



A new approach to chronic pelvic and Interstitial Cystitis (IC) pain.

How can an IF 3WAVE device help relieve chronic pelvic and/or Interstitial Cystitis (IC) pain?

Interferential (IF) stimulation is a form of electrotherapy. IF delivers a strong current with minimal skin resistance providing maximum energy for deep penetration.

Interferential stimulation is believed to work in two ways: by blocking pain messages or releasing endorphins, the body's natural pain relievers.

The IF 3WAVE, with its IC pain treatment setting, was designed to help alleviate pain by providing an electrical impulse that travels through the skin into the peripheral nervous system. Lead wires carry the stimulus to conductive patches placed on the skin. The IF 3WAVE is convenient and easy to use. It offers patients suffering from IC a non-invasive, non-systemic treatment for pain. This portable device can be used at home or on the go with a preset program designed for IC pain.

About chronic pelvic pain and Interstitial Cystitis (IC)

Interstitial Cystitis (IC) is a painful, chronic inflammatory condition that affects more than one million women, men, and children in the United States. For many people with IC, abnormal muscle spasms can cause severe pain and discomfort.

Electrical stimulation warnings and contraindications*

- Do not use if you have a pacemaker or demand type defibrillator
- Do not place electrodes near the heart or on the head
- Do not place electrodes near the carotid sinus regions (front of neck)
- The safety of TENS/IF during pregnancy has not been established
- Do not use with other electronic monitoring equipment
- Only use as prescribed by your physician
- Keep out of reach of children

For other Warnings/Contraindications refer to the instruction manual that comes with the device.

If you need supplies or have questions on the equipment call 1.800.328.2536.



Empi, Inc.
599 Cardigan Road
St. Paul, MN 55126-4099 USA
1.800.328.2536
Call 1.800.328.2536 or visit www.empi.com

Caution: Federal law restricts this device to sale by or on the order of a physician.
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IF 3WAVE

Chronic pelvic floor dysfunction and/or Interstitial Cystitis (IC) pain

Electrode Placement

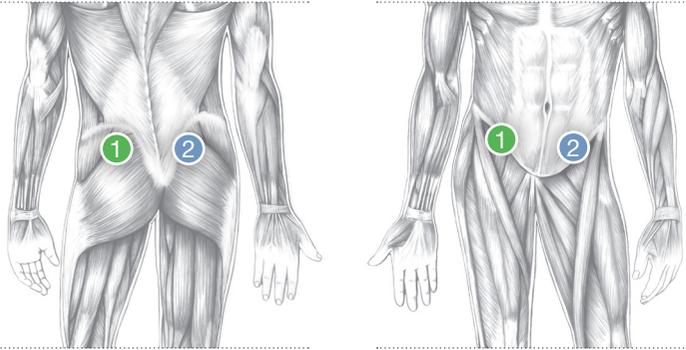
1. Connect lead wires and place electrodes

Electrode Placement Option 1: Use 2" x 2" electrodes.

Channel 1: Place one electrode on the left sacroiliac joint (near the left "dimple" on lower back) and one electrode above the right side of the pubic bone.

Channel 2: Place one electrode on the right sacroiliac joint (near the right "dimple" on lower back) and one electrode above the left side of the pubic bone.

ELECTRODE PLACEMENT OPTION 1:



Electrode Placement Option 2: Use 2" x 2" electrodes.

In some patients, the nerve to target is the pudendal nerve (a branch of "S2"). This is most common in women who feel most of their pelvic pain in the vaginal and urethral areas. In this configuration, the electrodes will generate a current forming a crisscross, with the middle of the "X" situated at the top of the opening of the vagina at the clitoral hood.

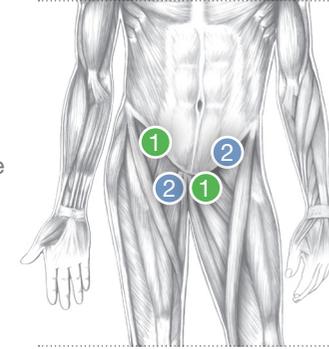
NOTE: In patients who have pain in both the lower abdomen and in the vaginal area, consider alternating option 1 and option 2 electrode placements.

Electrode Placement Option 2 continued

Channel 1: Place one electrode on the abdomen immediately above the right edge of pubic bone and one electrode on the top of the left inner thigh.

Channel 2: Place one electrode on the abdomen immediately above the left edge of the pubic bone and one electrode on the top of the right inner thigh.

ELECTRODE PLACEMENT OPTION 2:



2. Turn on device by pressing the center on/off button

3. Select treatment mode/setting for IF → IC pain

Duration of treatments: Use up to 3 times per day on the "IF continuous" setting, 40 minutes per session or as needed for symptom management.



A Physician's Input:

Dr. Daniel Brookoff

Pelvic Floor Dysfunction is a condition in which abnormal spasms occur in the group of muscles collectively called the pelvic floor muscles – often also associated with IC. These 40 different muscles form a "hammock" to support and control the opening, closing, and filling functions of the organs in the pelvis, including the rectum, urethra, vagina, and urinary bladder. The pelvic floor muscles extend from the pubis to the lower back.

What are the symptoms of PFD?

These abnormal spasms of the pelvic floor can feel different for men and women.

For women, symptoms might include:

- Bladder pain
(burning or pain with urination)
- Frequency
(urge to urinate when you don't have much urine in your bladder, needing to awaken at night to urinate)
- Difficulty urinating
(needing to bear down, push the abdomen, or sit forward on the toilet in order to urinate)
- Vaginal pain
(especially during or after pelvic exams, during or after intercourse, or with exercise)
- History of severe menstrual symptoms
(missing work or school due to menstrual pain; needing narcotics for pain)

For men, symptoms might include:

- Genital pain
- Prostate pain
- Testicular pain

Both men and women may report these symptoms:

- Pain in the rectal area and lower back
- History of chronic constipation which doesn't respond to fiber supplements
- A compelling urge to urinate even when the bladder isn't full. In severe cases, people have described feeling "like they're pushing against a locked door" when they try to urinate or have a bowel movement.

Common treatments for Pelvic Floor Dysfunction

Until recently, people suffering from PFD or IC had only a few treatment options including:

- Muscle-relaxing drugs which relieve spasms, but cause intolerable sleepiness
- Pelvic floor massage, which needs to be done by trained therapists
- Narcotics which impair day-to-day motor functions
- Surgical implantation of electronic neurostimulators to relax affected muscles

IF 3WAVE Interferential Stimulator-treatment option for PFD and IC without drugs or surgery

The IF 3WAVE delivers electrical stimulation to muscles which, when used effectively, can: bring relief to PFD and IC sufferers and, over time, can even prevent pelvic floor muscle spasms.

The IF 3WAVE is completely external and portable so it can be worn at work or at home.

While most people feel increasing relief while using their stimulators, the real goal is to start feeling better even after the stimulator is turned off, which is called "residual relief." For most people, this starts to happen after a few weeks of wearing the stimulator.

The IF 3WAVE can be worn as long as it is giving comfort. The wearer can continue 40-minute sessions all day long, except while in the shower or bathtub. When going to the bathroom to urinate or have a bowel movement, many patients find turning the machine a little higher for five minutes before will take the edge off and allow them to completely empty their bladder or rectum.

Trouble shooting

- Tingling sensations on inner thighs in the S2 configuration: This means the lower electrodes have been placed too close to the nerves. Turn the machine off, and move the leads toward the center until the sensation stops.
- If IF 3WAVE causes pain at the site: in rare instances, if the pain is caused by another abnormality, such as a surgical scar, the stimulator will not be useful and should be turned off and a doctor should be consulted.
- Safety lock turns on: The safety lock turns on automatically if it's left at the same level for 30 seconds. This feature keeps the stimulator from changing settings if accidentally bumped. To unlock, hold down both the right and left "up" buttons until the picture of the padlock on your screen disappears.

The above information is provided by Dr. Daniel Brookoff, a pain management physician at the Center for Medical Pain Management in Denver, Colorado.