

SPINAL BRACING IS CLINICALLY PROVEN TO IMPROVE PATIENT CARE

AND WE HAVE THE DATA TO PROVE IT.



INELASTIC BRACES

Better patient outcomes start with Aspen's inelastic spinal braces.

Research shows that inelastic LSOs outperform elastic LSOs and yield a clinically significant improvement on the Oswestry Disability Index (ODI).

PT patients who received an LSO were 4.7x more likely to have a clinically significant improvement vs. a PT only group.

HERE'S WHY

THEY'RE THE

SUPERIOR CHOICE



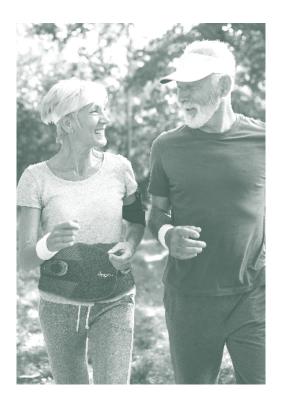












BRACES HELP PATIENTS GET MOVING

Back pain is the leading cause of disability in Americans under the age of 45.

In 2018, 28% of men and 31.6% of women ages 18+ had lower back pain in the past three months, inhibiting their daily function.

65% of patients given a brace with physical therapy reported clinically significant pain relief. Spinal bracing, which is a non-opiod treatment solution for chronic pain has been proven to help patients: advance in recovery, improve walking distance, return to the activities they love by increasing strength and flexibility and improving balance and performance.

Braces help get patients moving and increase the patient's quality of life.

FACTS ARE FACTS

AFTER 45 YEARS OF RESEARCH, THERE IS STILL NO CONCLUSIVE EVIDENCE THAT LUMBAR BRACING CAUSES ATROPHY.*

In fact, wearing a brace for 7.21 hours a day did not affect multifidus, obliques, or transverse abdominis.*

Take a deeper dive at www.aspenmp.com/references

WHAT BRACES DO WHAT BRACES DO NOT DO Increase stability Increase strength Increase flexibility Increase flexibility Cause atrophy Induce muscle wasting Cause loss of strength

*Data available on file LiT5157A 12/21