

## Neurogenx®: Your Questions Answered

*MDs and DPMs detail how this technology impacts their patients and their practices.*

**By Stephanie Kloos Donoghue**

The Neurogenx® 4000 Pro with NervePro 2.0 firmware has become an increasingly useful clinical tool for podiatrists looking to improve outcomes for patients with neuropathy. What do DPMs need to know to get started with Neurogenx? What is the potential impact on practices and patients? Here is a description of Neurogenx, along with four doctors' experiences with this state-of-the-art technology, with a focus on frequently asked questions.

### What Is Neurogenx?

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sue, addressing the underlying causes of neuropathy. It works by promoting nerve healing and enhancing blood flow, providing significant relief from pain and discomfort. The treatment process is straightforward and pain-

less, making it an attractive option for patients seeking non-invasive solutions. The Food and Drug Administration-cleared system has been clinically proven to deliver outstanding patient outcomes.



Dr. Betschart

Prior to his introduction to Neurogenx technology about seven years ago, Paul Betschart, DPM, of Danbury, Connecticut, says he had many patients with neuropathy, but "there were very limited options to manage them." What's more, he found that "giving drugs just masked the symptoms. Nothing was able to provide them with any [significant] benefit."

He found a solution when he introduced Neurogenx, which has become the first line of treatment for "anyone who has any kind of nerve condition," he says. "It's pretty much the only thing that can improve the function of nerves, so we lead with it."

Similarly, patient frustration led Efren Buff De La Rosa, DPM—with five locations in the El Paso, Texas, area—to seek new ways to provide patients with relief.

"Usually, patients come in complaining of pain, numbness, tingling, or burning; they lose their balance," he says. Many of these patients previously tried medications with limited results. "They say, 'I've tried this medication and that one, and now I'm exhausted from all the pills,'" he says. "When we discover it's neuropathy, nerve compression, or both, we can offer this program as a much better alternative to medication."

Rhunelle C. Murray, MD, MHA, a neurologist and medical director of LifeWorks Neurodiagnostic Center in Fayetteville, North Carolina, introduced Neurogenx as part of her wellness-based neurology center. She had witnessed its benefits at her previous position in Pennsylvania. "Patient results were good, and that facility had a long waiting list to get people in," she recalls. When she opened her Fayetteville practice—in a growing area with many older diabetic and chemotherapy patients—"I knew I wanted to bring Neurogenx here."

### How Does Neurogenx Fit into the Office Setup?

Terel S. Newton, MD, medical director of Total Pain Relief, LLC, in Jacksonville, Florida, is a Board-certified anesthesiologist and fellowship-trained interventional pain physician specializing in pain management, medical cannabis therapeutics, and neuro-regenerative medicine. He says the compact size of the Neurogenx unit can be integrated into clinics of all sizes. "The system fits easily into an existing clinic environment, typically in a dedicated treatment room for patient comfort and consistency," he says.

Dr. De La Rosa has two units—one for his west-side office locations, and the second for offices on the east side. In his large main office, the first floor is dedicated to general care, and the second floor is for treatments such as Neurogenx. He has created protocols to ensure consistent treatment by doctors and staff regardless of their location. He says these protocols are useful, too, as he expands and adds new associates. "If they don't follow the protocols, they might miss things," he says.

Dr. Betschart originally set up a single unit in a sep-



Dr. De La Rosa



Dr. Murray



Dr. Newton

## Neurogenx *(continued)*

arate room but added a unit in a second room recently "because we ran out of capacity and needed another to accommodate more patients," he says. Even with doubling his capacity, he found that additional staff members were not needed. "It's very easy to use, highly beneficial for patients, and it doesn't require much staff time. It's pretty much a 'set-it-and-forget-it' treatment," he says.

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Dr. Murray has four Neurogenx units and set up her treatment rooms with expansion in mind. "Each treatment room has three chairs because our goal is eventually to have six devices," she says. Dividers in each room provide privacy, if needed. Currently, a single technician manages up to two patients in each room, which would expand to three when the new devices are added.

### What Kind of Support Does Neurogenx Provide?

When Dr. Murray received her first Neurogenx unit, the company provided a few virtual sessions that covered setup, calibration, and use. Neurogenx helped with marketing as well. "It provided flyers and posters to put up in the office, as well as flyers to bring to primary care physicians' offices," she says. "This helps [other physicians] understand that we have this treatment available for their neuropathy patients."

Neurogenx is also available by phone on a weekly basis to brainstorm about difficult-to-manage cases, she adds. The company also has connected Dr. Murray with other Neurogenx providers who may have had similar cases for ideas.

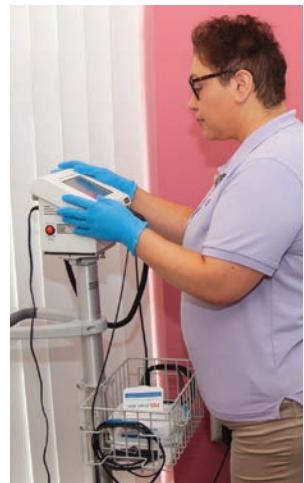
Dr. Betschart hands patients Neurogenx pamphlets during the exam if he identifies nerve symptoms, a useful tool to reinforce his explanations. Neurogenx also provides other print marketing materials, including ads, postcards and banners, as well as digital marketing elements such as customized websites, social media marketing, videos, and other digital content. "We have a strong landing page on our website for people seeking information, and we do Facebook marketing to general leads for neuropathy patients," says Dr. Betschart.

In addition, Neurogenx providers are listed on its website, searchable by location for easy access by both physicians and patients.

### When Has It Made a Difference in Patients' Lives?

"We see a lot of neuropathy patients," says Dr. De La Rosa. "One thing that gets missed a lot—by both podia-

In Dr. Murray's practice, a single technician manages up to two patients in each treatment room. Dr. Murray currently has four units and says she plans to expand to six.



trists and primary care doctors—is nerve compression syndromes: tarsal tunnel, neuromas, etc. Diabetics are more susceptible because their nerves are thicker from high sugar levels, which create compressions that can be misdiagnosed as neuropathy. It can be a combination problem, too. The cool thing is that Neurogenx works for both."

Dr. De La Rosa described a cancer patient who had undergone chemotherapy for a long time. "The patient presented with severe foot pain, and the treatments helped control it," he explains. "With regular sessions, the patient was able to function, walk, and even travel. He took a trip to Israel and did very well. I truly believe that anything involving nerve issues can benefit from Neurogenx. It helps with nerve regeneration, improves function, and helps people feel better overall." He adds that every patient should be examined for neuropathy and nerve compression—even during routine procedures, such as getting their toenails cut—as not all patients realize that there may be a solution for their discomfort. "Patients don't always complain," he says. "If you're not actively evaluating them, you'll miss a lot."

Dr. Newton says he finds Neurogenx useful for a variety of conditions as well. "I recommend Neurogenx for peripheral and diabetic neuropathy, radiculopathy, post-traumatic nerve pain, and post-surgical nerve dysfunction," he explains. "It enhances nerve signaling and micro-circulation, complementing regenerative and multimodal treatment approaches." He cites three success stories:

- A 68-year-old diabetic patient reported over 60 percent improvement in sensation and balance.
- A 45-year-old post-accident patient with chronic neuropathic pain experienced major symptom reduction and resumed activity.
- A 62-year-old retired nurse with chemotherapy-induced neuropathy regained fine motor control and improved sleep.

Dr. Betschart says he finds that the effects and rapidity of improvement can vary. "Some people have profound effects very quickly, and some take a long time to achieve results,"

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## Neurogenx (continued)

he says. "But I'd say probably 85 percent of patients get some positive benefit from it."

He describes one patient whose short-term treatment was very effective. "A type 1 diabetic in her early 20s came in with fairly bad neuropathy," he explains. "Within the first eight-week protocol, she was pain-free and didn't need to come back [for additional treatments]."

Dr. Murray lists many conditions for which patients have experienced positive results, including any type of neuropathy (diabetic or chemotherapy-induced), trauma, sciatica, tarsal tunnel syndrome, restless leg syndrome, phantom limb syndrome, and complex regional pain syndrome. She shares details of three cases.

- One patient was what Dr. Murray says she considers one of her top Neurogenx success stories. "The patient had left lower extremity weakness and was using a walking stick," she explains, and often dragged his leg. "He



In Dr. De La Rosa's practice, patients see that the practice keeps up with the latest technology.

Dr. Murray. As she described to the patient potential benefits of Neurogenx treatments, the patient looked at her skeptically. "I don't see how this could help me," he said to me. But then he added, 'I don't have anything to lose.' Insurance covered the initial treatments, and the patient began to notice a difference around week six. "At the end of his initial 12 weeks, he said, 'If my insurance is not going to continue to pay for it, I'm prepared to pay out of pocket because this has really helped me.'

### What Is the Financial Impact?

Dr. Murray's experience highlights a key benefit of Neurogenx: many patients are willing to pay for relief even if insurance does not cover treatments. She fo-

cuses on providing access to the technology for as many patients who could benefit, recommending starting with a cash-based fee structure. "If you do this as a cash-based service at a minimal fee that the average person can afford, you will still be doing well with the services," she explains. "This equipment will pay for itself."

Dr. Betschart says his office submits claims for insurance but also offers "reasonable cash fees" when needed.

A large percentage of Dr. De La Rosa's patients are on Medicare, and many have coverage. But he considers Neurogenx as one of his cash-based ancillaries as well. "It's helped both ways—through insurance and from a cash-based perspective," he says. "It's definitely helped the bottom line."

Dr. Newton says that Neurogenx has provided "a substantial financial impact" to his practice. But the real value, he continues, is the improved patient outcomes, which he says are "priceless."

### Would You Recommend Neurogenx to a Colleague?

Dr. Betschart says research supports the effects of Neurogenx, and that the practice-building aspects make it a worthwhile investment for any DPM. "If you treat patients with Neurogenx, you're going to have happy customers. And if they're happy, they are going to refer people to you."

Besides realizing a positive financial impact of Neurogenx treatments themselves, Dr. De La Rosa says that by having a wide array of diagnostic and treatment tools, all patients see that the practice keeps up with the latest technology—another practice builder that leads to referrals.

He adds that Neurogenx "is something every doctor should have in their toolbox." Comparing it to another electrical stimulation unit for neuropathy pain he previously used, he says, "Neurogenx is on a whole different level. The technology and the studies behind it are far superior. It's like going from playing high school baseball to playing in the major leagues."

*For more information, visit [www.neurogenx.com](http://www.neurogenx.com), click here and see page 15 in this issue.*

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had not driven for two years [because] he was unable to move his right foot—unable to pick it up to exert effort." The patient could not wiggle his toes and had no feeling in the foot, but "there was pain at the same time," a combination of sensations that often confuses patients, she says. After a course of treatment that included Neurogenx as well as lidocaine injections, he experienced dramatic results. "He could actually feel his toes," she recalls. "He was literally in tears, because he had not done that for two years." Before long, he was able not only to walk without assistance but regained his ability to drive again.

- Another of Dr. Murray's patients had phantom pain where her toes had been amputated because of diabetes. After her treatments, the patient described her experience of taking her grandchildren to the zoo. "We walked for miles," she told me, adding, 'I didn't need to sit down like I normally needed to. I also noticed that I don't have that phantom pain anymore.'

- A third patient was particularly skeptical about Neurogenx during his initial visit. He had been diagnosed at least five years earlier by another physician and given oral medications but "did not notice a big difference," says