

Deflux<sup>®</sup>  
Inject Control

A person is shown from the waist down, wearing a green jacket, dark leggings, and pink sneakers, jumping rope on a wooden pier. The pier has a metal railing and overlooks a blue ocean under a clear sky. The scene is framed by a large yellow circular border.

A safe, simple and  
effective treatment for SUI<sup>5</sup>

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Deflux<sup>®</sup> for Stress Urinary  
Incontinence (SUI).

# Inject Control

Stress urinary incontinence (SUI) is characterized by the involuntary leakage of urine, typically upon exercise, coughing or sneezing. It is a common condition that may affect up to 25% of adult women.<sup>1</sup> Prevalence of SUI increases with age, affecting up to 40% of elderly women.<sup>2</sup>

SUI can have a significant impact on the quality of life for people with the condition, which can include social isolation and poor self-esteem. Many women just accept the condition as part of the aging process and rely on pads and changes to their lifestyle to manage SUI.<sup>3</sup>

There are a number of treatment options for SUI. Urethral bulking is a minimally invasive option and offers an alternative to open surgery.<sup>4</sup> Studies show that quality of life improvements after urethral injection are comparable to those obtained with surgery.<sup>4</sup> Another study reported patients describing their final result as markedly improved, and suggests Deflux as a first-line operative treatment option for mild SUI.<sup>5</sup>

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## NASHA® - The Natural Solution

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Deflux gel is a viscous substance consisting of two components: Non-Animal Stabilized Hyaluronic Acid (NASHA) and dextranomer (Dx) microspheres.

The NASHA in Deflux has been in medical use for over two decades in more than 50 million procedures worldwide.<sup>6</sup>

In the treatment of SUI, Deflux is injected into the urethra endoscopically to obtain a bulking effect. The NASHA acts mainly as a carrier, leaving the Dx microspheres at the implant site. Over time, the gel combines with the fibroblasts and collagen, which stabilizes the position and size of the implant.<sup>7</sup>

When you choose Deflux, you can rely on safety, efficacy and simplicity.<sup>8</sup>

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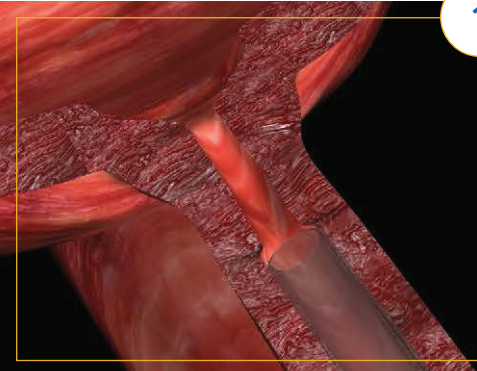
## Benefits

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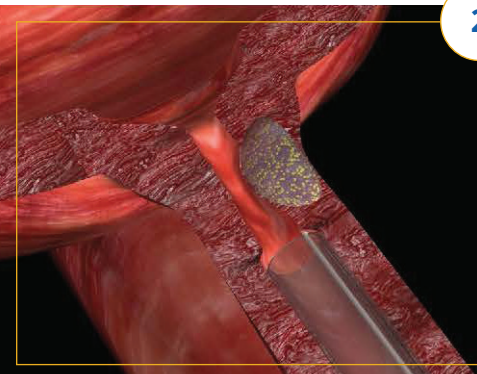
- Ability to be administered under local anaesthesia<sup>9</sup>
- Minimally invasive procedure
- Proven to have minimal side effects<sup>11</sup>
- Return to normal activity within 24 – 48 hours<sup>9</sup>
- Studies demonstrate a success rate of roughly 75%<sup>5</sup>
- Does not affect major surgery at a later stage, if required<sup>12</sup>

Deflux is a good compromise between acceptable efficacy, negligible intra- and post-operative complications, and high satisfaction rates.<sup>10</sup>

# Treatment Procedure<sup>7</sup>

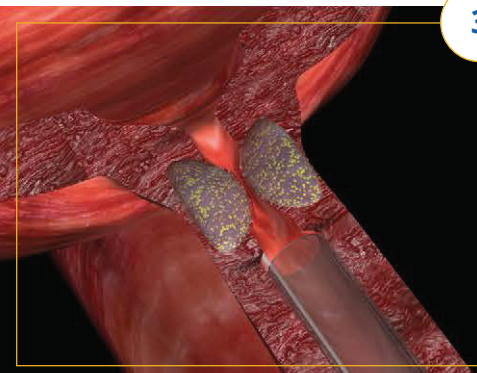


**1** A standard urethro-cystoscope with a working channel is inserted into the urethra.



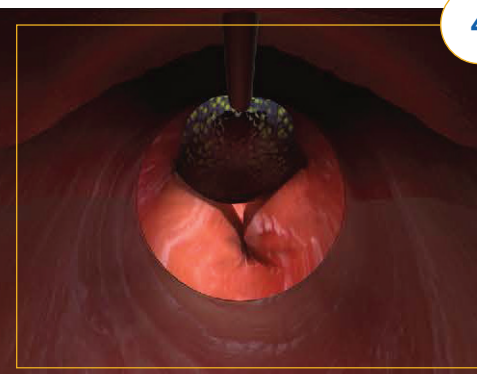
**2** Deflux is injected submucosally at the level of the proximal urethra.

Deflux should be injected slowly to allow the tissue to accommodate the material until the bulge under the mucosa is seen to protrude to the midline of the urethra.



**3** Inject Deflux at 2-4 sites (e.g. 3, 6, 9 and 12 o'clock positions).

3-6 mL has proven to be sufficient in the majority of patients - but the volume and number of injections to achieve successful results can vary significantly, depending on the visible bulking effect.



**4** The needle should be held in place for 15-30 seconds at each injection to allow the gel to settle.

The open urethra is closed with swelling towards the midline observed after injection.

## After The Procedure

- Patients may experience dysuria, urinary tract infection, hematuria and pain at the injection site for a few days<sup>7</sup>
- The most common complications immediately after the injection procedure are urinary retention and voiding dysfunction<sup>8</sup>
- Most patients return to normal activities within 48 hours<sup>9</sup>
- In one study, roughly 2% of patients reported pseudocysts after being treated with Deflux. These were successfully treated with no other complications<sup>11</sup>

## Clinical References

- 1 Hannestad YS, Rortveit G, Hunskaar S. Help-seeking and associated factors in female urinary incontinence. The norwegian EPINCONT study. Epidemiology of incontinence in the county of Nord-Trondelag. *Scand J Prim Health Care*. 2002;20(2):102-107.
- 2 Hannestad YS, Rortveit G, Sandvik H, Hunskaar S. A community-based epidemiological survey of female urinary incontinence: The Norwegian EPINCONT study. Epidemiology of Incontinence in the County of Nord-Trondelag. *J Clin Epidemiol*. 2000;53(11):1150-1157.
- 3 Andersson G, Johansson JE, Garpenholt O, Nilsson K. Urinary incontinence - prevalence, impact on daily living and desire for treatment: A population-based study. *Scan J Urol Nephrol*. 2004;38(2):125-130.
- 4 Corcos J, Collet JP, Shapiro S, Herschorn S, Radomski SB, Schick E, Gajewski JB, Benedetti A, MacRamallah E, Hyams B. Multicenter randomized clinical trial comparing surgery and collagen injections for treatment of female stress urinary incontinence. *Urology*. 2005 May;65(5):898-904.
- 5 Kaba R, Kaba R, Birnie A, Turney B, Foley S. The use of Deflux to treat stress urinary incontinence: 3 year results. International Continence Society 2011 Poster Presentation. Abstract #856.
- 6 Galderma. Restylane. Available at <https://www.galdermaesthetics.com/science-behind-restylane>. Accessed August 1, 2021.
- 7 Deflux [package insert - Europe]. Santa Barbara, Ca, USA. Palette Life Sciences, Inc.; 2021.
- 8 Bent AE. Sling and bulking agent placement procedures. *Rev Urol*. 2004;6(5):S26-S46.
- 9 Blick C, Marsh H, Muneer A, Tokaca N, Foley SJ. NASHA/Dx gel (Zuidex™) for stress urinary incontinence: Results from a single-centre study of 150 patients. *Curr Urol*. 2008;2:194-199.
- 10 Serati M, Mancini V, Balzarro M. Urethral bulking agents for the treatment of female stress urinary incontinence. *Int Urogynecol J*. 2020;31:1493-1494.
- 11 Hobbs C., Foley S. Still dry! Longevity of Deflux urethral bulking injections for urinary stress incontinence. AUA 2015 Podium Presentation, PD 28-01.
- 12 Blick C, Patel N, Foley SJ. Do periurethral Zuidex injections alter the performance of tension-free tapes in the treatment of stress urinary incontinence? *Curr Urol*. 2010;4:15-17.
- 13 Hagemeyer T, Blau U, Gauruder-Burmester A, Tunn R. Paraurethral abscess developing after mid-urethral Zuidex-injection in women with stress urinary incontinence—management of complications and retrospective comparison with bladder neck located injection technique. *Zentralbl Gynäkol* 2006;128:68–70.

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**A simple, safe and natural treatment for an improved quality of life.**