



Durable Multi-Year Relief of Shoulder Pain Following 60-Day PNS Treatment: A Cross-Sectional Follow-Up Survey Study

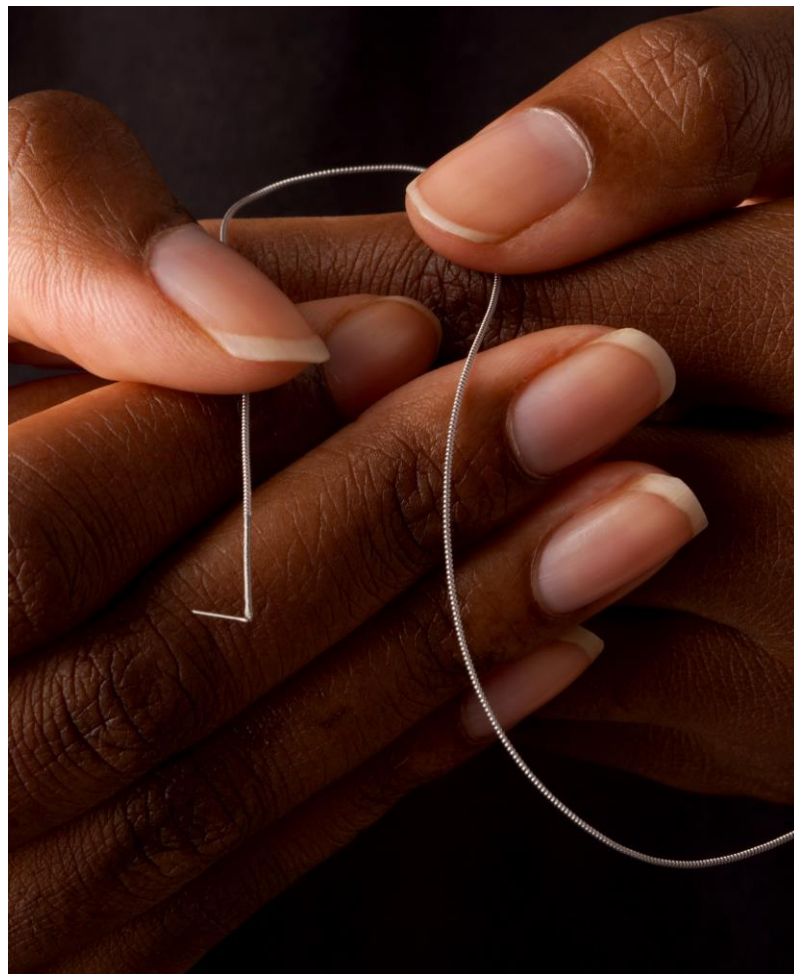
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BACKGROUND

- Shoulder pain is highly prevalent and can become chronic and disabling.^{1,2}
- Minimally invasive interventions that provide durable relief can improve outcomes while helping avoid costly and higher risk procedures.^{3,4}
- Real-world data can help elucidate the impact of treatments in routine clinical care.⁵
- The present survey study sought to evaluate durability of shoulder pain relief following percutaneous 60-day peripheral nerve stimulation (PNS) treatment.

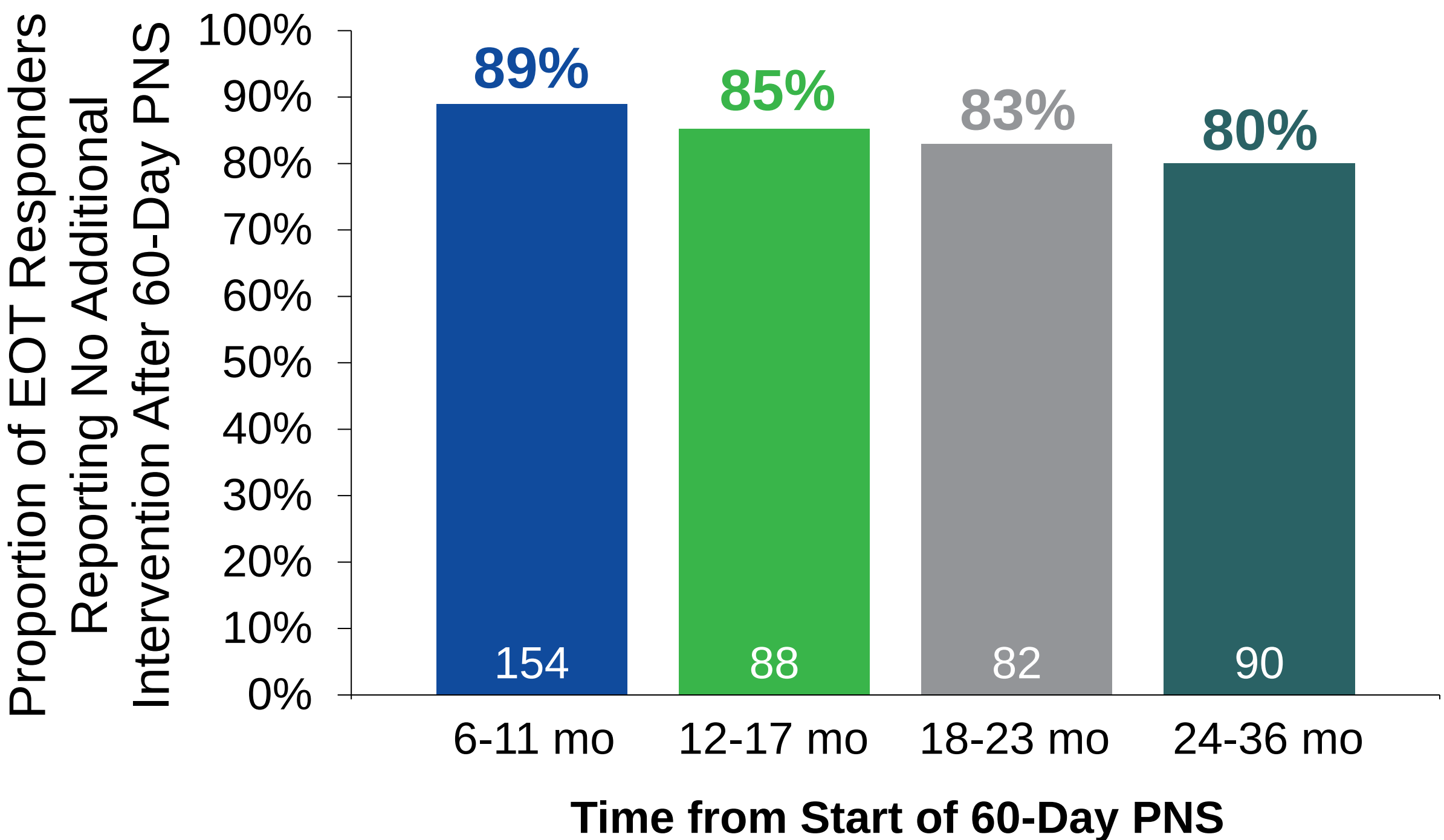


METHODS

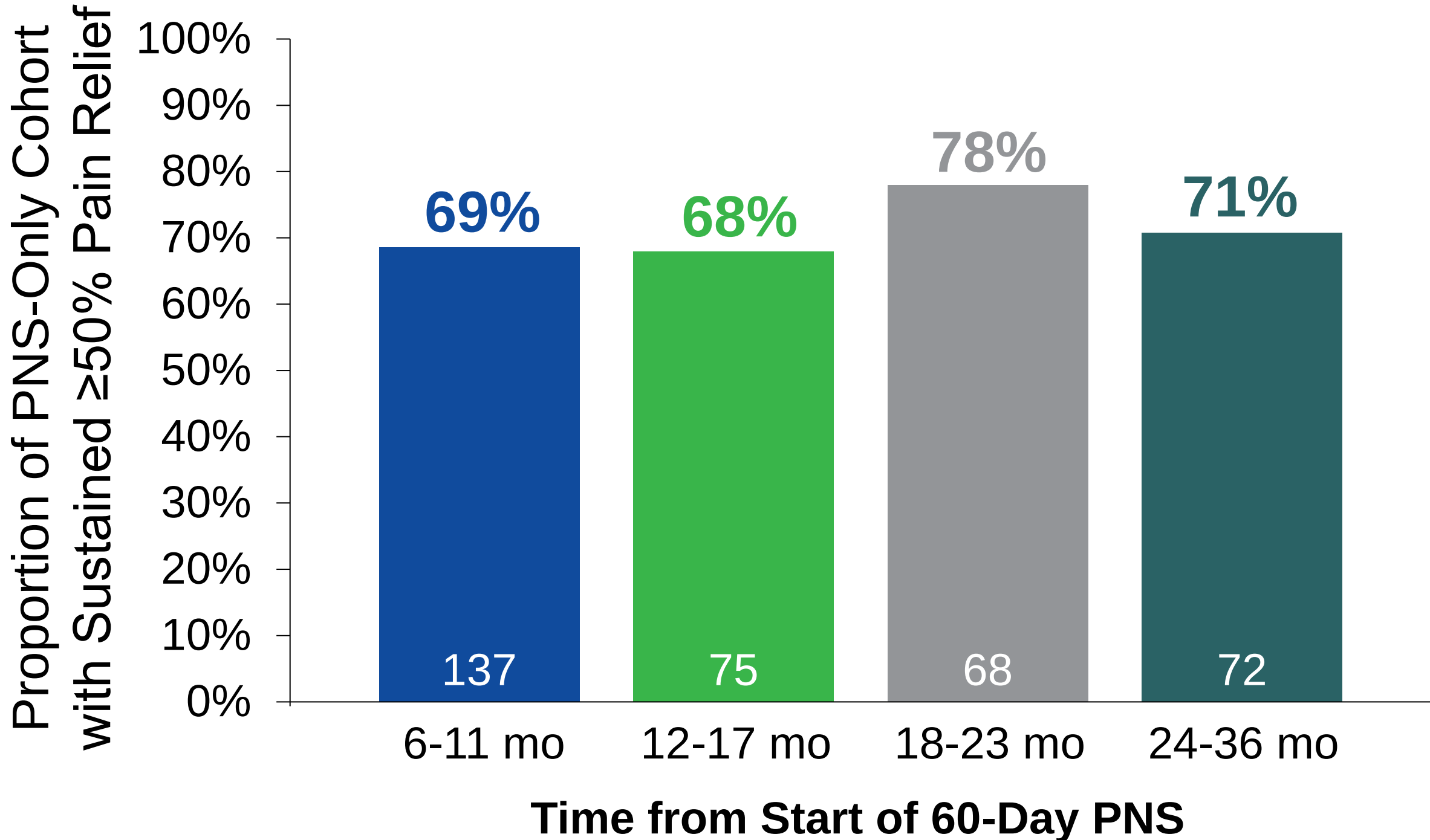
- IRB-approved cross-sectional follow-up survey of patients who:
 - underwent 60-day PNS treatment of shoulder pain
 - were at least 6 months from the start of treatment
 - responded with $\geq 50\%$ pain relief at the end of treatment (EOT)
- Outcomes included patient-reported percent pain relief, average and worst pain scores, and patient global impression of change (PGIC) in quality of life, physical function, and sleep.
- Patients also reported on the use or avoidance of other treatments and interventions for their shoulder pain since the 60-day PNS treatment including any new or changes in medications.
- Data are presented as mean $\pm$ SD.

RESULTS

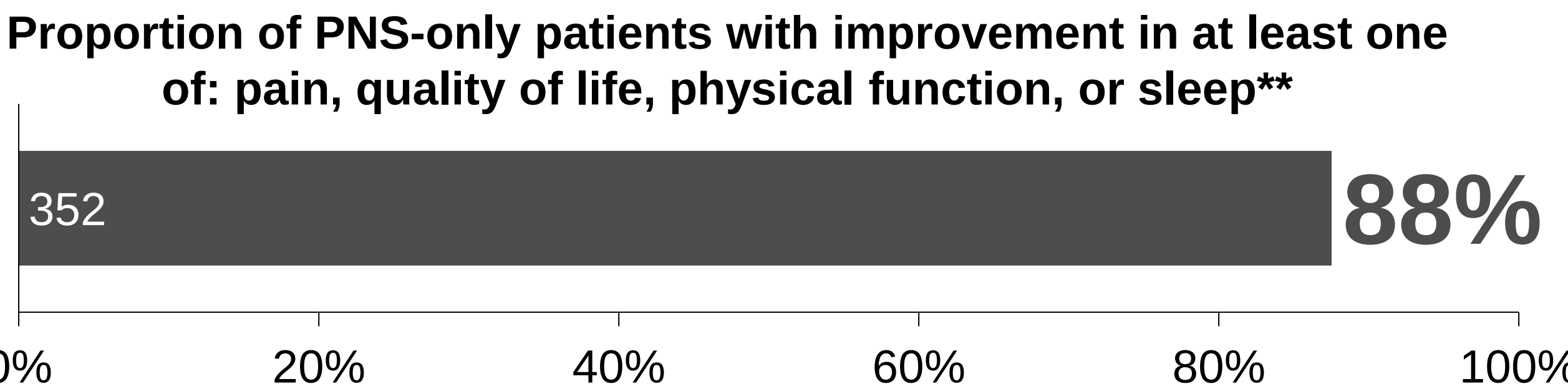
85% (352/414) of patients reported no additional interventions* after 60-day PNS (“PNS-only”).



Among PNS-only patients, 71% (249/352) were durable responders with $\geq 50\%$ pain relief at the time of follow-up.



Additional outcomes in the PNS-only cohort:



78% Mean pain relief among durable responders with $\geq 50\%$ pain relief (n=249)

65% Proportion reporting reduction or cessation of medications at follow-up (211/323)

*Additional interventions following PNS defined as radiofrequency ablation (RFA), permanent stimulator implantation (e.g., PNS, SCS), or shoulder surgery.
**Pain = $\geq 50\%$ patient-reported percent relief; quality of life, physical function, or sleep = ≥ 1 on a PGIC scale from -3 to +3 where 0 is no change.

Demographics	
N	414
Sex	65% F
Age	66.6 $\pm$ 13.3
Baseline Average Pain	6.0 $\pm$ 1.9
Baseline Worst Pain	8.7 $\pm$ 1.5
Months from Start of 60-Day PNS	
6-11 Months	154 (37%)
12-17 Months	88 (21%)
18-23 Months	82 (20%)
24-36 Months	90 (22%)
Cause of Shoulder Pain	
Injury/Trauma	207 (50%)
Osteoarthritis	181 (44%)
Post-Operative	94 (23%)
Nerve/Neuralgia	11 (3%)
Post-Stroke	9 (2%)
Other	30 (7%)
Unknown	36 (9%)

Safety: As a follow-up survey, safety outcomes were not directly assessed in this study.

CONCLUSIONS

- Percutaneous 60-day PNS treatment can provide patients with durable shoulder pain relief.
- 85% of patients surveyed had not required any additional intervention through up to 36 months following 60-day PNS.
- Effective pain relief can lead to improvements in other domains of health as well as avoidance of additional interventions.

REFERENCES

1. Crookes et al., Aus J Gen Pract, 2023; 2. Burbank et al., Am Fam Physician, 2008; 3. Pritzlaff et al., Pain Manag, 2024; 4. Strand et al., J Pain Res, 2022; 5. Chakravarthy et al., Pain Phys, 2018
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