SphenoCath

SphenoCath Solution

Medical science has attempted to “reset” chaotic signal impulse conduction in the Sphenopalatine Ganglion (SPG) for over 100 years. **SPG/V2 neuralgia** has been linked to painful conditions such as episodic &chronic migraine , trigeminal neuralgia, upper plate dental pain & atypical facial neuropathies.

When the SPG circuit is “rebooted” with a common local anesthetic (i.e.2% Lidocaine) normal autonomic functions (such as homeostasis of cerebral flood flow) are restored. Additionally, the SphenoCath provides local anesthetic egress to V2, providing central desensitization of hyperactive trigeminal mediated pain pathways.

Before the SphenoCath, SPG circuit blockade involved painful, poorly reproducible, and technically challenging procedures. Now, a specially designed catheter gives health care providers unprecedented access to the entire SPG circuit and bilateral V2 blockade with a safe and simple procedure that can be performed without sedation.

This simple procedure is effective in providing **immediate and long-term** relief from SPG/V2 related conditions! (Central Dysautonomia)

SphenoCath

The Pain Management Problems

Many millions of Americans suffer from **episodic & chronic migraine** and **cluster headaches**, resulting in 150 million work days lost every year, costing Americans over $10 Billion in direct costs, annually.

Additionally, **atypical facial pain, pain from failed dental procedures, and trigeminal neuralgia** result in untold additional suffering nationally and world-wide.

Sadly, treatment options for these patients have not kept pace with treatment advancements in other areas of medicine.

Conventional pain management strategies are largely ineffective, contraindicated to a significant subset of sufferers. Leading prescription drugs may only provide marginal relief with significant costs and/or side-effects, which can adversely impact quality of life.

Nearly two-thirds of patients who suffer from these painful conditions discontinue prescription medications due to inadequate relief and side-effects!

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Getting serious about managing pain!

Finally!

Effective Spheno Palatine Ganglion (SPG) circuit Block!

(at a fraction of the cost, and patient discomfort)

Brought to you by
Dolor Technologies LLC

SphenoCath

The Device

The SphenoCath is composed of a semi-rigid ticothane, and tico-tungsten sheath (gray) with an inner, pliable catheter and hub (purple—shown extended, above).

- The SphenoCath is a registered FDA Catagory-1 trans nasal drug delivery device.
- The SphenoCath is specifically designed to facilitate the delivery of local anesthetic to the para-sympathetic, sympathetic, and V2 maxillary divisions of the head's principle autonomic pathways!
- The SphenoCath allows SIMULTANEOUS drug delivery access to the bilateral Sphenopalatine Ganglia (SPG), V2, and associated fibers involved with the entire SPG circuit: A feat not achievable with trans-nasal pledget (Q-tip), or infrazygomatic long needle approach, alone.

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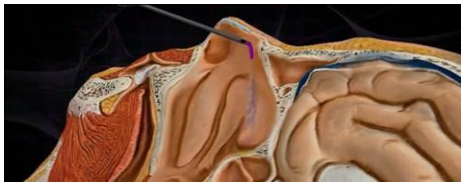
The Procedure

With the patient in supine position, the device is inserted into the nasal cavity until reaching the superior aspect of nasal bone .(catheter not yet extended).

The device is then withdrawn 1 CM.



The inner catheter is extended and the local anesthetic is delivered. The procedure is repeated in the other nostril, and the patient remains in place for 7-10 minutes to maximize mucosal absorption.

SphenoCath

Safety and Efficacy

Careful tracking of procedural endeavors throughout the US and beyond demonstrates exceptional patient tolerance and no reported severe adverse events or reactions.

- Some patients may notice a metallic taste from the Lidocaine during the procedure.
- Some patients may experience slight perceived difficulty swallowing, during the procedure, due to SENSORY numbness in the throat. (Verbal reassurance will usually suffice, but a sip of liquid with flexible straw, so that patient positioning is uninterrupted is fine.)

Please visit www.sphenocath.com for a short 4 minute video on the SPG Block Procedure.

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