



Solutions

Ermi  Free to Move Again,
Free to Live Again.

The **Standard of Care** for the Non-Operative Treatment of Severe Motion Loss

Empowering Patients to **Take Control** of
Their Own Recovery

- Patient **completely controls** their stretch
- Ermi professionals **educate and follow up** with the patient
- Ermi works with the **clinical team** throughout recovery

You can't afford the risk of complications or cost associated with a motion restoring surgery before trying the Ermi non-operative program.

20+

Years of Clinically
Proven Results

100K+

Severe Motion Loss
Patients Treated

90%

Success Rate

0

Complications

Ermi Technology

Treats **Severe Motion Loss** in the Knee, Shoulder, Ankle, Elbow, and Big Toe

Completely **Patient Controlled**

Easy to Use

Distinctive, **Patented Technology**

Provides a High Intensity Stretch to Mimic Manual Therapy Force Application

Clinically Proven Results in **Only 1 Hour Per Day**



Flexionater® Platform

Overview

- Utilizes hydraulic load delivery with quick-release mechanism
- Able to generate loads up to 215 foot-pounds of torque in small increments



Ermi Knee / Ankle Flexionater



Ermi Shoulder Flexionater

Extensionater® Platform

Overview

- Pneumatic (inflatable) air-bladder technology with quick-release mechanism
- Able to generate loads up to 40 foot-pounds of torque in small increments



Ermi Knee Extensionater



Ermi Elbow Extensionater



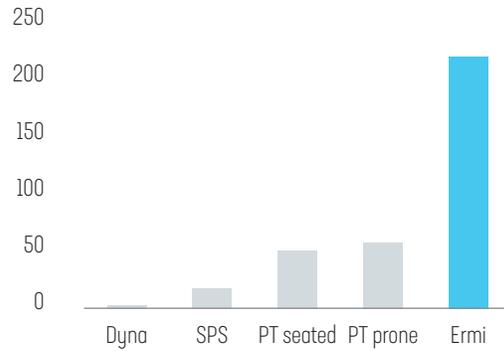
Ermi MPJ Extensionater

Knee Flexionater

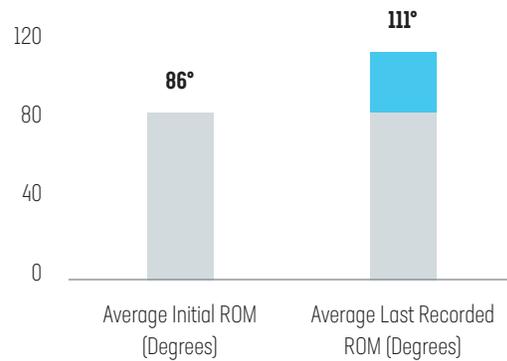
- Patient can apply a high intensity stretch to their knee nearly equal to the intensity delivered by a physical therapist.
- Uses a hydraulic mechanism
- Clinically proven to increase knee flexion
- Restores the ability to perform activities of daily living
- Introduced in 1991



Torque measure of common therapies for the treatment of knee flexion deficits

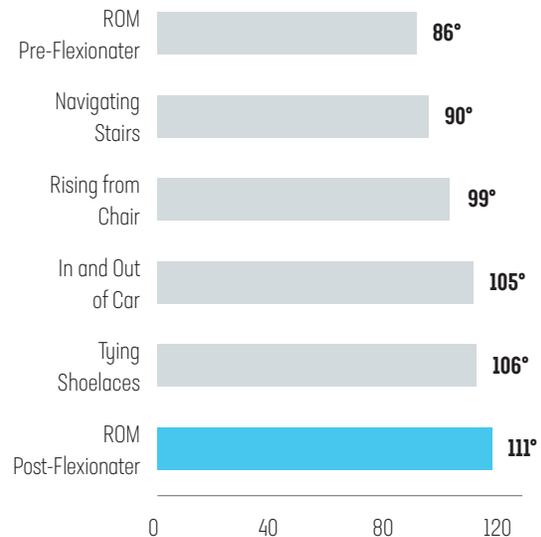


Knee flexion range of motion measurements



Average of 44 days of treatment. Sample size: 892 patients

Required knee ranges of motion to achieve various activities of daily living

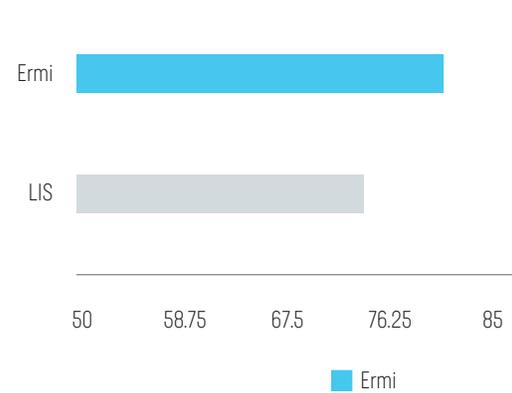


Clinically Proven to Recover Knee Flexion without Surgery

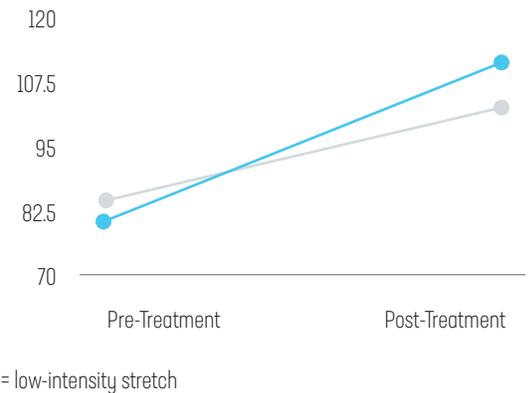
Head-to-head Study of Ermi vs. SPS Brace (Papotto 2012, Orthop Nursing)

- Ermi patients showed significantly greater gains in knee flexion and in patient reported outcome scores
- 91% of Ermi patients achieved 110° of flexion
- 22% of Brace patients achieved 110° of flexion

Outcome Score Improvements



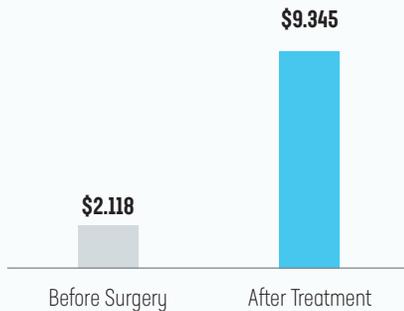
Range of Motion Gains



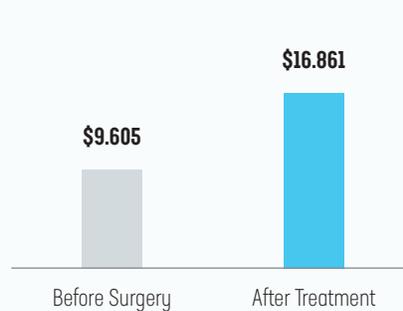
Health Economics Study (Stephenson 2010, Current Med Res Opinion)

- Comparison of pre and post-surgical knee attributable costs between:
 - PT only;
 - PT+low intensity brace;
 - PT+Ermi
- Patients assigned to the PT+Ermi cohort presented with the most pre-surgery complications
- Treatment with Ermi demonstrated significantly reduced rates of re-hospitalization and re-operation
- Treatment with Ermi provided a significant cost savings for the most complicated patients without the associated risk of surgery or rehospitalization

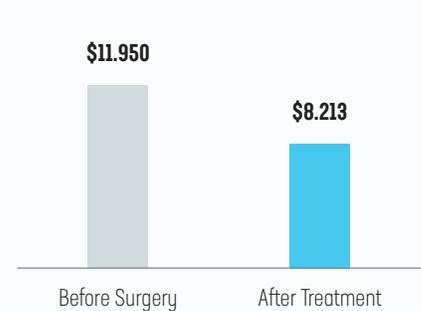
Cost Per Patient for Physical Therapy Only



Cost Per Patient for Dynamic Bracing and Physical Therapy



Cost Per Patient for Ermi Device and Physical Therapy

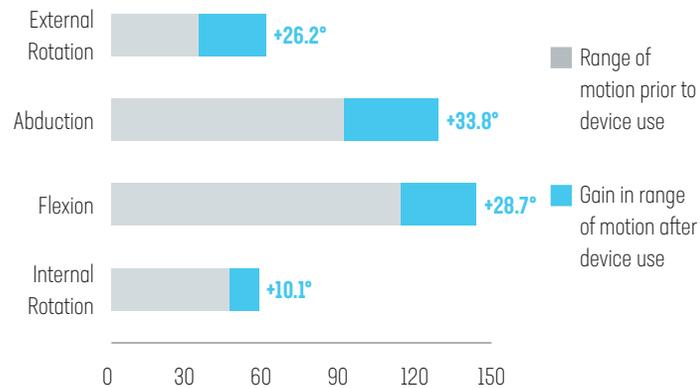


■ Pre-Index (6 months) ■ Post-Index (6 months)

Shoulder Flexionater

- Restores the ability to perform activities of daily living
- Clinically proven to increase motion in all planes including flexion
- Can stretch internal rotation and in the scapular plane
- Treats primary or secondary shoulder stiffness
- Hydraulic mechanism provides a high-intensity stretch
- Staged protocol to first increase external rotation and then abduction
- Introduced in 2001

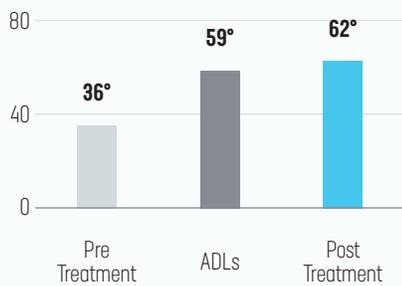
Range of Motion gains during use of Ermi Shoulder Flexionater



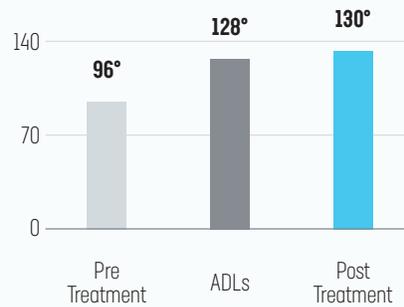
Average of 48 days of treatment. Sample size: External Rotation = 316; Abduction = 269; Flexion = 239; Internal Rotation = 130.



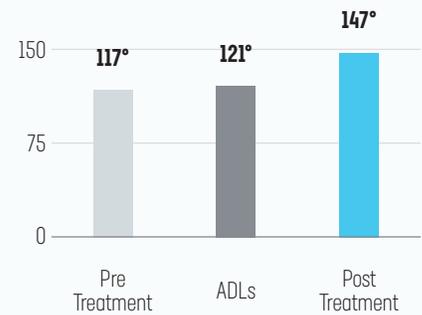
External Rotation



Abduction



Flexion



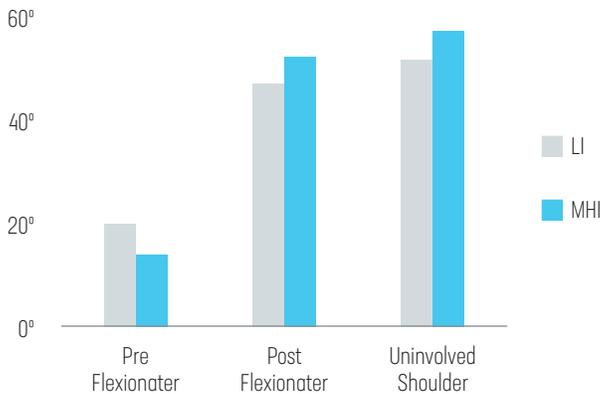
■ Range of motion prior to device use ■ Range of motion after device use

Clinically Proven to Recover Shoulder Motion without Surgery

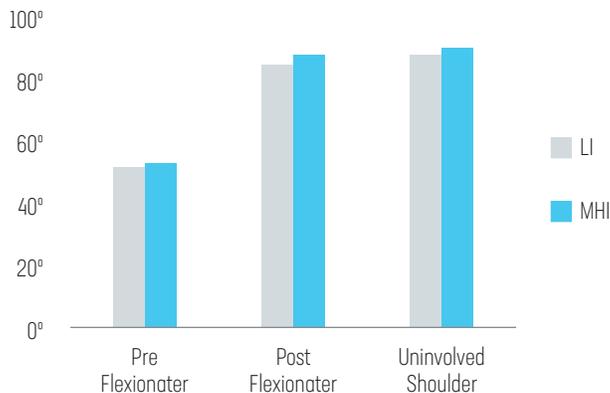
Study 1: Dempsey et al. 2011, Am J Phys Med Rehab

- A clinical study compared two groups of patients: Low irritability group versus moderate to high irritability group
- Both groups showed significant increases in ROM and outcomes after treatment with the Flexionater.
- Post-treatment ROM did not significantly differ between the treated shoulder and the uninvolved shoulder
- 97% of patients avoided additional surgery to treat motion loss
- The Ermi device is safe and effective regardless of irritability level

Glenohumeral External Rotation



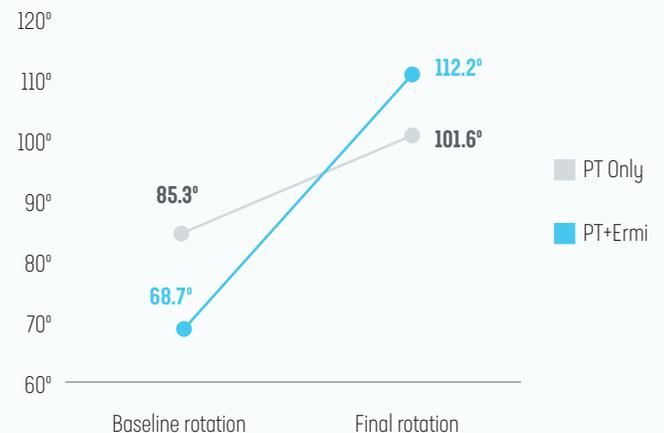
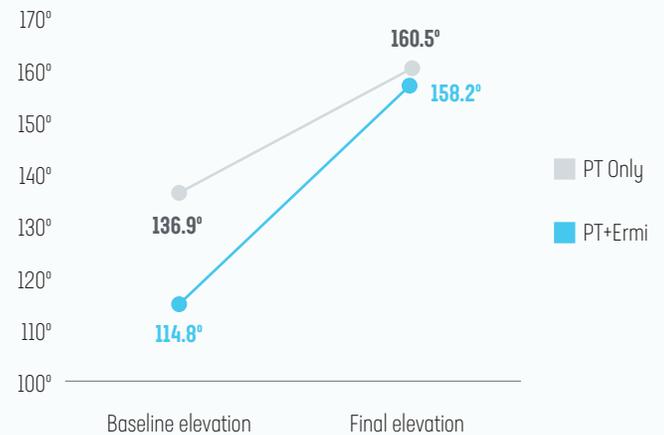
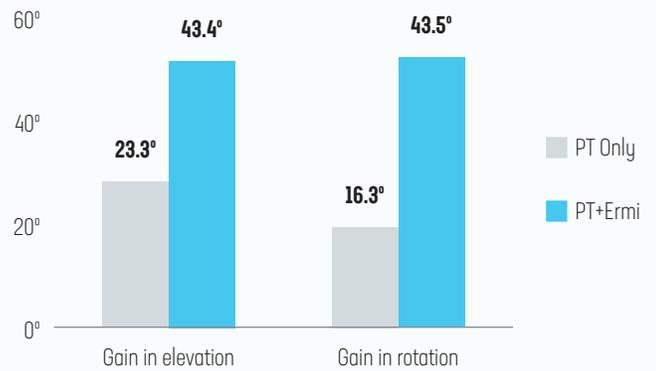
Glenohumeral Abduction



Ermi devices accelerate recovery in difficult patients

Study 2: Wolin et al. 2016, Annals of Phys Med Rehab

- Compared two groups of patients with postoperative adhesive capsulitis:
 1. Patients treated with PT alone
 2. Patients treated with PT + an Ermi device
- No difference in treatment time between the groups
- PT+Ermi patients began with significantly worse ranges of motion and finished with equivalent or greater motion.

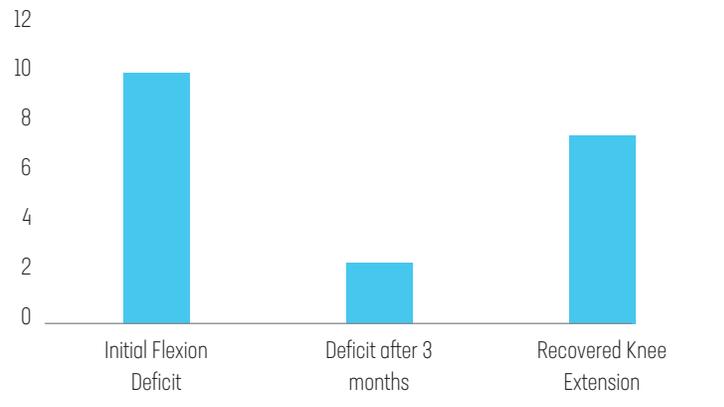


Knee Extensionater



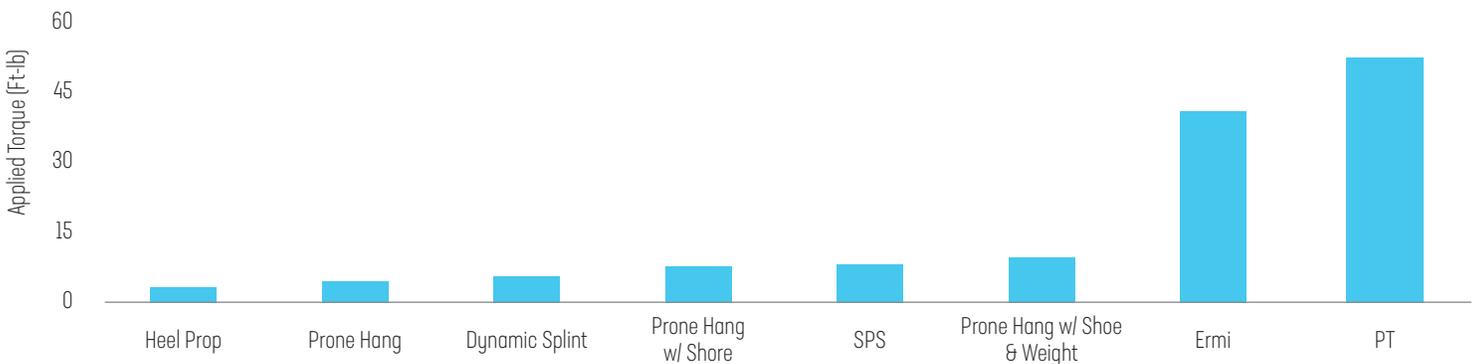
- Clinically proven to increase range of motion in the knee
- Patient can apply a high-intensity stretch nearly equal to the intensity delivered by physical therapists.
- Uses an air bag system and an aluminum frame
- Recovers knee extension which can:
 - Reduce the risk of arthritis (Shelbourne 2012, Am J Sports Med)
 - Reduce the risk of a future fall (Matsumoto 2011, Arch Orthop Trauma Surg)
- Motion gains from the Ermi device are maintained long-term
- Introduced in 1999

Improvement in Knee Range of Motion Using the Ermi Knee Extensionater



Average of 90 days of treatment. Sample size: 56 patients

Torque measures of common therapies for the treatment of knee extension deficits



Additional Applications

Ankle Flexionater

- Clinically proven to increase dorsiflexion
- Patient applies a high intensity force using a hydraulic mechanism
- Improved dorsiflexion from -7° to $+8^{\circ}$
- Introduced in 2007



MPJ Extensionater

- Designed for dorsiflexion and plantar flexion
- Patient applies a high intensity force using an air bag mechanism
- Introduced in 2006



Elbow Extensionater

- Patient applies a high intensity force using an air bag mechanism
- Introduced in 2003



We are passionate about rescuing
patients from severe motion loss.

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