

1. Normal cartilage:

Provides a smooth surface, allowing bones to move easily across each other

2. Normal synovial fluid:

Lubricates and provides shock absorption during activity due to a high concentration of HA

3. Normal bone:

Provides strength and support for the body's tissues

4. Eroded cartilage:

If completely worn away, bones may scrape painfully against each other

5. OA synovial fluid:

The OA disease leads to reduced production of HA, of poor quality

6. OA bone:

Bony spur growths (osteophytes)

HOW DO I KNOW IF I HAVE OA?

Your clinician may diagnose you, but you can help understand your pain better by filling out the self-assessment questions below.⁷

		TES	NO
	I frequently experience stiffness in my joints after resting or when I wake up		
	My joint is tender or sore after overuse		
	I feel pain in my joints when I move		
	I feel pain in my joints even when I am not active		
	Getting up from a chair, out of a car, or going up or down stairs is difficult		
	I hear a crackling sound in my joints when I move		
	I experience a grating feeling in my joints when I move		
	The area around my joint is red and swollen		
	I am unable to do or enjoy certain activities because of pain or stiffness in my joints		
	I feel less coordinated due to pain or stiffness in my joints		
	I have noticed that the muscles close to my painful joint are not as strong as they used to be		

If any of the above statements apply to you, you should see a clinician. The earlier OA is diagnosed, the sooner patients can receive appropriate treatment.

References: 1. DUROLANE [package insert], Durham, NC: Bioventus LLC; 2017. 2. Balazs EA, Denlinger JL. Viscosupplementation: a new concept in the treatment of osteoarthritis. *J Rheumatol Suppl*. 1993;39:3-9. 3. Leighton R, Akermark C, Therrien R, et al. NASHA hyaluronic acid vs. methylpredhisolone for knee osteoarthritis: a prospective, multi-centre, randomized, non-inferiority trial. *Osteoarthritis Cartilage*. 2014;22(1):17-25. 4. Bannuru RR, Schmid CH, Kent DM, Vaysbrot EE, Wong JB, McAlindon TE. Comparative effectiveness of pharmacologic interventions for knee osteoarthritis: a systematic review and network meta-analysis. *Ann Intern Med*. 2015;162(1):46-54. 5. McGrath AF, McGrath AM, Jessop ZM, et al. A comparison of intra-articular hyaluronic acid competitors in the treatment of mild to moderate knee osteoarthritis. *J Arthritis*. 2013;2(1):108. doi: 10.4172/21617-7921.1000108. 6. Krocker D, Matziolis G, Tiuischer J, et al. Reduction of arthrosis associated knee pain through a single intra-articular injection of synthetic hyaluronic acid. *Z Rheumatol*. 2006;66(4):237-31. 7. Arthritis Foundation. Osteoarthritis. www.arthritis.org/about-arthritis/types/osteoarthritis/. Published 2017. Accessed September 15, 2017.

*Summary of Indications for Use:

DUROLANE (3 mL): Symptomatic treatment of mild to moderate knee or hip osteoarthritis. In addition, DUROLANE has been approved in the EU for the symptomatic treatment associated with mild to moderate osteoarthritis pain in the ankle, shoulder, elbow, wrist, finers, and toes.

DUROLANE SJ (1 mL): Symptomatic treatment associated with mild to moderate osteoarthritis pain in the ankle, elbow, wrist, fingers, and toes.

Both DUROLANE and DUROLANE SJ are also indicated for pain following joint arthroscopy in the presence of osteoarthritis within 3 months of the procedure.

There are no known contraindications

You should not use DUROLANE if you have infections or skin disease at the injection site. DUROLANE has not been tested in children or pregnant or lactating women. Risks can include transient pain, swelling and/or stiffness at the injection site.

Full prescribing information can be found in product labeling, or at DUROLANE.com.

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DUROLANE is a single-injection treatment designed to relieve OA pain.¹

WHAT IS OA?

OA is often referred to as "degenerative joint disease," which usually develops slowly over time.

Gradually, cartilage on the surface of the joint starts to get damaged and wears away. This leads to pain and stiffness in the joint.

WHEN YOU HAVE OA

Hyaluronic Acid (HA) in your joints is continuously broken down and replaced over time.

- When you have OA, HA becomes diluted and breaks down faster.² This is associated with increased inflammatory processes that can degrade the cartilage in your joints.²
- The pain caused by inflammation limits movement, which in turn can lead to further deterioration of the joint.

WHAT IS HA?

HA is fluid found naturally throughout the human body. It is an important component of synovial fluid (joint fluid). The synovial fluid allows joints to move easily and freely while also absorbing the shock of daily activity. In a healthy joint, HA helps to protect bones and other joint tissues from injury and disease.

WHAT IS DUROLANE?

DUROLANE is a single-injection treatment of HA designed to provide powerful and lasting pain relief when you are suffering from pain due to OA.³⁻⁶

DUROLANE is a powerful and lasting HA, which is injected directly into the joint.



HOW DOES DUROLANE WORK?

DUROLANE is a HA which acts like a lubricant and shock absorber in the synovial fluid. A DUROLANE injection may cushion your joint and manage your symptoms.¹

WHAT ARE THE BENEFITS OF DUROLANE?

As early as 2 weeks after an injection, DUROLANE can reduce OA joint pain and improve the physical activity and quality of life of OA patients.²⁻⁶

Some patients have pain relief lasting up to 12 months.3

IS DUROLANE RIGHT FOR ME?

If you are an OA patient who is not getting enough pain relief from oral medications, physical therapy or steroids, DUROLANE might be right for you. Speak with your clinician about HA treatment with DUROLANE.

IS THERE ANY REASON WHY I COULDN'T HAVE A DUROLANE INJECTION?

You should not use DUROLANE if you have infections or skin disease at the injection site. DUROLANE has not been tested in pregnant or lactating women, or children.¹

Full indications and contraindications information can be found in product labeling, at DUROLANE.com.

