

Fewer seizures, without adding another pill.

Milo is a small implant that stimulates a nerve in your dog's neck in **short, gentle bursts, around the clock**. Nothing to dose, nothing to time, no drug interactions. Your dog wears a Smart Collar that powers it, and when that collar's battery runs low you swap it for the second collar in your kit.



Everyday wear: the button you press sits on the collar housing.

What you do as a pet owner

- Keep a collar on**
 Therapy runs only while a collar is on your dog. Two fingers should fit underneath, and walk him on a harness or a separate collar.
- Charge the one that's off**
 When the battery drains, swap collars and plug the drained one into the USB-C charger from your kit, off your dog.
- Press the button to stop a seizure**
 If a seizure starts, or you can tell one is coming, press the button on the collar or in the MiloApp. It sends an extra dose that can stop the seizure or make it shorter. It will not work every time, and does not replace your emergency plan.
- Log seizures in the app**
 Record what you saw, whenever it happens. Your neurologist reads that log and uses it to adjust the therapy.

Give it time

Milo is not a quick fix, and the first few weeks will not tell you whether it is working. The effect builds over **months, not days**. In the published studies it kept building through the first year and beyond.



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FIRST MONTH

Healing from surgery, and settling into the collar routine. **Too early to read anything into seizure counts, but keep reporting them.**

MONTHS 1 TO 6

Your neurologist finds your dog's settings. Seizure numbers move around on their own in this window, so **early changes are hard to interpret.**

6 TO 12 MONTHS

The picture starts to become clearer. **This is the earliest point worth judging the therapy on.**

YEAR ONE AND BEYOND

Benefit keeps building. If the therapy is working for your dog, this is when you will see it most clearly.

Why timing matters. Published VNS literature* suggests patients implanted soon after seizure onset have a better response, and none of the analysis argues for waiting. **We recommend Milo after the second anti-epileptic drug (AED) fails.**

Not every dog responds, and there are no screening procedures to predict whether yours will. What you can do is give the therapy its best chance: **keep a collar on, keep logging, and keep your follow-ups.**

* From the published clinical evidence for vagus nerve stimulation in people. Lagae et al., *Epileptic Disorders* 2015; Crutcher et al., *Neurosurgical Review* 2025.

Get the free MiloApp

Log seizures, check therapy status and battery, deliver an extra dose, and read the full Owner Manual, all in one place. Free for families.



IPHONE



ANDROID

Questions? auxiliummd.com · info@auxiliummd.com · (972) 792-1617

For veterinary use only. Rx Only. Milo is a prescription veterinary device used only on the order of a licensed veterinarian, as adjunctive therapy alongside, never instead of, anti-epileptic drugs. Never change your dog's medication on your own. Implantation requires general anesthesia and the risks of any surgical implant. Response varies; Milo is not a cure. See the Owner Manual in the MiloApp for full instructions and safety information. In the UK, Milo is supplied as an investigational device under the Animals (Scientific Procedures) Act 1986. Implant by Teliatry, Inc. (U.S.A.)