EDEN™ EPIDURAL CATHETER SYSTEM

Eden Epidural Catheter System provides safe treatment and reliable performance.

Line of Products

- EDEN™ Epidural Catheter System
- Spinal implant
  - PLIF CAGE (PEEK, Titanium) / Cervical Cage (PEEK, Titanium) / Expandable Cage (PEEK, Titanium)
  - Spinous – Twins
  - ISS (Interspinous Support System)
- Double arm needle (Meniscus Repair Suture needle)
- ACL / PCL Implant
  - Cancellous screw / Cannulated cancellous screw
  - Interference screw
  - Spiked washer

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**Why get an Epidural Medication Injection Treatment?**

Epidural medication injections have been performed for many decades, and are generally considered as a very safe and effective treatment for back and leg pain or neck and arm pain. Medication placed into the epidural space have a very potent anti-inflammatory action that can decrease pain and allow patients to improve function. Although medication do not change the underlying condition, they can break the cycle of pain and inflammation and allow the body to compensate for the condition. In this way, the injections can provide benefits that outlast the effects of the medication itself.

**Who is beneficiary?**

**Spinal stenosis**
A narrowing of the spinal canal and nerve root canal can cause back and leg pain, especially when walking.

**Spondylolysis**
A weakness or fracture between the upper and lower facets of a vertebra. If the vertebra slips forward (spondylolisthesis), it can compress the nerve roots causing pain.

**Herniated disc**
The gel-like material within the disc can bulge or rupture through a weak area in the surrounding wall (annulus). Irritation, pain, and swelling occur when this material squeezes out and comes in contact with a spinal nerve.

**Degenerative disc**
A breakdown or aging of the intervertebral disc causing collapse of the disc space, tears in the annulus, and growth of bone spurs.

**Sciatica**
Pain that courses along the sciatic nerve in the buttocks and down the legs. It is usually caused by compression of the 5th lumbar or 1st sacral spinal nerve.

**How are Epidural Injection performed?**

There are three common methods for delivering medications into the epidural space: the interlaminar, caudal, and transforaminal approaches. All three approaches entail placing a thin needle into position using fluoroscopic (x-ray) guidance. The injections can provide patients with improvement in pain and function that last several months or longer. If patients get significant benefit, the injections can be safely repeated periodically to maintain the improvements. Injections are also commonly coupled with other treatments (medications, physical therapy, etc) in an attempt to either maximize the benefit or prolong the effects.

**What is the benefits to open surgery?**

- Patients can usually return to pre-injection level of activities the following day, and undergo the injection using only local anesthetic at the skin.
- The incidence of postoperative respiratory problems and chest infections can be reduced.
- The incidence of postoperative myocardial infarction (heart attack) can be reduced.
- The stress response to surgery can be reduced.
- The risk of postoperative complications & aftereffect can be reduced.
EDEN Epidural Catheter System

- is for the patient who requires more than standard epidural catheter for pain control.
- assures better patency for over extended use and column strength necessary for directionability.
- provides high compression strength to resist collapsing by combination of smooth & durable polymer exterior and an inner spiral wound stainless steel helix.

EDEN Epidural Catheter System Specification:

- EDEN™ Epidural Catheter for Lumbar
  Catheter 19Gauge / Troca 15Gauge / Length Approx. 600mm
- EDEN™ Epidural Catheter for Cervical
  Catheter 21Gauge / Troca 18Gauge / Length Approx. 305mm

Contraindication; Circumstances in Which Epidural Injection should not be treated

- Lack of consent
- Bleeding disorder (coagulopathy) or anticoagulant medication (e.g., warfarin) - risk of spinal cord compressing hematoma
- Infection near the point of intended insertion
- Infection in the bloodstream which may “seed” via the catheter into the central nervous system (otherwise relative impervious)
- Uncorrected hypovolemia (low circulating blood volume)
Treatment Procedure

1. Trocar placement
The needle tip is advanced into the hiatus. The most convenient approach is through the sacral canal.

2. Catheter introduction
A Spring reinforced, EDEN Catheter is introduced

3. Catheter placement
Using fluoroscopic guidance, the Catheter is directed toward the target. The catheter is advanced near the midline and steered slowly so it does not bounce off the sidewall of the sacrum.

4. Anterior lateral catheter position through fibrosis
The painful nerve is approached with slow, deliberate movement.

5. Treatment location
The catheter is in place.

6. Infusion
The medication is injected to the target. Epidural space is so unique where a small volume of medication goes a long way.