



## Bioventus Recognizes 25 Years of Bone Healing from Exogen

February 24, 2020

**DURHAM, NC – February 24, 2020** – [Bioventus](#), a global leader in orthobiologic solutions, is recognizing 25 years of proven bone healing with its [EXOGEN Ultrasound Bone Healing System](#). **EXOGEN** uses low-intensity pulsed ultrasound (LIPUS) to help stimulate the body's natural bone healing process and promote fracture healing. It has an 86% heal rate for fractures not healing on their own<sup>1</sup> and provides 38% faster healing of indicated fresh fractures.<sup>2, 3</sup>

Since its launch in 1995, **EXOGEN** has been used to treat more than 1 million patients worldwide. Today it is prescribed by over 10,000 physicians annually<sup>4</sup> and is sold in 15 countries. Backed by 16 Level 1 studies proving its safety and efficacy,<sup>5-20\*</sup> **EXOGEN** is used by patients at home and at their convenience for just 20 minutes a day.

"The numbers tell such a compelling story and represent an incredible milestone for Bioventus and **EXOGEN**," said Tony Bihl, CEO, Bioventus. "It's a great product with proven outcomes and for the last 25 years, it has healed nonunion and acute fractures for patients worldwide. This level of success and longevity was made possible by the tireless efforts of our employees and treating clinicians."

### About Bioventus

Bioventus is an orthobiologics company that delivers clinically proven, cost-effective products that help people heal quickly and safely. Its mission is to make a difference by helping patients resume and enjoy active lives. The orthobiologic products from Bioventus include offerings for osteoarthritis, surgical and non-surgical bone healing. Built on a commitment to high quality standards, evidence-based medicine and strong ethical behavior, Bioventus is a trusted partner for physicians worldwide. For more information, visit [www.BioventusGlobal.com](http://www.BioventusGlobal.com) and follow the company on [LinkedIn](#) and [Twitter](#).

**Media Contact:** Thomas Hill, 919-474-6715, [thomas.hill@bioventusglobal.com](mailto:thomas.hill@bioventusglobal.com)

Bioventus, the Bioventus logo, and EXOGEN are registered trademarks of Bioventus LLC.

### Summary of Indications for Use

EXOGEN is indicated for the non-invasive treatment of established nonunions† excluding skull and vertebra. The EXOGEN device has also been reported as effective as an adjunctive non-invasive treatment of established nonunions† in patients:

- With internal or external fracture fixation hardware present. EXOGEN cannot penetrate metal and therefore should not be applied directly over hardware.
- Undergoing treatment for infection at the fracture site. EXOGEN is not intended to treat the infection.
- Believed to have diminished bone quality. EXOGEN is not intended to treat diminished bone quality.

EXOGEN is also indicated for the acceleration of fresh fracture heal time, repair following osteotomy, repair in bone transport procedures and repair in distraction osteogenesis procedures. There are no known contraindications for the EXOGEN device. Safety and effectiveness have not been established for individuals lacking skeletal maturity, pregnant or nursing women, patients with cardiac pacemakers, on fractures due to bone cancer, or on patients with poor blood circulation or clotting problems. Some patients may be sensitive to the ultrasound gel. Full prescribing information can be found in product labeling at [exogen.com](http://exogen.com) or by calling Bioventus Customer Service at 800-836-4080. † A nonunion is considered to be established when the fracture site shows no visibly progressive signs of healing.

1. Nolte PA, van der Krans A, Patka P, Janssen IM, Ryaby JP, Albers GH Low-intensity pulsed ultrasound in the treatment of non-unions. *J Trauma*. 2001; 51(4):693-703.
2. Heckman JD, Ryaby JP, McCabe J, Frey JJ, Kilcoyne RF Acceleration of tibial fracture-healing by non-invasive, low intensity pulsed ultrasound. *J Bone Joint Surg [Am]*.1994; 76(1):26-34.
3. Kristiansen TK, Ryaby JP, McCabe J, Frey JJ, Roe LR Accelerated healing of distal radial fractures with the use of specific, low-intensity ultrasound. A multicenter, prospective, randomized, double-blind, placebo controlled study. *J Bone Joint Surg [Am]*. 1997; 79(7):961-973.
4. Bioventus, Data on File, RPT-000965 [A].

\*The Journal of Bone & Joint Surgery Level of Evidence 2015 Ratings Table was used to define the level of each clinical study. Levels of Evidence for Primary Research Question, *J Bone Joint Surg Am*. 2015;97(1)1-2. These studies, which reflect the body of evidence for EXOGEN, include evaluations of applications outside the approved labeling.

5. Dudda M, Hauser J, Muhr G, Esenwein SA. *J Trauma*. 2011;71(5):1376-80.
6. El-Mowaf H, Mohsen M. *Int Orthop*. 2005;29(2):121-4.
7. Emami A, Petrén-Mallmin M, Larsson S. *J Orthop Trauma*. 1999;13(4):252-7.
8. Handolin L, Kiljunen V, Arnala I, et al. *J Orthop Sci*. 2005;10(4):391-5.
9. Handolin L, Kiljunen V, Arnala I, Pajarinen J, Partio EK, Rokkanen P. *Arch Orthop Trauma Surg*. 2005;125(5):317-21.
10. Heckman JD, Ryaby JP, McCabe J, Frey JJ, Kilcoyne RF. *J Bone Joint Surg Am*. 1994;76(1):26-34.
11. Kristiansen TK, Ryaby JP, McCabe J, Frey JJ, Roe LR. *J Bone Joint Surg Am*. 1997;79(7):961-73.
12. Leung KS, Lee WS, Tsui HF, Liu PP, Cheung WH. *Ultrasound Med Biol*. 2004;30(3):389-95.

13. Lubbert PH, van der Rijt RH, Hoorntje LE, van der Werken C. 2008;39(12):1444-52.
14. Mayr E, Rudzki MM, Rudzki M, Borchardt B, Häusser H, Rüter A. Handchir Mikrochir Plast Chir. 2000;32(2):115-22.
15. Rue JP, Armstrong DW 3rd, Frassica FJ, Deafenbaugh M, Wilckens JH. Orthopedics. 2004;27(11):1192-5.
16. Salem KH, Schmelz A. Int Orthop. 2014;38(7):1477-82.
17. Strauss E, Ryaby JP, McCabe J. J Ortho Trauma. 1999;13(4):310.
18. Tsumaki N, Kakiuchi M, Sasaki J, Ochi T, Yoshikawa H. J Bone Joint Surg Am. 2004;86-A(11):2399-405.
19. Zacherl M, Gruber G, Radl R, Rehak PH, Windhager R. Ultrasound Med Biol. 2009;35(8):1290-7.
20. Schofer MD, Block JE, Aigner J, Schmelz A. BMC Musculoskelet Disord. 2010;11(1):229. doi: 10.1186/1471-2474-11-229.