

ELPHA 4

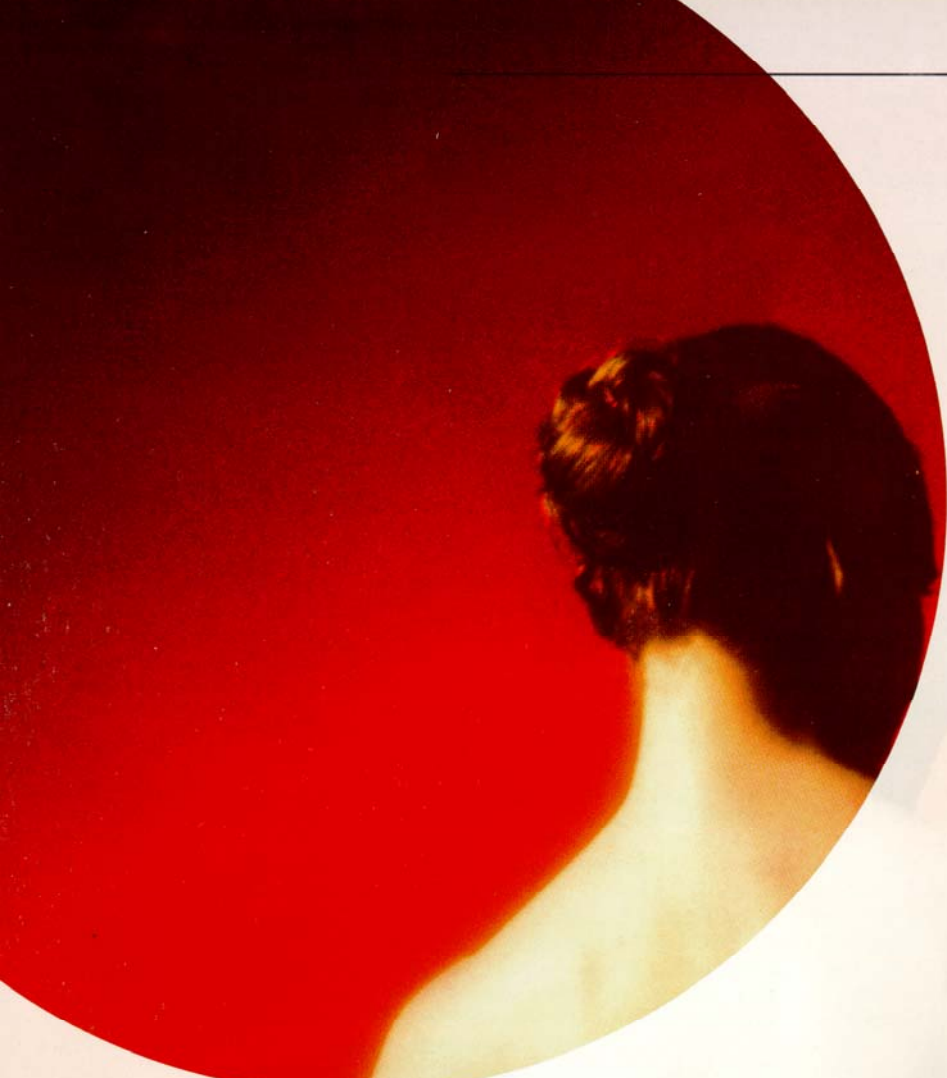
*Neuromuscular Electrical Stimulator
for Incontinence Therapy*

Conti

- Retrains weak pelvic floor muscles
- Strengthens urethral and anal sphincter muscles
- Calms overactive bladder
- Relieves pain



danmeter



fully or partially, but uncontrollably. Other symptoms may be frequent urination or a tremendous urge to empty the bladder. An estimated 20% of all incontinence involves symptoms of URGE-incontinence.

Combined STRESS and URGE

A combination of the two forms of incontinence described above affects 30% of all sufferers.

Faecal incontinence:

An estimated 0.5% of the total population suffers from faecal incontinence. The causes may be many, but often muscular insufficiency in the pelvic floor and the external sphincter muscle of the anus are responsible for the problem.

An estimated 8%^{5,8,10} of the population suffers from incontinence and 3 out of 4 are women^{5,9}. Experience shows that at least 70%^{3,5} can be cured or significantly improved by quite simple methods. Before treatment begins, a thorough diagnosis should be made. This often reveals one of the following conditions:

STRESS incontinence:

Approximately half of all those with incontinence suffer from STRESS incontinence^{5,8,10} caused by weak muscles in the pelvic floor and/or urethral sphincter. This may be due to difficult or multiple births, surgery or injury.

Typical signs of STRESS-incontinence are involuntary urine loss on sneezing, laughing, going downstairs or lifting heavy objects (grade I), as well as mild exercise, e.g. ordinary walking (grade II) or no strain at all (grade III).

URGE incontinence:

Sudden, uncontrollable contractions of the bladder muscle are a typical sign of (motor) URGE incontinence. These patients only have brief advance warning that it is time to find a toilet, and the bladder empties itself either

ELPHA 4 Conti is a battery operated dual-channel therapy system designed for use in the treatment of conditions described above.

ELPHA 4 Conti also has a pro-

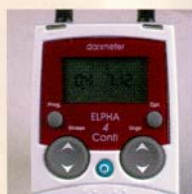



gramme for treating pelvic pain. In STRESS- and faecal incontinence,

ELPHA 4 Conti provokes a contraction of the pelvic floor, so that the user can feel which muscles need exercising. In URGE incontinence, ELPHA 4 Conti helps normalise the micturition reflex, which controls bladder function.

ELPHA 4 Conti features, pre-installed programmes, with parameters based on the most up-to-date knowledge of the pelvic floor muscles. On the one hand, the various type of muscle fibre (fast or slow twitch) can be targeted specifically, and on the other, the programme can be adjusted to enhance in treatment for individual requirements.

Experience has shown that improvement




Output of  and accumulated treatment time



Safety type plug is standard



Activation of 

Single-handed operation

may be observed in URGE incontinence after 2 weeks and after 8-12 weeks in STRESS incontinence.

The advantages of ELPHA 4 Conti in brief:

- Positive Clinical outcomes
- Utmost simplicity of operation combined with clinical sophistication
- Indication-related, individual programmes with optional adjustment
- Maximum safety guaranteed by locking function
- Treatment time monitored by Energy Counter (ET)

ELPHA 4 Conti may be used in the clinic/practice and also for home treatment.

ELPHA 4 Conti forms part of a series of electrostimulators which are all well-designed, attractive and easy to use. The series combines proven technology and innovative features.

ELPHA 4 Conti carries on the long tradition of experience and expertise accumulated by DANMETER A/S in the fields of rehabilitation and pain relief.

ELPHA 4 Conti is supplied in an ergonomic and service-friendly design, packed in a case with 1 x 9V battery, 1 x electrode cable, 1 x probe and full instructions for use. Extra accessories can be supplied as required.

Selected References:

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3. M. Fall, K. Ahlstrom, C.-A. Carlsson, A. E., B.-E. Erlandsson, S. Frankenberg and A. Mattiasson. "Contelle: Pelvic Floor Stimulator for Female Stress-Urge Incontinence. A Multicenter Study". *Urology*, March 1986; 282-287
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6. M. Zöllner-Nielsen and S. M. Samuelsson. "Maximal Electrical Stimulation of Patients with Frequency, Urgency and Urge Incontinence. Report of 38 cases". *Acta Obstet Gynecol Scand* 71 1992; 628-631
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9. M. Fall and Sivert Lindström. "Electric Stimulation, A Physiologic Approach to the Treatment of Urinary Incontinence. *Urologic Clinics of North America*, Vol. 18, No. 2, May 1991
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Easy access to adjustment menu



Slimline design with belt clips



ET means: Energy Timer



RSP means: Repeat treatment function

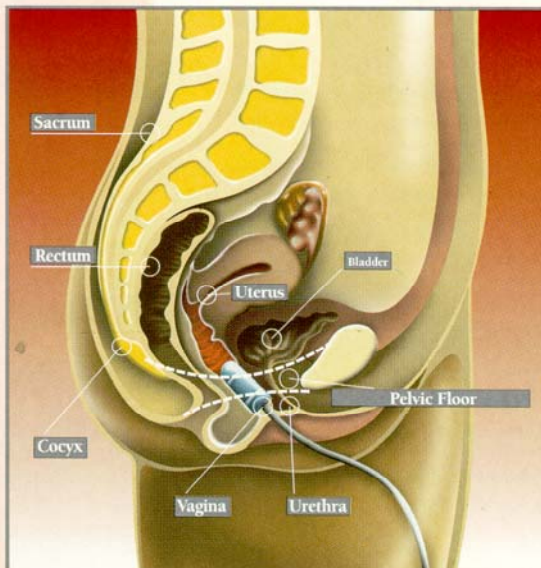


Technical specifications:

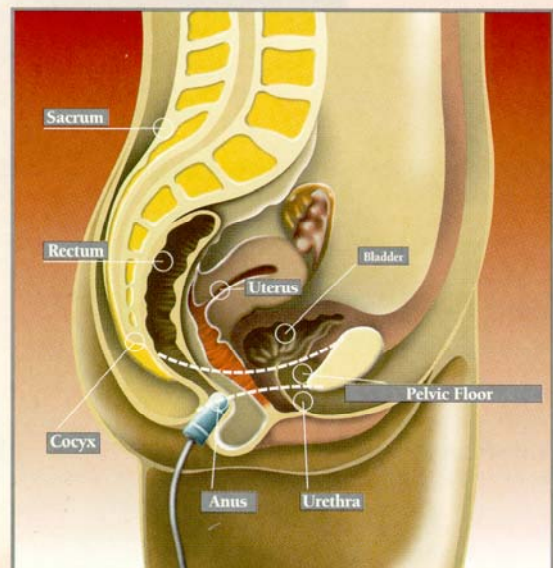
Number of channels	2 independent
Pulse form	Asymmetrical bi-phasic with discharge
Max. output voltage	300 Vpp open circuit
Max. output current	100 mA constant current into 1 kOhm load (P1/9V)
Max. charge per pulse	40 μ C
Battery	9V alkaline or NiCd (6LR61/6AM6)
Max. power consumption	115 mA
Battery life	25 hours for P4, default parameters STRESS 50 mA URGE 30mA
Weight	158 g with battery
Dimensions	114 x 60 x 31 mm

Programme	Indication	Output Level	Frequency	Pulse width	Time
P1	STRESS	0 - 100 mA	20 - 60 Hz	50 - 400 msec	5 - 95 min. + continuous
P2	URGE	0 - 100 mA	1 - 10 Hz	50 - 400 msec	5 - 95 min. + continuous
P3	URGE	0 - 100 mA	1 - 10 Hz	50 - 400 msec	5 - 95 min. + continuous
P4	STRESS	0 - 100 mA	20 - 60 Hz	50 - 400 msec	5 - 95 min
	URGE	0 - 100 mA	1 - 10 Hz	50 - 400 msec	5 - 95 min. + continuous
P5	Pain relief	0 - 60 mA	50 - 150 Hz	50 - 250 msec	5 - 95 min.
		0 - 60 mA	0.5 - 5 Hz	150 - 250 msec	5 - 95 min. + continuous

Vaginal treatment



Anal treatment



CE 0543

Dealer



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