

Help your patients build a stronger pelvic floor



The pelvic health program that improves stress, mixed and urgency urinary incontinence, including overactive bladder¹

A serious medical condition many of your patients aren't talking to you about

If left untreated, urinary incontinence (UI), is associated with physical decline^{2,3} and negatively impacts measures of cognitive function^{4,5} and social and emotional well-being.^{6,7}



Up to **51%**

of U.S. women experience UI⁸

Sadly, only **25%**

will seek treatment from healthcare providers⁹

The challenges of pelvic floor muscle training (PFMT)

- Globally recommended as part of first-line treatment for UI¹⁰
- Proven to work, but **most women don't perform their exercises correctly or at all**¹¹

Help your patients perform PFMT correctly and consistently with a **non-drug, non-surgical treatment option.**

UI progression makes early intervention important

30%

of women with UI are at greater risk of hospitalization¹²

2x

more likely for women with UI to be admitted to a nursing facility¹²

Improve your patients' pelvic health with *leva*®

leva is an at-home, easy-to-use pelvic health system that can help your patients strengthen their pelvic floor muscles and decrease their symptoms of UI.

Benefits of the *leva* System

- 🏠 At-home therapy
- 🕒 Only 2.5 minutes 2x/day
- ⊗ Non-drug, non-surgical
- 💰 FSA-/HSA-eligible, with risk-free, money-back guarantee



Wand with motion sensors



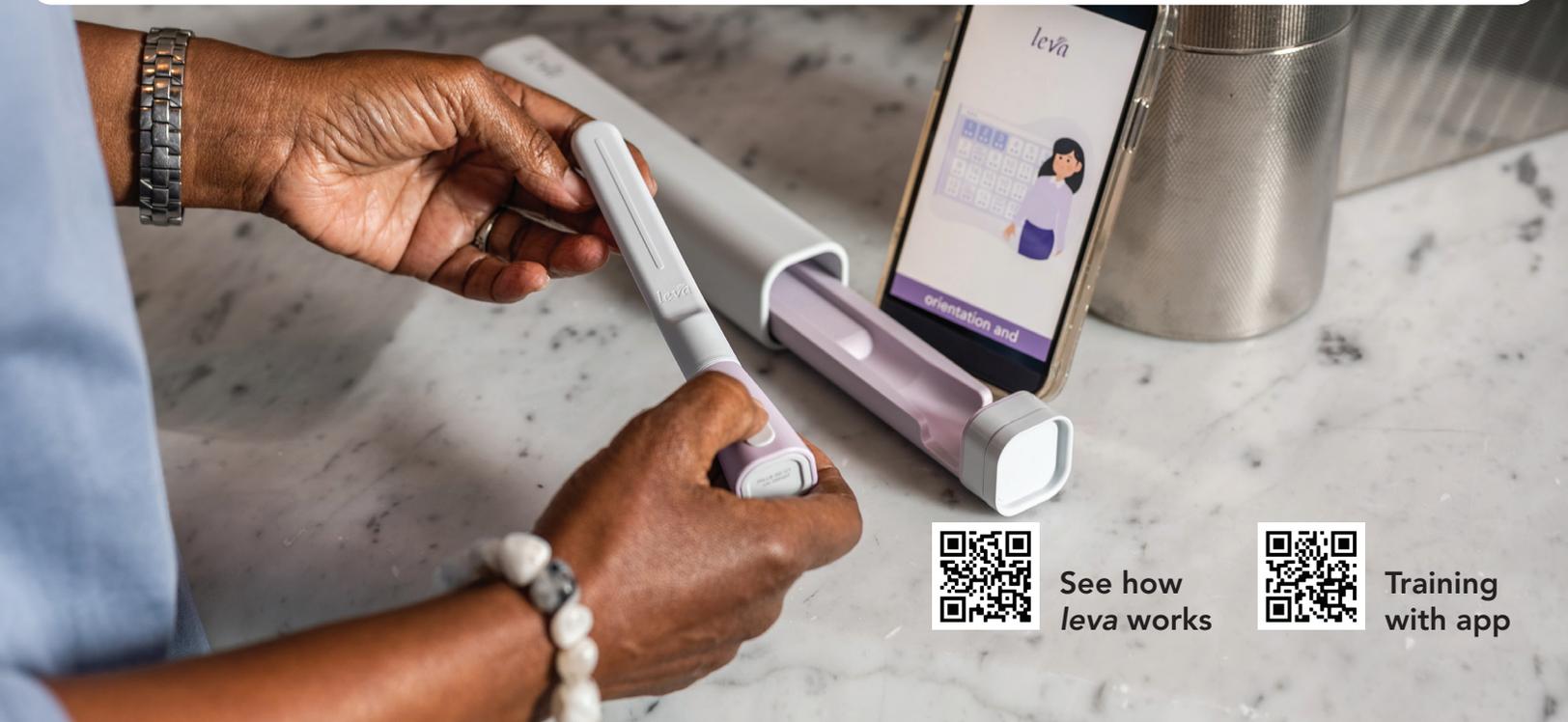
Smartphone app



levu Women's Center



Patient report



See how *levu* works



Training with app

Proof *leva*[®] works

Our multi-center pilot randomized controlled trial (RCT) demonstrated significant improvement in stress urinary incontinence (SUI) episodes and UI symptoms.¹

↓ 70%

leva users experience **70% fewer** SUI episodes

<1 leak

Moving from 3 leaks per day to **<1 leak per day** by week 8

4 weeks

Women using *leva* achieved significant UI symptom improvement **as early as 4 weeks**

69%

69% of *leva* users were using it after 8 week[†]

Help your patients take control of their pelvic health.

We provide resources that can help you and your patients get started. Visit levatherapy.com/hcps or contact our Provider Support Helpline at **855-538-2594**.

[†] Renovia. Data on file. 2021.

Introduce your patients to *leva*[®]

1.

Identify the patients who could benefit from treatment. Ask your patients about urinary incontinence, how much it bothers them and if they want to do something about it.

2.

Complete the prescription, including diagnostic code and signature. Email it to the *leva* Women's Center at levasupport@renoviainc.com or fax it to **877-800-4371**. *leva* can also be ordered electronically through select EMR systems.

3.

Inform your patient that the *leva* Women's Center will contact her in 1–2 business days.

The value of *leva*®

leva can help improve your patients' day-to-day quality of life by improving their UI symptoms, allowing them to return to the activities and lifestyle they enjoy.

"Now I'm able to wait longer between trips to the bathroom. I'm having less urge incontinence and spasms. And I'm not wearing pads."

—JoAnn C., age 62

"The ability to [use *leva*] in the privacy of my home and see the results with my own eyes is encouraging and has allowed me to reconnect to a part of my body I have felt separated from for many years."

—Kathy W., age 54

Help your patients take control of their pelvic health.

To learn more, visit levatherapy.com/hcps, call our Provider Support Helpline at **855-538-2594**, or email Provider Support at providersupport@renoviainc.com.

- Weinstein MM, Collins S, Quiroz L, et al. Multicenter randomized controlled trial of pelvic floor muscle training with a motion-based digital therapeutic device versus pelvic floor muscle training alone for treatment of stress-predominant urinary incontinence. *FPMRS*. 2021. doi:10.1097/SPV.0000000000001052.
- Ca Corrêa L, Pirkle CM, Vafaei A, Curcio CL, Câmara SM. Urinary incontinence is associated with physical performance decline in community-dwelling older women: results from the International Mobility in Aging Study (IMIAS). doi:10.1177/0898264318799223.
- Parker-Autry C, Houston DK, Rushing J, et al. Characterizing the Functional Decline of Older Women With Incident Urinary Incontinence. *Obstet Gynecol*. 2017;130(5):1025-1032. doi:10.1097/AOG.0000000000002322.
- Hamana T, Dantas DM, Castaneda L, Dantas DDS. Functioning and disability of premenopausal women with urinary incontinence: An assessment by using the World Health Organization Disability Assessment. *NeuroUrol Urodyn*. 2019;(May). doi:10.1002/nau.24073.
- Lussier M, Renaud M, Chiva-Razavi S, Bherer L, Dumoulin C. Are stress and mixed urinary incontinence associated with impaired executive control in community-dwelling older women? *J Clin Exp Neuropsychol*. 2013;35(5):445-454. doi:10.1080/13803395.2013.789483.
- Mendes A, Hoga L, Gonçalves B, Silva P, Pereira P. Adult women's experiences of urinary incontinence: a systematic review of qualitative evidence. *JBI database Syst Rev Implement reports*. 2017;15(5):1350-1408. doi:10.11124/JBISIRIR-2017-003389.
- Siddiqui NY, Wiseman JB, Cella D, et al. Mental Health, Sleep and Physical Function in Treatment Seeking Women with Urinary Incontinence. *J Urol*. 2018;200(4):848-855. doi:10.1016/j.juro.2018.04.076.
- Markland AD, Richter HE, Fwu CW, Eggers P, Kusek JW. Prevalence and trends of urinary incontinence in adults in the United States, 2001 to 2008. *J Urology*. 2011;86(2):589-93.
- Minassian VA, Yan X, Lichtenfeld MJ, Sun H, Stewart WF. The iceberg of health care utilization in women with urinary incontinence. *Int Urogynecol J*. 2012;23(8):1087-1093.
- Favre-Inhofer A, Dewaele P, Millet P, Deffieux X. Systematic review of guidelines for urinary incontinence in women. *J Gynecol Obstet Hum Reprod*. 2020;49(8):101842. doi:10.1016/j.jogoh.2020.101842.
- Moen MD, Noone MB, Vassallo BJ, Elser DM. Pelvic floor muscle function in women presenting with pelvic floor disorders. *Int Urogynecol J*. 2009;20(7):843-846. doi:10.1007/s00192-009-0853-6.
- Thom DH, Haan MN, Van Den Eeden SK. Medically recognized urinary incontinence and risks of hospitalization, nursing home admission and mortality. *Age and Ageing*. 1997;26(5):367-374. doi:10.1093/ageing/26.5.367.

Disclaimer regarding patient testimonials: Testimonials are collected or recorded via surveys, emails and interviews and reflect real-life experiences from real patients. However, each individual's results will vary and included testimonials are not intended to represent or guarantee that any one patient will achieve the same or similar results. Please also note that some patients may be paid for their testimonials.

The *leva*® Pelvic Health System is intended for: (i) strengthening of the pelvic floor muscles; and (ii) rehabilitation and training of weak pelvic floor muscles for the treatment of stress, mixed and mild to moderate urgency urinary incontinence (including overactive bladder) in women. This product interacts with the user via smartphone technology.

Important Safety Information for the *leva* Pelvic Health System: Do not share the *leva* system. *leva* is a single-user medical device. Do not use the *leva* Pelvic Health System while pregnant, or if you think you may be pregnant, unless authorized by your healthcare provider. Do not use the *leva* wand in your body for longer than necessary to complete the training session. Remove the wand after each training session. Do not use the *leva* Pelvic Health System in any other place in your body. Do not have sexual intercourse while the *leva* wand is inserted. If you experience odor, fever, vomiting, diarrhea, any signs of infections or any flu-like symptoms, contact your doctor immediately. If you experience redness or swelling near the insertion area, or signs of an allergic reaction, contact your healthcare provider immediately. For instructions and a complete summary of the risks for *leva*, see its Instructions for Use, available at Renovia's website. Treatment with the *leva* Pelvic Health System is prescribed by your healthcare provider. This treatment is not for everyone. Please talk to your healthcare provider to see whether it is right for you. Your healthcare provider should discuss all potential benefits and risks with you.