

News Release

For Immediate Release

NEUROSTIMULATION EMERGES AS AN ALTERNATIVE TO OPIOIDS

***More Physicians Seek Interventional Therapies for Acute and Chronic Pain;
Top Pain Doctors Praise New Peripheral Nerve Stimulation System from SPR Therapeutics***

Global Neuromodulation Market to Hit \$7 Billion by 2018

CLEVELAND – October 5, 2016 – Pain physicians in the United States are turning to neurostimulation to treat chronic and acute pain in an effort to combat the opioid epidemic. The global neuromodulation devices market is expected to reach \$7.07 billion by 2018, up 270 percent from 2011, according to a recent report by Transparency Market Research. Neurostimulation is a drug-free therapy that uses mild electrical pulses to activate and stimulate nerves to achieve pain relief.

“We’re seeing a greater desire among physicians to use drug-free therapies such as neurostimulation for the relief of chronic and acute pain,” said Maria Bennett, SPR® Therapeutics Founder, President and CEO. “Opioids have almost no long-term efficacy data and are known to cause abuse, addiction and death. Neurostimulation is a safe, effective treatment for sustained pain relief.”

The annual cost of chronic pain in the United States is as high as \$635 billion a year, which is more than the yearly costs for cancer, heart disease and diabetes according to a study by the Institute of Medicine of the National Academies. Currently, opioids are the primary treatment option for moderate-to-severe chronic and acute pain. However, innovative technologies like the FDA-cleared SPRINT™ Percutaneous Peripheral Nerve Stimulation (PNS) System from SPR Therapeutics, are offering physicians important drug-free treatment alternatives as attested to by the physicians below:

“As part of a study, the SPRINT PNS System was used on ten patients who underwent total knee arthroplasty. With SPRINT, patients reported average pain relief of 75 percent. Not only does this therapy help patients immediately with their pain, but by helping patients earlier in the pain continuum, we may be able to prevent acute pain from becoming chronic, which costs our healthcare system billions of dollars annually. SPRINT has the potential to revolutionize the way we treat pain.” -- Brian Ilfeld, MD, MS, Professor of Anesthesiology, University of California San Diego

“SPRINT is demonstrating impressive clinical results for the low-back pain patients I’ve treated using the system. Patients find the system easy to use and the therapy comfortable. In the patients I’ve treated to date we’ve seen significant and sustained pain relief. One patient I treated had been taking opiates prior to device placement and I’m pleased that she is no longer using them to manage her pain. Results from a recent survey indicated that 61% of pain management physicians surveyed would use a therapy with the properties of SPRINT to replace opiates in their practices. We are in desperate need of better non-opiate therapies.” -- Christopher Gilmore, MD, Clinical Associate Professor, Wake Forest University Baptist Medical Center

“As someone who has been pursuing research in this area for more than 20 years, I’m very pleased the SPRINT System is finally available to my patients outside of clinical trials. Across multiple pain indications, 72 percent of clinical trial participants have experienced a 50 percent or greater reduction in pain intensity or pain interference with daily activities using SPRINT. Adverse events have included skin irritation, erythema, a blister, or a mild skin tear. The majority of the adverse events have resolved with little to no intervention and resolved within a few days, and none have been classified as serious. I’m delighted to see the lives of my patients and their families changed as a result of this novel technology.” -- John Chae, MD, Professor and Chair-Physical Medicine & Rehabilitation, Case Western Reserve University; Medical Director-Neuromusculoskeletal Service Line – MetroHealth System; Member – National Academy of Medicine (formerly, Institute of Medicine)

“SPR’s percutaneous PNS is the right science at exactly the right time. SPRINT appears to be an effective and innovative pain-relief therapy that could provide hope to millions of chronic pain sufferers. If we are to find our way out of this opioid crisis, it is imperative that health insurance companies put patients first and reimburse promising technologies, including SPRINT.” -- Peter S. Staats, MD, MBA, Adjunct Associate Professor, Johns Hopkins University; Chair, Board of Examination, World Institute of Pain; immediate past-president of the American Society of Interventional Pain Physicians

The SPRINT PNS System includes a threadlike lead and a wearable stimulator about the size of an Apple Watch® device. The lead is placed percutaneously, or through the skin, via a fine needle and connects externally to the wearable stimulator. The stimulator delivers electrical stimulation through the lead, which activates peripheral nerves to achieve pain relief.

SPRINT is unique in that it enables lead placement as far as two to three centimeters from the targeted nerve, allowing physicians to preferentially stimulate specific fibers of the nerve to maximize pain relief. This innovative approach to PNS does not require surgery or a permanent implant, meaning there is no tissue destruction as the system is designed to be withdrawn at the end of the treatment period.

A physician can place the system during a short outpatient procedure without anesthesia. Because SPRINT is minimally invasive and completely reversible, physicians may use it earlier in a patient’s treatment process in an effort to reduce or eliminate the need for opiates and to avoid costly alternatives in managing acute and chronic pain.

To learn more about percutaneous peripheral nerve stimulation, visit www.sprtherapeutics.com.

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About SPR® Therapeutics

SPR Therapeutics (www.sprtherapeutics.com) has developed a proprietary percutaneous peripheral nerve stimulation platform intended to address the critical unmet need for non-opioid, minimally invasive, reversible, and cost-effective treatments for acute, post-operative and chronic pain.

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