What is the benefit of PTQ?

procedure. immediate improvement following the successful, it is likely that you would see embarrassing accidents resulting from lack of bowel control. If the treatment is Treatment with PTQ may help eliminate

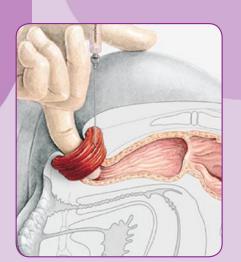
Will PTQ work for me?

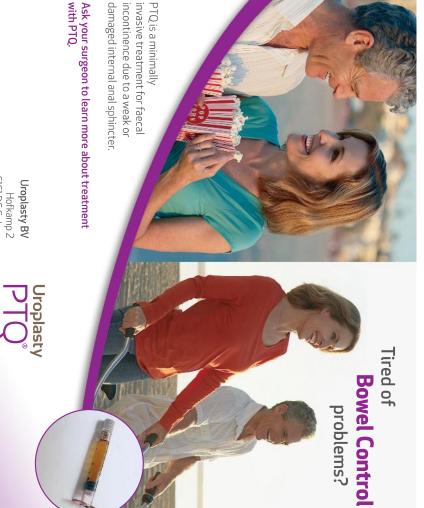
are maintained for about two years. respond to PTQ treatment and that results Multiple studies' show that many patients

- » Approximately 60%-80% of patients show improvement
- » Significantly improves patient quality
- » Reinjection is safe and effective



- » Injectable bulking agent for faecal incontinence
- » Minimally invasive treatment
- Highly effective: majority of patients respond
- » May be successful even when other therapies have failed'
- » May be used alone or in combination with other therapies, depending on your response to PTQ and your surgeon's judgement





weak or damaged internal anal sphincter. For the minimally invasive treatment of a

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Changing care to change lives.

What is faecal incontinence?

Faecal incontinence is the inability to control bowel movements. In some cases, individuals may lose only a small amount of liquid stool. In other instances, the solid bowel movement cannot be controlled.

What are the symptoms of faecal incontinence?

- » Loose stools or diarrhoea
- » Strong, excessive, uncontrollable bowel contractions which push out the stool
- » Uncontrolled relaxation of the anal sphincter

What causes these symptoms?

- » Muscle damage to the anal sphincter muscles
- » Reduced muscle tone due to aging
- » Nerve damage or injuries to the pelvic floor resulting from pregnancy, childbirth or surgery
- » Neurologic disorders (altered nerve function) such as stroke or diabetes
- » Conditions associated with chronic constipation or diarrhoea
- » Irritable Bowel Syndrome (IBS)
- » Certain medications
- > Poor giet

Note that a change in your normal bowel function could be an early symptom of cancer. If you experience a constant urge to have a bowel movement or see blood in your stool, talk to your surgeon immediately.

How is faecal incontinence evaluated?

To diagnose faecal incontinence, your surgeon will ask you about your medical history and perform a physical examination. Your surgeon may also perform one or more diagnostic tests to examine your anal sphincter muscles and lower bowel.

What are common treatment options?

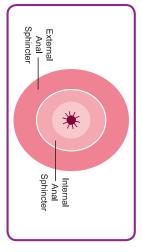
- » Dietary changes to change the bulk of the stool by adding fiber to your diet, eating smaller meals more frequently, or eating and drinking at different times
- » Exercise therapy with exercises to improve pelvic floor function and tone
- » Medications such as antidiarrhoeal medicines or drugs to relax the bowel
- » Bowel training using biofeedback and/or timing bowel movements to strengthen and coordinate muscles
- » Injectable bulking agents such as PTQ that increase sphincter muscle tissue bulk
- » Neuromodulation to stimulate the nerves controlling bowel function
- » Surgery to implant an artificial anal sphincter or to remove a portion of the bowel

What is PTQ?

PTQ is an injectable soft-tissue bulking agent used to treat faecal incontinence caused by weak or damaged muscles in the anal sphincter. PTQ treatment improves anal function by providing bulk to muscle tissue or closing gaps in the muscles.

How is PTQ treatment performed?

PTQ treatment may be performed in the hospital or clinic under local or general anaesthesia. During the procedure, your doctor will inject PTQ in 3-4 locations in the tissues surrounding the anus. The entire procedure usually takes about 30 minutes.



The internal and external anal sphincters are the muscles that keep the anus closed and continent. Disruption or weakness in the internal anal sphincter is a common cause of faecal incontinence. PTQ helps restore continence by closing gaps and making the tissue thicker.

What can I expect after the procedure?

- » You will stay at the clinic until the numbness from the anaesthetic is gone. Most patients go home the same day.
- » Your surgeon may prescribe antibiotics, laxatives and a pain medication.
- » You may resume normal daily activities and return to work within a few days.
- » You should avoid all forms of sexual intercourse, rigorous exercise and heavy lifting for 1 month following PTQ treatment.

What are the risks I should know about?

While treatment with PTQ is generally well-tolerated, as with any treatment, there are risks. PTQ treatment risks include:

- » Risks associated with anaesthesia
- » Swelling, bruising, redness or discomfort at the injection site (which can be controlled with pain medication)
- » Infection, which may be indicated by fever or pain at the injection site, in the days or weeks following the treatment
- » The need for further surgical correction or PTQ treatment

It is important to take all prescribed medications to minimize these risks. Consult your surgeon if you experience high fever or symptoms which last longer than 1 week.

