



stim yourself fit

The new multi-purpose device - for therapy and training

Congratulations on the purchase of your own personal fitness and well-being trainer

You future cosmetics assistant, masseur and muscle trainer, your relaxation and pain therapist.

With the "**stim 2 fit**" transcutaneous-electric muscle stimulation device, you can actively do your own well-being a lot of good!



The scientific background of transcutaneous electric nerve and muscle stimulation has been well known and well researched for years.

The **stim 2 fit** applications, pain therapy and muscle training, are based on scientific and conventional medical methods.

stim 2 fit is a medical product of class IIa as per directive 93/42/EEG, appendix IX for medical products.

stim 2 fit is certified in line with the Medizin-Produkt-Gesetz (MPG) medical product law.

stim 2 fit – your companion in all life's situations.



stim yourself fit

Electro stimulation - basis and background knowledge.	4
Short operating instructions.	5
Program groups and their content	
1. Beauty. Programs 1 – 4	6
2. Well-being - regeneration – massage . . . Programs 5 – 8	10
3. Muscle training. Programs 9 – 12	12
4. Pain therapy. Programs 13 – 16	14

Contraindications

It is not advisable to use the device / the device should only be used after prior consultation with a doctor:

- **during pregnancy**
- **by persons with known seizure conditions (epilepsy)**
- **by persons with pacemakers or other electronic implants**
- **by persons with cardiac arrhythmia**
- **in the event of tumour conditions in the area of stimulation**
- **skin irritations / eczema / wounds in the area of direct contact with the electrodes**
- **in the event of pains with an unexplained cause**

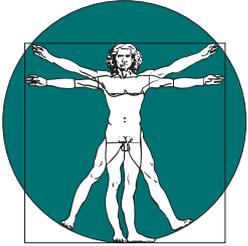
Possible side effects include excessive stimulation of muscular stiffness or an intensification of the pain. In such a case, the **stim 2 fit** should not be used until the condition has improved and then treatment should be started again with reduced application times.

Any reddening which may occur underneath the electrodes is a result of a localised increase in circulation. If the reddening remains for a longer period, possibly accompanied by itching or soreness of the skin (in rare cases), stimulation must be stopped for the time being.

It is then essential to consult with a doctor.



Why and how does electro stimulation work?



The history of electro therapy

The electrical stimulation of nerves and muscles has a long history. Therapy using stimulation current was already known in ancient times. Electric rays were used to treat rheumatic conditions.

Advances in technology and research in medicine saw devices developed which could emit stimulating currents in a controlled manner. Today's technology even makes it possible to manufacture portable pocket-sized devices so that the user is not restricted to certain locations with access to the mains.

Today's standards in medical electro therapy have developed over the last 30 years.

In this time, possibilities for use have been resolutely researched and updated. Thus medical electro therapy has most recently been used for rehabilitation of chronic illnesses and even in sporting medicine and medical training therapy.

The effect can be explained by natural processes in the body.

Stimulation of our muscles using electrical stimuli which are carried into the muscles through the nerve. Stimulating current therapy mimics the signals from the nerves and either stimulates the muscle cells directly or the nerves which feed the muscles, completely free of pain.

In this way, it is possible to build muscle, massage, relax and achieve better circulation.

The stimulation of pain relief is another possibility. For cosmetic purposes, the treatment takes effect by promoting circulation in the skin and neighbouring tissue.

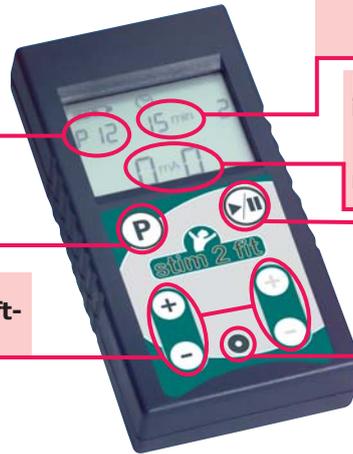


Why and how does electro stimulation work?

Displays the respective program number

You use the »P« button to select the program you require

You use these buttons to select the required current intensity for the left-hand and right-hand channels



Displays the duration of the program in minutes

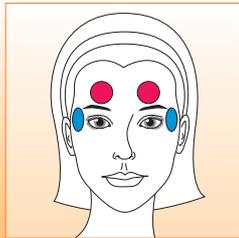
Displays the current intensity selected in mA for the left-hand and right-hand channels respectively. The strength of current can be regulated individually for each channel

You use this button to start or pause the program

On/off switch

* For detailed information, please refer to the enclosed operating instructions

Explanation of the positioning of electrodes (coloured markings in the application pictures)



The correct electrode positioning for the left-hand and right-hand channels is indicated by coloured dots or squares in each application picture. Red markings denote the cathode and blue markings denote the anode.



The plugs on the connecting cables are also red and blue so that they cannot be confused. However, it is not dangerous if the electrodes are still connected the wrong way round. Effectiveness, however, will not be ideal.



Program group 1 – Beauty

Program 1

Eye care

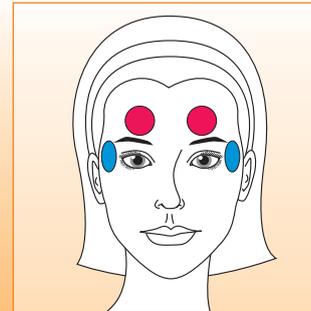
We all are familiar with it. The ever-increasing set of little wrinkles around the eyes. At first, they're accepted as laugh-lines and seen as a symbol of maturity. But, when the eyes also start to swell up, deep wrinkles plough their way through the skin and puffy lids appear, the time has come to do something about it.

You can use this particular program to deliberately stimulate the muscles around the eyes. You will notice the muscles working straight away from the slight twitching. The activation of the muscles stimulates the circulation. This relaxing skin care also contributes to an increase in well-being, making you appear more awake and content.

Electrode positioning:

Apply the 32 mm round electrode as shown in the figure.

In order to prevent triggering unpleasant sensations, you should increase the current strength very carefully. Currents of 4 - 6 mA are normally sufficient.



Red cable (+) anode
Blue cable (-) cathode



stim yourself fit

Program group 1 – Beauty

Program 1

Smoothing the face and throat

As already described in the eye care section, the aim here is to use the muscle stimulation to help the circulation of blood and cause a relaxing effect.

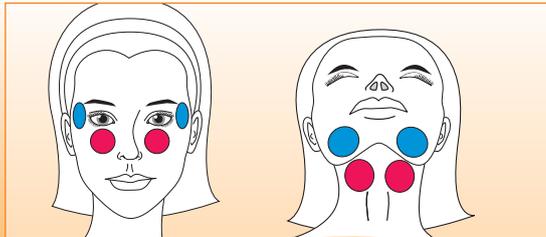
You can choose which areas of the face you wish to address; whether it's the forehead, cheeks or throat and chin.

Refer to the pictures for the possible electrode positions. For the best results, choose a 32 mm round electrode or 50 x 50 mm. IN this case too, the skin is sensitive and low level current strengths are required.

Exercise caution when stimulating the throat!

Electrode positioning:

Place the electrodes centrally below the chin and not where you can feel the arteries in the throat.



Program 2

Stomach / hips

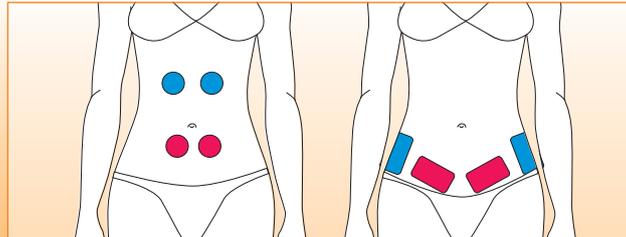
Muscle training and fighting the fat

The stomach, that tiresome subject - you can't magic it away. Weight reduction is usually the magic word. Weight reduction is effectively aided by training the stomach muscles. With **stim 2 fit** you can single out the respective muscles for direct stimulation.

The stomach contains several different individual muscles. The central stomach muscle is responsible for giving you a slim stomach and a good upper body posture.

Electrode positioning:

Refer to the pictures for the right electrode positioning for this muscle. Use a 32 mm round electrode or 50 x 50 mm and 50 x 90 mm square and rectangular electrodes and arrange them symmetrically.



stim yourself fit

Program group 1 – Beauty

Program 2

Upper arms

Out upper arms often have little shape and flabby, coarse skin. The cause is usually a lack of movement and muscular work. The **stim 2 fit** can be used to carry out muscle training.

In this case too, it is all about stimulation of the circulation of blood. You have the option of treating the front side or the reverse side of both upper arms depending on where the need is greatest. Square 50 x 50 mm electrodes are recommended.

Program 3

Chest and shoulders

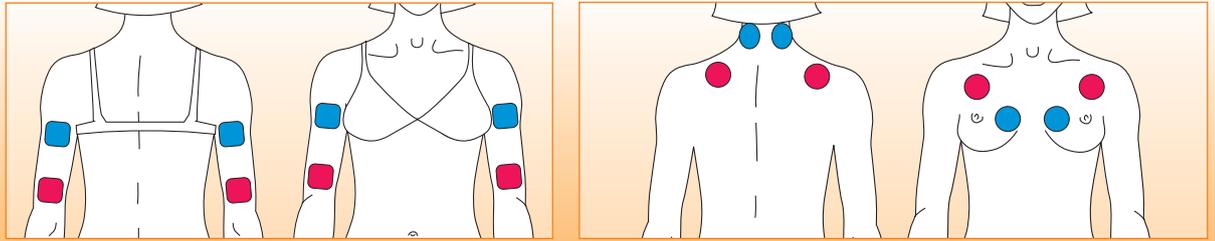
This training program targets development of the chest muscles. A firm bust depends of course on the nature and the size of the mammary gland.

The mammary gland cannot be accessed by current therapy, but the muscles beneath can. This program helps build muscle which doesn't just have an influence on the bust, but affects posture and movement in the upper body as a whole. Refer to the pictures for the electrode positions.

Use 50 x 50 mm size electrodes.

Electrode positioning:

Place the electrodes on the body symmetrically and make sure that you achieve a good level of twitching in the muscles. Some times it is necessary to change the position of the electrodes; however, it is usually sufficient to displace them by a few centimetres.



stim yourself fit

Program group 1 – Beauty

Program 4

Bottom

The bottom is equipped with a very strong set of muscles. Unfortunately, unwanted fat and cellulite zones are often to be found in this area and are very difficult to combat. Muscular training is one way of improving shape. The picture shows the possible electrode positions for building muscles. A square electrode of 50 x 50 mm is sufficient. However, larger electrodes can be used.

Electrode positioning:

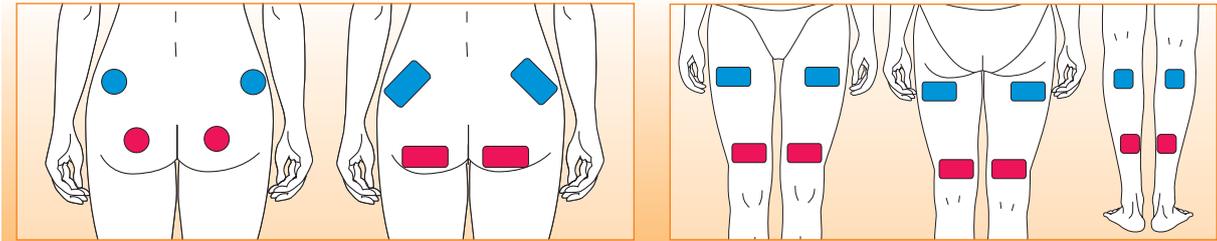
To improve circulation, e.g. for cellulite therapy, it is best to choose symmetrical regions to the right and left of the affected area.

The "circulation" function (program 6) may also be helpful.

Program 4

Legs - thighs and calves

It is usually a lack of trained muscles in the legs which disturbs us most, particularly in conjunction with areas of cellulite in the thigh area. Targeted muscle training for the front and back of the thigh and calves is very simple to perform. Follow the pictures for the right electrode positioning. Select the rectangular size 50 x 90 mm for the thigh and a square 50 x 50 mm for the calf.



Program group 2 – Regeneration and massage (well-being)



This program group is subdivided into the following functions:

- Relaxational massage
 - Circulation
 - Venous reflux
 - Active relaxation and recovery
- Program 5**
Program 6
Program 7
Program 8

Incorrect posture caused by work (sitting for extended periods at a desk, work on the computer, driving for long periods, constant standing, incorrect lifting and carrying of heavy loads etc.) often causes uncomfortable muscular seizures. Pain is often the result.

The programs listed help you to get fit again. These applications can even be of great benefits for those who do a lot of sport, e.g. in order to prevent a stiffening of the muscles or to help relieve stiffening more quickly.

Relaxational massage – Program 5

This massage program is perfectly suited to treating and relieving muscular tension of all types. Pulses are generated which generate a progressive wave of contraction, similar to a masseur's kneading and slapping technique.

The application pictures show some classic examples. For really stubborn tension or hardening of the muscles, it is recommendable to use the circulation program before using the "relaxational massage" program.

Circulation – Program 6

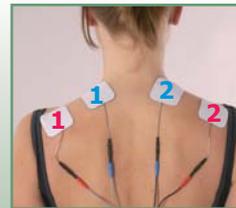
Helps circulation quickly. When used for longer periods, the capillaries start to sprout into the muscle tissue. This effect has recently been proven in medical studies and thus represents a lasting improvement of the muscular metabolism and its potential.



Neck pain



Thoracic vertebrae



Shoulder girdle



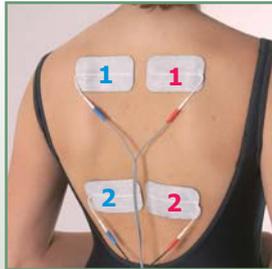
Lumbar vertebrae

stim yourself fit

Program group 2 – Regeneration and massage (well-being)

Venous reflux – Program 7

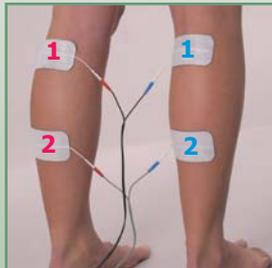
A common problem is a poor reflux of blood low in oxygen to the heart. This program supports what is known as the venous pump. Waste products are discharged which in turn eases the flow of blood.



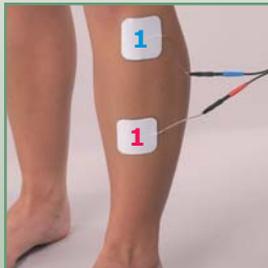
Dynamic stimulation
Back



Bottom relaxation



Dynamic stimulation
Leg extensor



Foot extensor relaxation

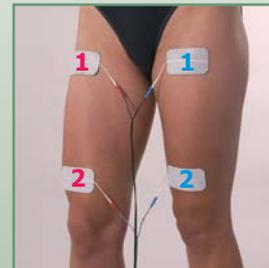
Active relaxation and recovery – Program 8

The program “active relaxation and recovery” can be used to combat “the symptoms of stress” which are manifested in different ways, such as seizures and tension in the muscles.

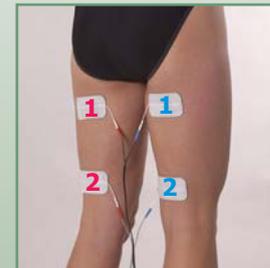
This way, you may be able to prevent the emergence of pain in the shoulder girdle, neck and head.

Electrode positioning:

The electrodes are placed symmetrically on both sides of the body where required. Arrange the poles of the electrodes as shown in the figures in the individual program descriptions.



Dynamic stimulation
Calves



Dynamic stimulation
Leg flexor



Program group 3 – Muscle training

This “muscle training” program group is subdivided into the following functions:

- **Warm-up** **Program 9**
- **Stamina** **Program 10**
- **Muscle building** **Program 11**
- **Muscle maintenance** **Program 12**

The “muscle training” program provides you with excellent options for a complete body-forming program. You can build up specific types of strength for your chosen sport, increase your stamina potential and use the “warm-up” function to prepare yourself in a focussed way for your sporting activity. Or you can simply increase your personal well-being.

The possibilities of muscle training are not just of use to healthy people, but are particularly beneficial for a handicapped or sick person who may be dependent on outside help because of personal restrictions.

In the medical world, the 14/40 rule applies, i.e. if a person is inactive for 14 days (bed-ridden), he/she will lose 40% of his/her muscular mass. This clearly shows the significance of constant muscular training.

The **stim 2 fit** muscular training programs can be a great help, even in times of illness.

Warm-up - Program 9

(Use in preparation for sporting activities, to increase well-being)
Warm-up stimulates the muscle groups receiving therapy with special pulses to bring them to “operating temperature”. The metabolism is stimulated and the muscles are prepared for stresses and strains.

Stamina - Program 10

Stamina training is designed to address the slow reacting holding fibres in the muscles. You will find a three-level program which comprises a generally activating phase at both the beginning and end and a middle sequence of clear work. Please note that stimulation still occurs during the breaks in the working phase. This is a very pleasant sensation as the next cycle of pulses thus does not come as a surprise. The stimulation in the breaks also helps the general metabolism as the working muscles help to discharge built up metabolism products. This helps prevent stiffness in the muscles. This program is suitable for all sportsmen and women whose training target it is to build stamina.



Program group 3 – Muscle training

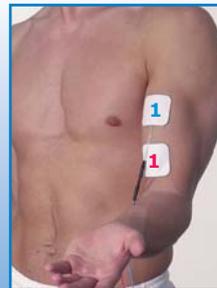
Building muscles- Program 11

The muscle building program has been developed in order to specifically build muscle and increase muscular mass. It comprises a total of 4 sequences, 2 of which are for regeneration, designed to provide the muscle groups which this program heavily taxes with the necessary recovery. Even a previously trained set of muscles should be stimulated. This program can be used as an extension of the beauty programs in the stomach, bottom and thigh regions as an additional cellulite treatment.

Muscle maintenance / muscle strengthening - Program 12

The aim of this program is muscle maintenance and muscle strengthening, i.e. it counters muscle degeneration and strains, ideal as a preparation for training with the muscle building program 11. The program is particularly suitable for preventing heavy muscular degeneration or loss of energy which is experienced after longer periods without training after injuries or operations.

It is therefore made up of sequences which alternately affect the slow and quick reacting muscular fibres. Furthermore, you can reactivate muscles which have received little or no training. It is thus also ideally suited to easing a return to fitness training. The current parameters are selected so that the muscles are not overloaded and are slowly brought back to a higher level of performance.



stim yourself fit

Program group 4 – Pain therapy



As already described in the introduction, stimulating currents were already being used for pain therapy in ancient times. The results of medical research in the last few decades have brought TENS therapy up-to-date. One benefit of pain therapy using TENS is that it is a treatment largely free of side effects. TENS stimulates certain nerves in the area of use which causes the emission of pain-relieving substances in the body.

Pain therapy using TENS gives you major benefits in cases of acute and chronic pain.

Important note:

As already explained in the section “contraindications”, it is important to have a doctor diagnose the cause of the pain. Once the cause of the pain has been established, pain therapy using the **stim 2 fit** can be a very helpful and useful supplementary therapy.

If you suffer from chronic pain, the causes of which have already been established by a doctor, in some cases you can use the **stim 2 fit** treatment to reduce the consumption of pain killers.

Explanation of the pain therapy programs:

Program 13 – Muscular seizures

Used in cases of painful muscular seizures.

Program 14 – Pain therapy 2Hz (low frequency)

This therapy is also used for Kaada stimulation (see page 26).

If a high enough intensity is selected and the electrodes are positioned correctly, twitching in the muscles occurs. This is the required effect as it causes the emission of the body's own substances (endorphins) which in turn has a pain relieving effect.

This form of stimulation can be used to trigger one of the body's own natural mechanisms. The endorphins are not released until a certain amount of time has elapsed, i.e. pain relief does not start immediately. However, the pain-relieving effect may last for several hours. Minimum duration of treatment 30 minutes, may however be considerably longer.

The more often the treatment is carried out, the longer the pain is reduced.

This program is ideal for patients with chronic pains.

Program 15 - Pain therapy 100Hz gate control (high frequency)

Unlike program 14, with this form of stimulation a pain-relieving effect can be achieved after just a few minutes.

The high-frequency stimulation addresses nerve fibres which can quickly conduct the pulses.

Quick-conducting nerve fibres are prevail against the slower nerve fibres in the centre of our nervous system, spinal cord and the brain. In particular the pain conducting



Program group 4 – Pain therapy

nerve fibres often conduct more slowly. Their pulses are suppressed by the high-frequency stimulation and pain relief quickly takes effect.

Recommendation:

For acute pain, always start with program 15. If the desired effect stops, it is recommendable to continue with program 14.

Program 16 - Pain massage

This program has several sequences and thus combines low-frequency and high-frequency stimulation and a massage effect. The pain massage is designed as a therapy for large areas of pain in the neck (cervical vertebral column), thoracic vertebral column, lumbar vertebral column areas.
Pain massage for sciatica.

Application description/examples:

Headache can be brought about by different causes.

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Migraine

Electrode positioning: Anode (positive electrode) on the main area of pain, e.g. the forehead; cathode (negative electrode) on the temple.

In the event of an attack, stimulation may also be carried out on the side not effected.

Alternative:

Kaada stimulation of the hand (page 26)

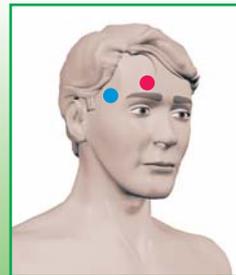
Tension headache

Electrode positioning: Anode on the main area of pain, e.g. the temple; cathode on the neck.

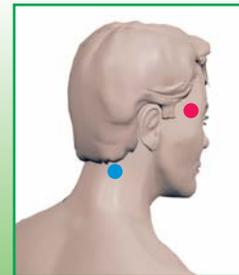
Tense headache is often felt on both sides of the back of the head and can spread right into the forehead and eye area.

Alternative:

Kaada stimulation of the hand (page 26)



Migraine



Tense headache



Program group 4 – Pain therapy



Herpes Zoster

zoster neuralgia / post-zoster neuralgia

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Initially stimulate the side of the face not affected!
The affected side can be stimulated once the pain has improved.

Electrode positioning: Anode on the ear; cathode in the area to which the pain spreads.

Facial pain

Trigeminal neuralgia (nervous pain in the trigeminus)

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

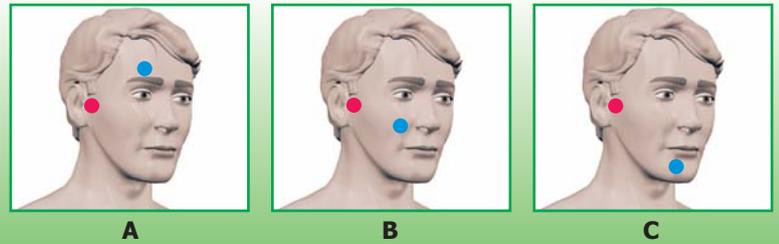
Kaada stimulation of the hand (page 26)

Electrode positioning: Anode on the ear; cathode on the end of the affected nerve branch.
If stimulating the affected side is too painful, it is recommendable to stimulate the side of the face not affected.

Figure A shows the positioning of electrodes for conditions in the upper (first) nerve branch.

If it is the middle (second) nerve branch which is affected, the electrodes are positioned as if **figure B**.

Figure C shows the positioning of electrodes for conditions in the lower (third) nerve branch.



Program group 4 – Pain therapy

Neck pain

Program recommendation:

Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints

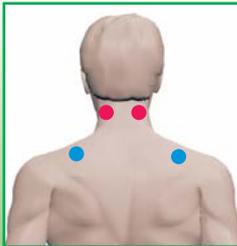
Alternative:

Kaada stimulation of the hand (page 26)

Neck pain mostly originates from the cervical vertebral column, often due to incorrect posture and degenerative conditions. The muscles in the cervical vertebral column are subject to considerable muscular tension and hardening.

If the cervical vertebrae are affected, the pain can spread towards the head. If there are changes in the middle cervical vertebra, it may spread into the shoulders and if the lower sections of the cervical vertebra are affected, the pain may spread into the arms.

Electrode positioning: Main area of pain in the neck or cervical spine region; cathode in the area into which the pain spreads.



Neck pain

Pain in the spinal column

Program recommendation:

The entire spectrum of pain programs can be used.
Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints
Program 16 for large wide-spread areas of pain

Alternative:

Kaada stimulation of the hand (page 26)

The muscle building program 11 is recommended for strengthening the ligaments and muscles which support the spinal column.

Pains in the spinal column are amongst the most common types of pain.

The causes include degenerative conditions in the vertebral bodies, changes in the intervertebral discs and changes in the muscles around the spinal column. As well as incorrect posture and degenerative conditions, there are also some general spinal column disorders such as osteoporosis (= bone wastage) or rheumatism (M. Bechterew). Of all of the sections of the spine, the cervical and lumbar spine are most often responsible for pain.

Pain in the cervical spine

Pain in the cervical spine (see neck pain) are caused by disorders in the area of the intervertebral discs or zygapophysial articulations, often related to incorrect posture and degenerative conditions. The **electrodes are positioned** as shown in the section on neck pain.



Program group 4 – Pain therapy



Pain in the thoracic vertebral column

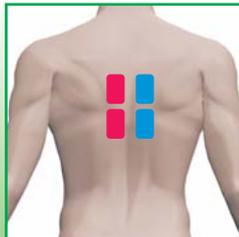
Pain in the thoracic spinal column starts with dull and shooting pain in the thoracic spine and spreads into the chest. The muscles in the affected area of the thoracic spine are often hardened.

The thoracic spine may have been altered by incorrect posture or even growth disorders. In the event of irritation from the nerve roots of the spinal column, intercostal neuralgia (pain in the nerves between ribs) may occur which spreads pain like a belt around the affected side of the chest.

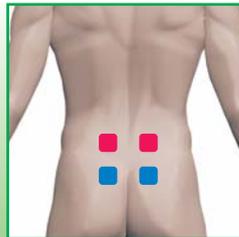
Electrode positioning:

Anode on the main area of pain; cathode as a mirror image on the other side of the head.

The figure shows the positioning of the electrodes for complaints in the lower thoracic spinal column area. If the pain affects the upper area of the thoracic spine, the electrodes have to be positioned higher accordingly.



Pain in the thoracic-vertebral column



Pain in the lumbar spinal column

Pain in the lumbar spinal column

The lumbar vertebral column is the section of the spinal column which is responsible for the most work as it supports the entire weight of the body. This leads to a lot of stress and degeneration of the intervertebral discs which may lose their shock-absorbing effect or change position between the vertebral bodies and "slip". The areas between the 4th and 5th vertebrae or the 5th lumbar vertebra and the 1st sacrum vertebra are particularly susceptible. Changes to the intervertebral discs also affect the vertebral bodies and the nerve roots which exude from the spinal column become irritated and damaged. Pain caused in this way are felt locally where the damage is or spread into the hip, groin or leg. One-sided sciatic pain is particularly notorious. The sciatic nerve runs through the buttocks and along the entire leg. Irritation to its roots in the lumbar spinal area can cause pain along its entire length or parts of its length.

Electrode positioning:

1st channel anode on the main area of pain; 1st channel cathode in the area into which the pains spreads; channel 2 as a mirror image on the other side of the spine.



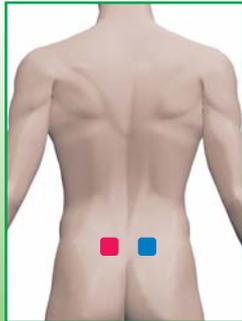
Program group 4 – Pain therapy

Pain in the sacrum

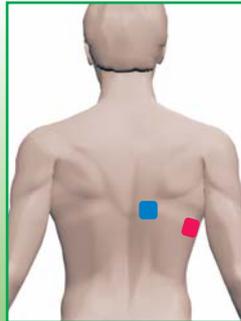
Sacrum pain is mostly caused by the iliosacral joint which joins the sacrum to the pelvis. It is mostly felt when bending and turning the torso at the same time and often spreads towards the buttocks and thighs. These joints may subject to lasting inflammation in conjunction with a general condition, i.e. M. Bechterew (= spondylitis ancylopoetica). It mostly affects young men.

Electrode positioning:

Anode on the main area of pain; cathode as a mirror image on the other side of the body.



Pain in the sacrum



Chest pain

Chest pain Pain in the thoracic vertebral column

A common cause of pain in the chest area is the thoracic vertebral column (see section of the same name).

Pain from Herpes Zoster

zoster neuralgia / post-zoster neuralgia

Program recommendation:

Program 14 for chronic complaints

Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Initially stimulate the side of the body not affected!
The affected side can be stimulated once the complaints have improved.

Electrode positioning: Anode in the area into which the pain spreads; cathode next to the spinal column at the same height as the pain.



Program group 4 – Pain therapy



Arm pain

Program recommendation: see neck pain

Pain in the arm is often caused by irritation to the nerve roots in the area of the cervical vertebral column (see also neck pain). This is a typical form of radiating pain which can spread via the shoulders and arm right into the fingers. The pain is often felt in just parts of this "route of pain", e.g. in the lower arm.

Shoulder joint pain

Program recommendation:

Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints
Program 16 for large wide-spread areas of pain

Alternative:

Kaada stimulation of the hand (page 26)

Positioning of the electrodes: Anode on the main area of pain; cathode opposite so that the area of pain has current flowing through it. Alternative: Anode on the main area of pain; cathode in the area to which the pain spreads.



Shoulder joint pain

Elbow pain

Program recommendation:

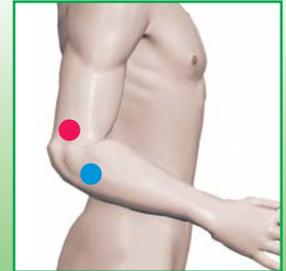
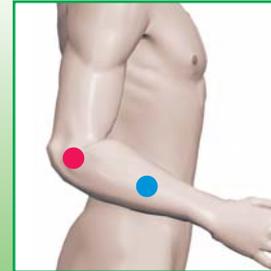
Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Positioning of the electrodes:

A) Anode on the main area of pain; cathode in the area into which the pain spreads or B) Anode above the painful area; cathode below the painful area. These anode positions also apply to tennis elbow or golfer's elbow but in this case, the electrodes are positioned in the inside of the arm.



A – Elbow pain – B



Program group 4 – Pain therapy

Hand pain / carpal tunnel syndrome

Program recommendation:

Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

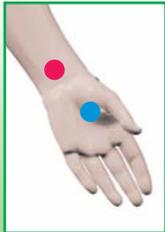
Kaada stimulation of the hand (page 26)

Positioning of the electrodes: Anode above the painful area; cathode in the thenar muscles.

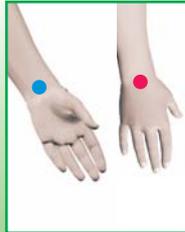
Wrist pain

Positioning of the electrodes:

Anode on the main area of pain; cathode on the opposite side.



Hand pain/
Carpal tunnel syndrome



Wrist pain

Amputation pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Positioning of the electrodes:

A) Stump pain: Anode directly above the stump;
cathode in the area into which the pain spreads.

B) Phantom pain:

Electrodes positioned on the non-amputated side!
Anode on the main area of pain; cathode in the area to
which the pain spreads.



Phantom pain



Program group 4 – Pain therapy



Leg pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

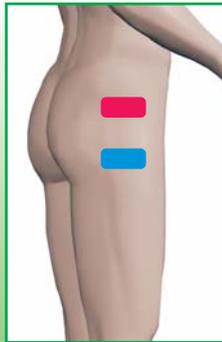
Kaada stimulation of the hand (page 26)

Hip pain

Positioning of the electrodes:

Anode above the painful area; cathode below the painful area.

Alternative: Anode on the main area of pain; cathode in the area to which the pain spreads.



Hip pain

Knee pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

The muscle building program 11 is recommended for strengthening the ligaments in the knee joints

Positioning of the electrodes:

A) Anode on the main area of pain; cathode on the opposite side.

B) Use of a 2 channel device: Place anodes and cathodes on both sides of the painful area so that the painful area has current flowing through it.

(The lines denote which electrodes belong to which channel)



A – Knee pain - B



Program group 4 – Pain therapy

Sciatic pain

Program recommendation:

Program 13 if the cause is muscular
Program 14 for chronic complaints
Program 15 for acute complaints
Program 16 for large wide-spread areas of pain

Alternative:

Kaada stimulation of the hand (page 26)

Positioning of the electrodes:

Anode on the main area of pain; cathode in the area to which the pain spreads.

The sciatic nerve is the longest and thickest nerve cord in the human body. It has its roots in the lumbar vertebral column and reaches through the buttocks, the rear thigh and calf into the foot and big toe. Sciatic pain is caused by irritation of the roots of the sciatic nerve which provokes a pain in the lumbar spine or along the nerve.

Calf pain (e.g. polyneuropathy)

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

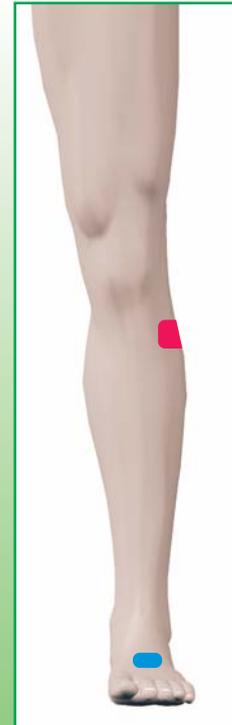
Kaada stimulation of the hand (page 26)

Positioning of the electrodes:

Anode on the head of the fibula;
cathode on the dorsum of the foot.



Sciatic pain



Calf pain



Program group 4 – Pain therapy



Ankle joint pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

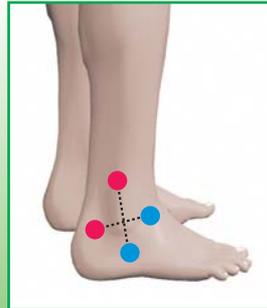
Alternative:

Kaada stimulation of the hand (page 26)
The muscle building program 11 is recommended for strengthening the ligaments in the ankle joints

Positioning of the electrodes:

Anode above the ankle;
cathode below the ankle.

Alternative: Anode on the main area of pain;
cathode in the area into which the pain spreads.



Ankle joint pain

Heel pain / Achilles tendon pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Positioning of the electrodes:

Anode on the main area of pain;
cathode in the area into which the pain spreads.

Alternative: Place anode and cathode on both sides of the painful area so that the painful area has current flowing through it.



Heel pain



Program group 4 – Pain therapy

Amputation pain

Program recommendation:

Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

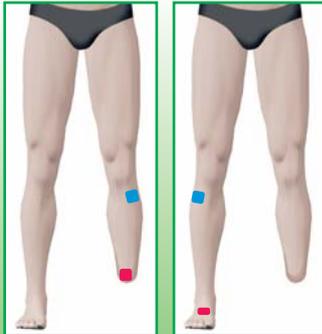
Positioning of the electrodes:

A) Stump pain:

Anode directly above the stump;
cathode in the area into which the pain spreads.

B) Phantom pain:

Electrodes positioned on the non-amputated side!
Anode on the main area of pain;
cathode in the area into which the pain spreads.



A – Amputation pain - B

Rheumatoid arthritis

Program recommendation:

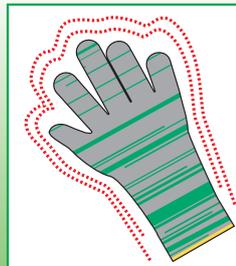
Program 14 for chronic complaints
Program 15 for acute complaints

Alternative:

Kaada stimulation of the hand (page 26)

Rheumatoid arthritis is inflammation of a joint and also referred to as polyarthritis. It is a general condition which can affect all the joints over the course of the years but mostly affects hand, finger, knee and shoulder joints. Sudden over-heating, swelling and pain in the joints are common which in turn leads to a restriction of the joints and a limitation of movement. Women are affected more often than men.

The stimulation gloves as shown in the figure are particularly helpful for combating rheumatic pain in the hands (available as accessories).



The stimulation gloves are available in various sizes



Program group 4 – Pain therapy



Kaada stimulation

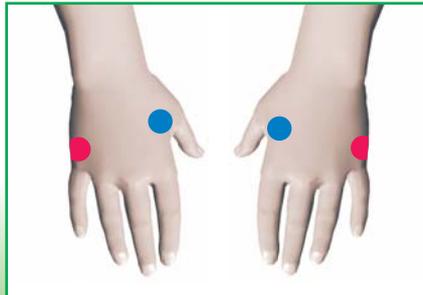
A special type of application for program 14 is "Kaada" stimulation

With "Kaada" stimulation, the electrodes are always positioned on the hands regardless of the given pain. This also leads to muscular twitching.

The effects of "Kaada" stimulation affect the whole body. It is useful if for instance pain is felt in more parts of the body at the same time or the electrodes cannot be positioned on the painful area itself.

The electrodes are always stuck to the hand regardless of where the pain is.

The effects of "Kaada" stimulation affect the whole body.



For a right-handed person right

For a left-handed person left





Innovative medical technology!
Over 30 years of successful use!