

Why Consider VAX-D?

VAX-D is a highly specialized, non-invasive, FDA-approved technology for lower back pain conditions. Introduced in 1991 by Allan Dyer, MD, PhD (also a pioneer in the development of the transthoracic heart defibrillator), VAX-D is now used in more than 200 locations nationwide by MDs, chiropractors and osteopaths.

It is appropriate only for a specific set of conditions — including certain disc herniations, degenerative disc disease, sciatic and posterior facet arthrosis.

Unique among back treatment technologies, VAX-D works by both decompressing then recompressing the afflicted area—effectively creating a vacuum into which displaced spinal material can be drawn back into its proper location. Often described as, or compared to, traction, VAX-D is different because it does far more than just decompress a stressed area for temporary pain relief.

VAX-D is not right for everyone. Initial triage rules out candidates whose conditions are contraindicated for this treatment. Among contraindicated conditions

“I’m 99% better. I went in a 7 on the pain scale in July 2003 with a burst disc (10 means needing to go to the hospital) and came out a 2. Now, I’m a 1. Before, I couldn’t have made it through 15 minutes at WalMart. I realized I was better when able to go through a 90-minute walking tour without stopping or slowing down. It takes me two years to buy a vehicle, so naturally I researched VAX-D a lot. I’ve suggested VAX-D to four different people, and when I can refer others, I will. I had a buddy who’s had three back surgeries. I believe he wouldn’t have had to go through them if he had tried VAX-D.”
-Richard Gast, Patient

are: primary/metastatic neoplasm in the spine; recent vertebral fracture, cauda equina syndrome, unstable spondylolisthesis, severe osteoporosis, severe/unstable medical disorders, significant shoulder injury, pregnancy, ankylosing spondylitis, arthrodesis with retained hardware, abdominal aortic aneurysm, spinal infections including osteomyelitis and septic discitis, and severe osseous spinal stenosis.

Of those who qualify as candidates, substantial pain relief occurs in about 70% of the cases, according to medical studies

(copies of which are available upon request). Levels of improvement range from noticeable, ongoing pain relief to nearly total long-term pain relief and full functional ability (two years-plus later). While there is no guarantee, your consulting team will apprise you of the possible range of improvement after reviewing your case.

Typically, the treatment protocol includes 20 to 30 45-minute therapy sessions scheduled over one month. Individual circumstances, schedules and other considerations may dictate a different regimen.

Some insurance will cover a portion of the treatment cost. Our doctors and support staff are experienced in dealing with insurance company issues, and will be happy to assist you. We offer extended payment plans, administered through an independent third party, for those interested.

We encourage you to check out VAX-D and our people thoroughly before committing to the program. Ways to do this include:

- Reviewing other Back Pain Centers of Colorado and VAX-D background materials (including testimonials and endorsements from existing patients and referring doctors);
- Visiting www.vaxd.com, the umbrella VAX-D website;
- Interviewing selected former patients and referring doctors (to be courteous and mindful of their schedules, we provide interviewees on a case-by-case basis only);
- Asking questions of our staff.

(If unclear about the best people to talk to, first contact Back Pain Centers principal David Murray, 720-560-1701 or discrelief@aol.com.)

- Searching the Internet for VAX-D related reports. (Bear in mind that certain information sources will be unduly pro or con VAX-D, so a balanced and thorough assessment is strongly recommended.)

Thank you for your interest in VAX-D. We’re here to help in any way we can.



With so many healthcare choices, clarity and credentials are critical.

Non-invasive, FDA-approved VAX-D: used by MDs, chiropractors and osteopaths nationwide.

VAX-D Patient “Bill of Rights”

Welcome!

Our job is to relieve your pain. Sometimes, that pain resides in multiple places. It can be the pain of venturing into a new health-care environment, unsure of what to expect—or even what questions to ask. It can be the pain of having to budget for another expenditure, and committing the time it takes to get well. It can be the pain of dealing with insurance companies to get this procedure covered.

Pain takes many forms. Our job is to minimize it—on all fronts. To that end, following are your VAX-D “Bill of Rights,” designed to make your experience as positive as possible:

1. Right to courteous care and a comfortable bedside manner. Lost in much of today’s healthcare environment is you, the patient. Rude receptionists, sterile support staff, and distracted docs are more the norm than the exception. We promise you the courtesy you deserve and a health-care experience—from beginning to end.

2. Right to full disclosure. VAX-D is an FDA-approved, tried-and-true technology, introduced in 1991. But, as with any medical procedure, the more you know about likely outcomes, the better. To that end, we will recommend VAX-D only when your back condition warrants, and when there is likelihood of substantial improvement. If we determine that we cannot help you, we will do our best to refer you to someone who can.

3. Right to investigate us thoroughly. Ask us for references, request documentation of our results, throw us your toughest questions. The more convinced and comfortable you are upfront, the more productive and enjoyable your treatment will be.

4. Right to enlist us as a healthcare partner. Need help figuring out if/how much insurance will pay for VAX-D? Want to set up a payment plan? Just need to share your back pain frustration with somebody besides your family and friends? Talk to us. We’re here to help.

5. Right to set a treatment schedule that works for you. For optimum results, VAX-D treatments need to occur daily during the workweek for a period of four to six weeks. However, not everyone has that flexibility. To that end, we will do our best to set a schedule that accommodates you, while maintaining the most productive protocol. In some cases, we can do multiple treatments in one day, then skip a day or two. We’ll do all that we reasonably can.

6. Right to have your busy schedule respected. We appreciate you taking the time to investigate VAX-D. We will do everything possible to be efficient; but please understand that unforeseen developments in the course of a day can cause some delays.

7. Right to be apprised of all charges in advance. Based on your physical condition and financial circumstances, we will attempt to develop a program that meets your financial requirements.

8. Right to complete patient confidentiality. This is mandated by our profession and federal laws such as HIPAA. But in the real world, patient confidentiality is only as good as the intentions and systems of those safeguarding it. We promise to keep all your medical information confidential, unless you expressly authorize us to release it for a medically necessary reason.

9. Right to ask questions anytime. Our staff is fully trained to address a variety of issues, both typical and unusual. If we don’t know the answer right away, we will do our best to get it for you quickly.

10. Right to question us anytime. If something is bothering you about your treatment or anyone involved in administering it, talk to us. You’ll find us willing to resolve problems, and you’ll find that our doctors work collaboratively (unlike the “my way or the highway” attitude seen so often in healthcare today).

Your job is to commit to the time it takes to get well. We look forward to helping improve your health.



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Doc to Doc – Facts about VAX-D

Vertebral Axial Decompression (VAX-D) was introduced in 1991 by former Ontario, Canada Deputy Minister of Health Allan Dyer, MD, PhD. Its 200-plus US locations, manned by MDs, DCs and DOs, account for more than a thousand patients monthly. VAX-D was FDA approved as a class II medical device in July 1996. (See the accompanying “Guide for Physicians.” Clinical studies are available upon request.)

With all this “prominence,” why is VAX-D still one of the best-kept secrets in health-care? An article in the September 1998 issue of Best’s Review, A.M. Best Company, Insurance Issues and Analysis, may still offer the best explanation:

VAX-D has won two approvals from the Food and Drug Administration, the first in 1989 for ‘providing a primary treatment modality for the management of pain and disability for patients presenting with incapacitating low-back pain.’ The second, in July 1996, said that VAX-D achieves those effects ‘through decompression of the intervertebral discs and facet joints, that is, unloading due to distraction and positioning.’ The FDA considers it a class II medical device, meaning that it is not experimental and has proven effectiveness.

So far, however, VAX-D has remained in the backwaters of health care...‘Our view is that it’s virtually unknown;’ said Ross Brudenell, M.D., President of the National VAX-D Association, based in Anchorage, Alaska. ‘Only now is the traditional orthopedic community starting to pay some attention to the efficacy of this treatment.’

Brudenell said VAX-D still faces two credibility problems. It was originally misinterpreted as another kind of traction, a discredited treatment, and the tables were originally marketed to chiropractors, not to orthopedic surgeons.

In the interest of patient health, please review the accompanying clinical information. Feel free to contact any of us to discuss VAX-D in more depth. And, if you’re interested in a demonstration, we would be happy to accommodate you at any of our three clinics: Denver—3955 East Exposition Ave., Suite 318; Lakewood—10576 West Alameda Ave.; Westminster—8155 West 94th Ave.



“The first VAX-D patient was someone I had been treating for six months, who didn’t want surgery and hadn’t responded to injections. He had been off work for four months. Within four weeks of receiving the VAX-D treatments, he went back to work, saving his company money. Prior to treatment, his whole leg had been numb. Post-treatment, he had a numb spot the size of a quarter near his ankle.”

**-Braden Reiter, DO
Principal
Back Pain Centers of
Colorado**

We look forward to working with you in a healthcaring partnership.



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What Is VAX-D®?

VAX-D is a non-surgical, non-invasive procedure that treats painful and disabling low back disorders caused by disc herniations, degenerative disc disease, sciatic and posterior facet arthrosis. VAX-D is FDA-approved as a class II medical device.

What Is the “Triage” Process?

To determine eligibility, prospective patients are first examined and evaluated. Patient medical histories, x-rays and CT/MRI scans are required to determine whether an individual qualifies for the procedure. In some cases, VAX-D is a patient’s final alternative to back surgery. In others, it provides therapeutic relief to longtime—often excruciating—lower back pain. Results are documented and compelling:

- Provides substantive pain relief in 70% of VAX-D patients (medical studies verifying this fact are available upon request). Relief occurs both with acute or chronic low back pain and/or associated leg pain or numbness—generally within one month.



- Enhances the ability of disabled sufferers to return to work early, and the associated pain relief boosts productivity on the job.

- Demonstrates a comprehensive track record of safety, particularly impressive when compared to the major, sometimes life-threatening, consequences of back surgery.
- Has helped more than 300 Back Pain Centers of Colorado patients avoid surgeries, saving an estimated \$5 million in medical costs and recuperation-related costs.

What Does VAX-D Actually Do?

Most back pain sufferers have a process that develops over time. Trauma to the muscles, vertebrae or discs occurs either by small microtraumas or actual injuries producing joint stiffness. The joint stiffness leads to disc dehydration (termed degenerative disc disease) causing the disc to crack and tears to develop, producing bulges or herniations. VAX-D produces a vacuum effect within the disc, thereby drawing fluids back into to the disc, rehydrating and drawing any bulges or herniations back into place. The fluids drawn back into the disc contain oxygen and nutrients that create the healing environment necessary to correct the problem.

What Is the Regimen?

An individual treatment plan is developed. Typically, 20-30 therapy sessions are scheduled over a month. (Scheduling can be adapted to meet specialized scheduling needs.) Each session begins by fitting the patient with a patented pelvic harness designed to achieve optimal decompression of the lumbar spine. The patient lies fully dressed on the VAX-D device and is properly positioned by a Certified VAX-D Technician to maximize comfort and safety. The controls and settings are adjusted in accordance with the individual patient’s treatment plan, and the procedure commences. The VAX-D device then applies precisely controlled tension along the axis of the spinal column to distract the vertebral segments and posterior facets of the lumbar spine and decompress the intervertebral discs. Each distraction cycle, lasting 60 seconds, is followed by a relaxation cycle of similar duration.

Each session, which consists of 15 continuous cycles of distraction/relaxation, takes about 30 minutes. The fully automated process of VAX-D treatment is managed by a programmable logic controller located in the computer programmed console that is



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WHAT IS VAX-D®?

continuously monitored by the technician. A continuous chart recording is made of the parameters achieved during each and every cycle. The chart recording is printed to form a permanent record for the patient's chart and is available for review by the treating physician.

What Financial Assistance Can You Provide?

Our support staff, experienced in dealing with a variety of insurance coverages, will be happy to help you through the insurance maze. (And this is an area where persistence pays. Alternatively, an extended payment plan, administered by an independent third party, is available upon request.

What if I Want to Run This by My Regular Doctor?

We will be happy to talk with your doctor, provide supporting clinical documentation about VAX-D, and invite him/her to see the VAX-D treatment process in action.

How Safe Is VAX-D?

VAX-D is very safe. The patented hand grips allow the patient to release at any time, completely relaxing tension.

Does VAX-D Treatment Lead to Permanent Recovery?

The typical case does not require additional treatment after successful completion. However, as with any treatment of more severe cases, certain job descriptions/activities may mandate future re-evaluation.



Where is it Available?

Back Pain Centers of Colorado located in Denver, Lakewood and Westminster is the sole Colorado front range provider of VAX-D. In addition, MDs, chiropractors and osteopaths nationwide offer the VAX-D treatment. More than 200 VAX-D units are operating today in the US, Puerto Rico, Canada and Australia, treating in excess of 1,000 patients monthly. A list of practitioners may be found at www.vaxd.com.

Who Invented VAX-D?

Allan E. Dyer, PhD, MD., a former Deputy Minister of Health in Ontario, Canada, introduced VAX-D in 1991. Failed conventional treatment for his own herniated disc propelled Dr. Dyer to spend six years developing the VAX-D concept. Dr Dyer is licensed by the College of Physicians and Surgeons, Ontario, the National Board of Examiners USA, and the College of Pharmacy, Ontario. He also is a pioneer in development of the transthoracic heart defibrillator.

MORE INFORMATION?

Contact David Murray – 720-560-1701



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How Do I Justify the Cost?

While there are many emotional arguments that can be made about the value of your good health, there are also myriad logical considerations. Before addressing the direct cost of the VAX-D procedure, walk yourself through the following exercise and example:

1. On an average daily basis, how much less productive are you because of your lower back problems? _____% (To calculate this, detail what an average day's activities would look like if you didn't have a back problem, then compare it to your actual situation. If the healthy you would perform 20 activities daily versus an actual productivity of 10, then your lower back problems have reduced your productivity by 50%.)

2. Calculate the daily "lost" hours due to lowered productivity_____. (Based on a 16-hour awake schedule, which doesn't even factor in lost sleep time. If you're losing 50% productivity daily, that's eight hours a day!)

3. What's that time worth to you? Obviously, it's easier to calculate when it translates to lost wages or some other objective source, but often subjectivity plays a role. If that's the case for you, think about what your lost time is costing

"This is your health. How much did you pay for your last car?"
-Richard Gast, Patient

you. Perhaps you're having to hire out chores because of physical incapacity. If you have kids, perhaps it's the cost of childcare because you can't physically care for them. Let's be ridiculously conservative, and say it's costing you \$40 daily (\$5 for each lost hour, less than minimum wage), so recovering lost function is worth \$40 a day. The average cost of VAX-D treatment is \$4,000. Taking nothing else into account, you would recoup your investment in 100 days, presuming the treatment helped you regain full function.

Value of each lost hour_____.

4. But, let's say you only improve 50%. At that rate, you would still pay for the investment in 200 days, little more than a half-year. Value of 50% improvement _____.

5. Then, in essence, you're "making" money because you've minimized or eliminated expenditures that you were previously having to cover.

In reality, justifying the cost should be about far more than money. Enjoyment of life, ability to make a living, relationship issues...these are very critical and important issues to examine.

But, before contemplating any of these, first make the case monetarily. Be conservative. And decide if the financial investment makes good "cents sense."

Presuming you can make the case based on financial criteria, then look at all the other quality of life issues.

Then, see if VAX-D holds promise for you. Of those we clear to receive the treatment, about 70% see substantial improvement. Thirty percent don't. Obviously, we will give you our best information about where you likely stand. If you start treatment and for some reason it clearly is not working (but give it at least a third of the sessions), we can terminate the regimen—and charge you only for the sessions you actually receive. But remember: Be patient. Don't expect miracles after the first one, two or three treatments. It's a process, and that's the mindset that will ensure the best results.

Now, compare all of this to the direct loss of work time, debilitation and dangers, direct costs (even with insurance) and in some cases low probability of success with back surgery. Line them up side by side and determine for yourself if VAX-D merits consideration.



"What is a cynic? A man who knows the price of everything and the value of nothing."

-Oscar Wilde

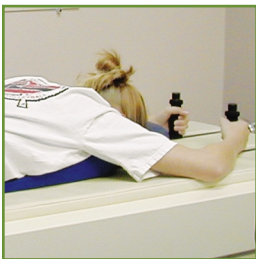
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Movement Is So Subtle. How Do I Know It's Working?

VAX-D's subtle movement is the key to its effectiveness. By very gently and slowly decompressing (stretching) then recompressing the spine, VAX-D is able to avoid triggering muscles that otherwise would fight the movement and actually increase stress in the spine.

This is also why so many repeated treatments are necessary. Anything more dramatic—either in the intensity or duration of the treatments—would cause the body to fight the process and drastically reduce its effectiveness.

The repetitive decompression-recompression motion—typically about 15 cycles a session, duplicated over the course of a month or more—allows the affected spinal area to relax. It also creates a vacuum that allows protruding disc contents to be drawn back into their original location. Part of this is fluids containing oxygen and nutrients needed to heal the affected area.



With VAX-D, patience is a virtue.

"I had bulging discs in my back. I had tried acupuncture, regular physical therapy, epidural steroid injections...nothing worked. My doctor was about to say that my only remaining choice was surgery. Then, my acupuncturist referred me to a VAX-D clinic.

"By the time I started the treatment in late summer 2003, I could barely move. Every question I answered pointed to the fact that I should be laid up in a hospital.

"After the first five or six treatments, I was leery. I felt like I was in more pain than I had been, and started to get frustrated. Then, after the tenth treatment, I had a serious decrease in pain and increase in how I could move. The entire muscle spasming was gone; there was only spinal pain. By the fifteenth treatment, I felt more discomfort than pain. By the thirtieth, I pretty much had no pain...just a feeling of tightness.

"I tweaked it a little recently with some heavy physical activity I was supposed to avoid. It seems to be rectifying itself.

"This is a total 100% turnaround from six months ago, when the doctors were ready to toss me on the operating table."

-Michael Foegen
Patient



**With VAX-D,
patience is
a virtue.**

● Non-invasive,
FDA-approved
VAX-D:
used by MDs,
chiropractors
and osteopaths
nationwide.

Will It Last?

Ever relaxed totally on a vacation, then a week later back at work realized the relaxation was totally gone? Concerned that you'll have the same experience with VAX-D? Research establishes that VAX-D has staying power.

A Small, Non-randomized Study Reports ... VAX-D Reduces Chronic Discogenic Low Back Pain

Linda Pembrook
Anaesthesiology News, Volume 29,
Number 3, March 2003

"PHOENIX – Excellent four-year results have been reported in a small series of patients with chronic discogenic low back pain treated with a spinal decompression device, VAX-D (Vertebral Axial Decompression).

Among 23 patients, 71% showed more than 50% reduction in pain immediately after treatment, and 86% showed a 50% or better pain reduction at four years. "After four years, 52% of respondents reported a pain level of zero. Thus, pain relief not only lasted but improved," reported Robert H. Odell Jr., MD. Ph.D."

Feedback from Back Pain Centers of Colorado patients confirms that VAX-D improvements remain long after treatment ceases. For example:

"After a severe accident four years ago, I suffered a herniated disc of the lumbar spine. After being incapacitated for over a month and experiencing functional loss of my leg, it seemed inevitable that I would be facing surgery. Fortunately, a colleague suggested VAX-D treatment. I returned to work five weeks later and surgery was not needed. I have continued to improve over the years and have recommended VAX-D to several of my patients with similar great results."

-Dr. David Vorzimer, DC
Patient and Colleague

"I completed treatment in July 2003, was told it would take six months to a year to fully heal. I'm 99% better now than I was when I started treatment. On a scale where 10 means worst case, I went in a 7, came out a 2. Now, I'm a 1."

-Richard Gast
Patient

"I had a lot of pain all the time, often felt like my back could go out of place. I finished six months ago [Fall 2003] and I don't have spasms anymore. I'm not saying I don't have pain, but it's probably mostly from arthritis."

-Ruth Kennedy
Patient

"In January 2003, I couldn't even walk upright. VAX-D played a big role in my initial recovery, but I also stopped working as a plumber and firefighter because of the strain on my back. And I do the exercises and stretches that Jennifer at the VAX-D clinic showed me. It's like dieting. You have to do the exercise along with the diet to make it work. You have to be committed and do what they tell you."

-Paul Griffith
Patient

"I finished In November 2003. I do a lot of travel, and it still feels 75% better than before. The pain comes back a little if I move the wrong way or kink it, but I don't have constant pain or anything like that."

-Steve Stolarczyk
Patient

"In the late summer and early fall of 2003, I could barely move. I started treatment and had a serious decrease in pain after the tenth session. By the end, there was pretty much no pain, just a feeling of tightness. I've had a 100% turnaround in the six months since the doctors were ready to toss me on the operating table."

-Mike Foegen
Patient



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