 25% experience pain **after** pregnancy.<sup>2</sup>

Approximately 5% of all pregnant women continue to have pain (PPGP) 3 years following delivery.<sup>3</sup>

The pain may be due to **sacroiliac joint dysfunction**.



### Sacroiliac (SI) Joint Pain

#### SYMPTOM PRESENTATION

SI joint pain is a component of pelvic girdle pain and is primarily located between the posterior iliac crest and the gluteal fold. Symptoms may include:

- Lower back pain (below L5)
- Sensation of lower extremity: pain, numbness, tingling, weakness
- Pelvis / buttock pain
- Hip / groin pain
- Disturbed sleep patterns due to pain
- Feeling of leg instability (buckling, giving way)
- Disturbed sitting patterns (unable to sit for long periods, sitting on one side)
- Pain going from sitting to standing
- Sciatica like symptoms



#### **DIAGNOSIS**

*Provocative Tests* <sup>5,6</sup> followed by *Diagnostic Injection(s)* <sup>7</sup> when indicated, are recommended to confirm pain is coming from the SI joint.



# SI JOINT DIAGNOSTIC INJECTIONS 7.8



- Fluoroscopic guidance
- 0.3 0.5 cc contrast medium
- 1.4 2.0 cc local anesthetic
- Post-injection pain reduction
   ≥ 50% SI joint is likely the source of pain
   < 50% Should consider other pain</li>
  - < 50% Should consider other pain sources, but SI joint may be a component

#### **Treatment**

#### **NON-SURGICAL MANAGEMENT**

Treatment goals for SI joint pain include reducing symptoms and improving patient function.

Non-surgical treatment options may include:

- Oral pain medications (NSAIDs, opioids, etc.)
- SI belting
- Physical therapy
- Therapeutic SI joint injections

#### **SURGERY: SI JOINT FUSION**

If a patient experiences ongoing or recurrent pain, this may be due to an underlying disruption. For chronic PPGP lasting >6 months due to a sacroiliac joint disruption, fusion of the sacroiliac joint may be an option.<sup>9</sup>



## iFuse Implant System®-Minimally Invasive SI Joint Fusion

Patients refractory to non-surgical management may benefit from minimally invasive surgical (MIS) fusion of the SI joint. The iFuse Implant<sup>™</sup>, with its patented triangular implant design, has **demonstrated positive clinical results.** Multiple published, peer-reviewed articles demonstrate the safety and effectiveness of the iFuse Implant, including results from prospective multicenter clinical trials. The iFuse Implant is the only SI joint device system with multiple prospective clinical studies demonstrating that treatment improved pain, patient function, and quality of life.



#### **Unique Triangular Design**



- Triangular implant profile minimizes rotation and an interference fit minimizes micromotion
- Porous surface area allows for bony ingrowth/ongrowth<sup>15</sup>
- Rigid titanium construction and implant geometry provide immediate stabilization

#### Postpartum Patients Treated with iFuse\* Early and Sustained Pain Relief 0=No Pain: 10=Worst pain imaginable Pain Improvement 9 /AS SI Joint Pain, mean 8 7 6 3.6 3.1 3 1.7 12 24 Months Months after surgery

\*Subset analysis of patients whose pain began in the peripartum period (n=20) from a prospective, multicenter trial. 13,14

If you have patients with PPGP and suspect that their SI joint might be the cause of the pain, please visit si-bone.com/find-a-doctor to find a surgeon trained in SI joint diagnosis and treatment with the iFuse Procedure.

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A list of additional published studies is available at www.si-bone.com/results

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For information about the indications and intended use, visit www.si-bone.com

There are potential risks associated with the iFuse Implant System. It may not be appropriate for all patients and all patients may not benefit. For information about the risks, visit www.si-bone.com/risks

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