Are you a candidate for DBS therapy?

If you or a loved one is living with Parkinson’s disease (PD), you know just how challenging it can make everyday activities. If your current treatment plan isn’t working and Parkinson’s disease symptoms are continuing to limit your ability to live a full and active life, it may be time to consider Deep Brain Stimulation (DBS) therapy. This guide can help you and your doctor explore whether DBS therapy may be an option for you. Fill out the guide below and bring it to the appointment with your movement disorder specialist.

The information collected in this tool is for educational purposes and is not intended to replace discussions with your doctor.

Patient Name ___________________________________________________________________  Date _________________________________

Age _____________________ Gender _______________________________________________________________________________________

Date of Parkinson’s Disease (PD) Diagnosis ______________________________________________________________________________

AT YOUR APPOINTMENT, THE MOVEMENT DISORDER SPECIALIST MAY WANT TO KNOW MORE ABOUT WHAT YOU ARE CURRENTLY EXPERIENCING WITH PARKINSON’S DISEASE.

Have you experienced inconsistent symptom control, despite adjustments of your medication?

Yes _________ No __________

Your doctor may ask questions regarding the time of the day your medication manages your motor symptoms well (“on” times), as well as the times when your medication does not adequately manage your motor symptoms (“off” times), and if you experience sudden, uncontrolled movements of the neck/face, arms, legs, torso or the entire body (known as Dyskinesia). This chart can help you organize your observations regarding your medical management.

<table>
<thead>
<tr>
<th>TIME OF DAY</th>
<th>ON</th>
<th>OFF</th>
<th>DYSKINESIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waking up</td>
<td>☺</td>
<td>☹</td>
<td>YES ______ NO ______</td>
</tr>
<tr>
<td>Morning</td>
<td>☺</td>
<td>☹</td>
<td>YES ______ NO ______</td>
</tr>
<tr>
<td>Afternoon</td>
<td>☺</td>
<td>☹</td>
<td>YES ______ NO ______</td>
</tr>
<tr>
<td>Evening</td>
<td>☺</td>
<td>☹</td>
<td>YES ______ NO ______</td>
</tr>
<tr>
<td>Bedtime</td>
<td>☺</td>
<td>☹</td>
<td>YES ______ NO ______</td>
</tr>
</tbody>
</table>

Be sure to bring this page to your visit!

Guide completed for: □ Myself  □ Someone else (indicate relationship)________________________________________________________
MEETING WITH YOUR MOVEMENT DISORDER SPECIALIST

DBS therapy is not a last resort, so don’t wait until your medications stop working. Discussing DBS therapy with a movement disorder specialist is the next step in understanding if this is an option for you. To find a movement disorder specialist near you, go to www.finddbsclinic.com.

Always take time to prepare for your conversations with a movement disorder specialist. This list of suggestions and questions can help you get started.

BEFORE YOU MEET WITH YOUR DOCTOR:

☐ Prepare the questions you want to bring with you.
☐ Gather your medical records to share.
☐ Think about the treatment goals that you would like to achieve with your therapy (e.g., tremor, rigidity, uncontrolled movements, medication reduction, speech, other).
☐ Bring a family member/caregiver to your appointment.

WHEN YOU MEET WITH YOUR DOCTOR, ASK:

☐ Is this the right time to consider DBS therapy?
☐ What are the side effects of my current medication scheme?
☐ What restrictions will I have with a DBS system?
☐ Will I be able to stop or reduce my PD medications?
☐ Does my insurance cover DBS?
☐ What are the risks associated with receiving a DBS system?

DBS THERAPY CAN HELP PEOPLE WHO HAVE EXPERIENCED SYMPTOMS OF ADVANCED PARKINSON’S DISEASE AND ARE STILL EXPERIENCING SOME SYMPTOM CONTROL BENEFITS FROM LEVODOPA.1

This guide is provided for educational purposes only. It is not a diagnostic tool and should not be interpreted as offering medical advice. This guide is intended to encourage discussions with your doctor. Only your doctor can determine whether you are a candidate for the St. Jude Medical Infinity™ DBS System. All decisions regarding the appropriateness of the St. Jude Medical Infinity™ DBS System must be made in consultation with a healthcare provider and take into account the specific health needs of the patient.

There is no cure for Parkinson’s disease (PD) and essential tremor (ET), but there are options available to treat symptoms. The first-line therapy is medication. Surgical treatments are also available. It’s important to discuss with your doctor what’s right for you along with the risks and side effects of each option, such as motor fluctuations or permanent neurological impairment. As with any surgery or therapy, DBS has risks and complications. New onset or worsening depression, which may be temporary or permanent, is a risk that has been reported with DBS therapy. Suicidal ideation, suicide attempts, and suicide are events that have also been reported. Most side effects of DBS surgery are temporary and correct themselves over time. Some people may experience lasting, stroke-like symptoms, such as weakness, numbness, problems with vision or slurred speech. In the event that the side effects are intolerable or you are not satisfied with the therapy, the DBS system can be turned off or surgically removed.

Risks of brain surgery include serious complications such as coma, bleeding inside the brain, paralysis, seizures and infection. Some of these may be fatal.