



**Non-invasive.**

**Safe.**

**Effective.**



**The proven solution to stress urinary incontinence**

The first wearable, active and **truly non-invasive** solution to strengthen the pelvic floor.

# Treat the root cause of incontinence with INNOVO®.

**Recommended by 98% of physicians  
and 90% of users, INNOVO is the  
perfect solution for treating stress  
urinary incontinence.<sup>1</sup>**

Safe, effective and FDA cleared, INNOVO offers the only clinically-proven, wearable and truly non-invasive solution for stress urinary incontinence (SUI). Using unique multipath™ technology, INNOVO targets the weakened pelvic floor muscles, delivering 180 perfect and complete pelvic floor contractions over each 30-minute session.

With every pulse, the user will feel her pelvic floor muscles lifting and releasing – strengthening the muscles and helping the user regain bladder control one session at a time.





## The consequences of incontinence

# Let's pee honest:

- **1 in 3** women are affected by urinary incontinence in their lifetime.
- Incontinence can cause **discomfort** and **feelings of embarrassment**, diminishing quality of life.
- About **33% of women** experience urinary incontinence after giving birth.<sup>2</sup>
- **Over 65%** of those women are still affected over the next 12 years.<sup>2</sup>
- **23%** of affected women say it **reduces their activity level**.<sup>3</sup>
- **23%** state it **negatively impacts their sex life**.<sup>3</sup>
- **31% dress differently** because of their symptoms.<sup>3</sup>

# Patient benefits.

INNOVO is highly effective.

## 80%

of users found INNOVO significantly improved their quality of life.<sup>1</sup>

## 87%

of users were defined as dry or near-dry after 12 weeks.<sup>4</sup>

## 90%

of users would recommend INNOVO to others.<sup>1</sup>

## 80%

of users saw significant improvement after 4 weeks.<sup>5</sup>





## INNOVO is safe.

- FDA cleared.
- Over 3.5 million sessions with zero reported serious events.
- INNOVO was associated with NO infections in the largest clinical study completed (compared to 14% reported with vaginal probe devices).<sup>5</sup>

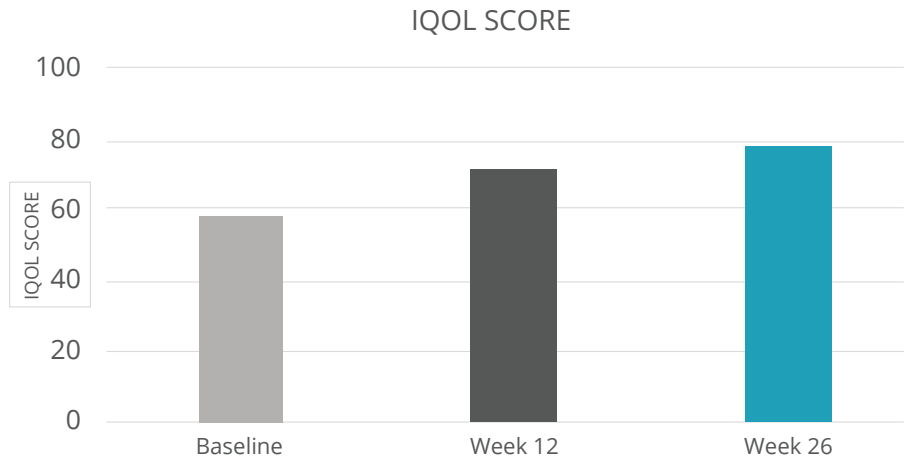
## INNOVO is comfortable.

- INNOVO is wearable and truly non-invasive.
- It's easy to put on.
- Stimulation intensity can be fine-tuned to a patient's comfort level.
- INNOVO is made of breathable, skin-friendly material, and available in a range of sizes to suit your patient's needs.

# The science behind INNOVO.

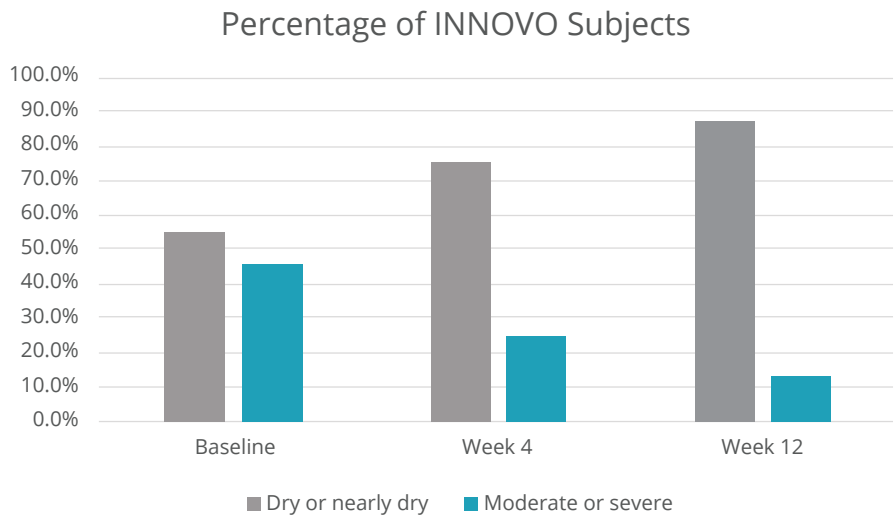
## Improves quality of life.

A randomized, controlled trial conducted across 12 centers in the U.S. found patients who used INNOVO for the 12 week treatment had a significant improvement in their quality of life.<sup>4</sup>



## Reduces urine leakage.

A randomized, controlled trial conducted across 12 centers in the U.S. found 87.2% of INNOVO users reported being dry or nearly dry after 12 weeks – a nearly 33% improvement.<sup>4</sup>



## Strengthens pelvic floor.

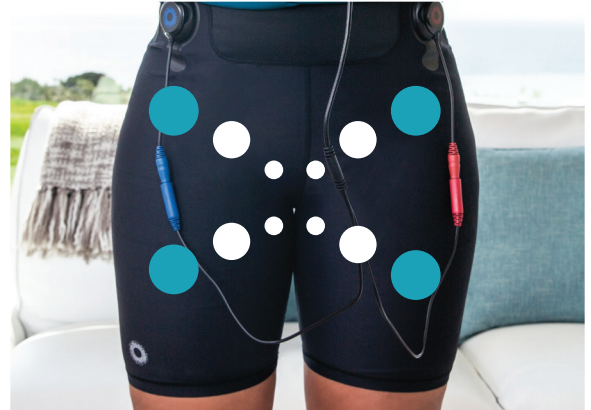
In one controlled, randomized, double-blind clinical study, researchers found INNOVO users attained an 81.3% improvement in their pelvic floor strength over three months – an increase of nearly 48%.<sup>5</sup>

# How INNOVO works.

**INNOVO is a transcutaneous electrical continence device utilizing neuromuscular electrical stimulation (NMES).**

## What is NMES?

Neuromuscular Electrical Stimulation, or NMES, is a controlled electrical pulse that causes muscles to contract, while strengthening the targeted area. INNOVO uses these gentle pulses to strengthen the pelvic floor.

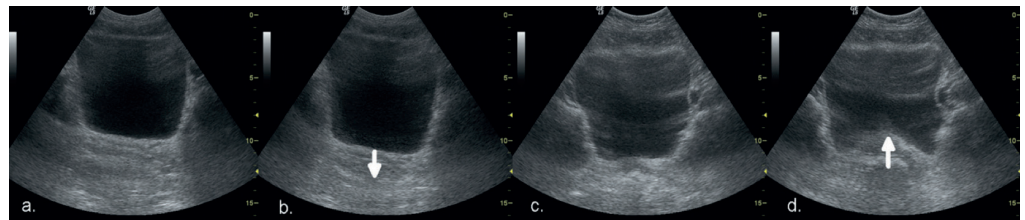


## How NMES powers INNOVO.

- The INNOVO NMES system generates smooth pulses that cause the pelvic floor to contract.
- INNOVO's patented multipath™ technology uses stimulations to target the muscles through varied electrode combinations.
- Gentle pulses deliver the best possible muscle contractions with no pain for the user.
- Using INNOVO for 30 minutes a day/five days a week for 12 weeks is clinically proven to treat SUI.

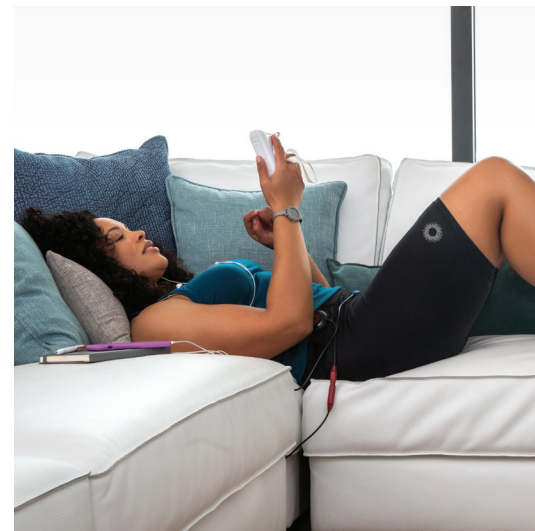
## Ultrasound imaging performed on patients throughout the INNOVO treatment for 8 weeks showed:

An increase in the ability to volitionally contract the pelvic floor while standing, for all patients (image on the far right), which resulted in cranial encroachment on the bladder by the pelvic floor muscle. Patients had better awareness of the pelvic floor at cessation of stimulation.<sup>6</sup>



a. Pelvic floor muscle (PFM) at rest; b. attempt at volitional pelvic floor contraction which results in Valsalva and caudal motion (arrow down); c. PFM at rest; d. PFM contraction elicited by INNOVO while standing, resulting in cranial encroachment of PFM on the bladder (arrow up). Adapted from Maher et al, 2012.<sup>7</sup>

# INNOVO for your patients.



Ready to help your patients kick their pad habit? Recommend INNOVO.

To learn more visit [my \*\*innovo\*\*.com](https://my.innovo.com)

1. Observational study on the treatment of stress urinary incontinence with Innovotherapy, April 2014.
2. MacArthur C, Wilson D, Herbison P, Lancashire RJ, Hagen S, Tooze-Hobson P, et al. UI persisting after childbirth: extent, delivery, history, and effects in a 12-year longitudinal cohort study. International Journal of Obstetrics and Gynaecology 2015 (Epub ahead of print).
3. Elnel S. Incontinence and prolapse. In: Annual Report of the Chief Medical Officer; 2014. p. 122–123.
4. R. Dmochowski – Novel external electrical muscle stimulation device for the treatment of female stress urinary incontinence: randomized controlled noninferiority trial versus intravaginal electrical stimulation. ICS Conference 2018
5. Soeder S, et al, A randomised, controlled, double-blind, clinical study to compare two neuromuscular stimulator devices in female stress urinary incontinence: Effects on symptoms and quality of life. IUGA Conference 2018.
6. Bio-Medical Research (BMR) Health. Results: observational study on the treatment of stress, urge and mixed incontinence using NEUROTECH VITAL™, April 2013 - February 2014.
7. Maher RM, Caulfield B. A novel externally applied neuromuscular stimulator for the treatment of stress UI in women – a pilot study. Neuromodulation 2013; 16(6): 590-594.

