





Why SI Joint Stabilization?

- Like all orthopedic joints, the SI joint can degenerate and become a pain generator. This is why surgeons have been treating SI joint dysfunction since the early 1900's.
- 15-25% of patients presenting with low back pain actually have SI joint dysfunction.1
- Up to 75% of postoperative lumbar fusion patients will develop significant SI joint degeneration after 5 years.²

Why PsiF?

- Simple: Single implant size (8x10x25mm) made of structural allograft bone and shaped for easy posterior insertion into the SI joint.
- Reproducible: Familiar prone patient position for identifiable landmarks and instrumentation that helps provide consistent implant placement into the SI joint.
- Flexible: PsiF allows for variable implant placement based on patient's pathology.

"I have used a number of SI joint fusion systems on the market, both lateral and posterior, and find the PsiF system to be a simple procedure that takes me less than 15 minutes. Key advantages are less instruments, less radiation and well-designed implant. My patients are experiencing less pain and ambulatory sooner".

Mokbel Chedid, M.D.

Neurological Surgery, Henry Ford Health System

- 1. Cohen SP. Sacroiliac joint pain: a comprehensive review of anatomy, diagnosis, and treatment. Anesth Analg, Nov '05, 101(5):1440-53
- 2. Kee-Yong Ha, MD; Jun-Seok Lee, MD; Ki-Won Kim, MD. Degeneration of Sacroiliac Joint After Instrumented Lumbar or Lumbosacral Fusion: A Prospective Cohort Study Over Five-Year Follow-up. Spine. May '08, Vol 33-11, pp1192-1198





ORDERING INFORMATION:

CATALOG NUMBER	PRODUCT DESCRIPTION
OM-SIK-1	Unilateral PsiF Kit (Includes Implants, K-wires, BMA Needle and Drill)

