

ACTIVMOTION

MEDIAL CLOSING WEDGE

DISTAL FEMORAL OSTEOTOMY



NEWCLIP-TECHNICS

► **Indication:** The implants of the Activmotion range are intended for knee osteotomy in adults.

Contra-indications :

- Serious vascular deterioration, bone devitalization.
- Pregnancy.
- Acute or chronic local or systemic infections.
- Lack of musculo-cutaneous cover, severe vascular deficiency affecting the concerned area.
- Insufficient bone quality preventing a good fixation of the implants into the bone.
- Muscular deficit, neurological deficiency or behavioral disorders, which could submit the implant to abnormal mechanical strains.
- Allergy to one of the materials used or sensitivity to foreign bodies.
- Serious problems of non-compliance, mental or neurological disorders, failure to follow post-operative care recommendations.
- Unstable physical and/or mental condition.

TECHNICAL FEATURES

- **Anatomic asymmetrical implant** (green anodized for right plate and blue anodized for left plate),
- 4 offset screw holes above and below (2 offset above and 2 below) the osteotomy site improving the mechanical features of the assembly and preventing loss of angular correction (a),
- 7 **locking screws** (Oneclip®),
- 1 **polyaxial locking screw** (DTS®) allowing to avoid the intercondylar notch, if necessary (b),
Possible angulation of the screw before locking (25° locking range) thanks to the DTS® system.



REFERENCES

ACTIVMOTION INSTRUMENTS

Ref.	Description	Qty
ANC014-1	NCT Cutting guide – pièce 1	1
ANC014-2	NCT Cutting guide – pièce 2	1
ANC024	Handle for metallic wedge and cutting guide	2
ANC119-SK	3.0 mm quick coupling hexagonal non prehensor screwdriver	2
ANC120-US	Ø4.2 mm countersink with US quick coupling system	1
ANC210	Length gauge for Ø4.5 mm screws	1
ANC211	Ø4.0 mm quick coupling drill bit	2
ANC212	Ø4.0 mm DTS Trauma drill guide	2
ANC235	HTO Meary pliers	1
ANC240	Pliers for bending ACTIV plates	2
ANC312	3.0 mm quick coupling hexagonal screwdriver	1
ANC352	Ø6 mm US quick coupling handle	2
33.0222.150	Pin Ø2.2 L150 mm	3

MEDIAL CLOSING WEDGE DFO PLATE

Ref.	Description
JBTDL1-ST	Medial closing wedge DFO plate - Right - Size 1 - STERILE
JBTGL1-ST	Medial closing wedge DFO plate - Left - Size 1 - STERILE

Ø4.5 MM DTS® SELF TAPPING SCREW

Ref.	Description
ST4.5Lxx-ST	DTS® self-tapping screw - Ø4.5 mm - STERILE From L30 mm to L90 mm (5 mm increments)

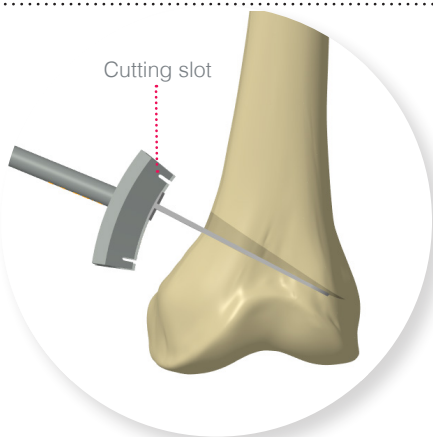
REMOVAL SET

If you have to remove ACTIVMOTION implants, make sure to order the **Newclip Technics removal set** which includes the following instruments:

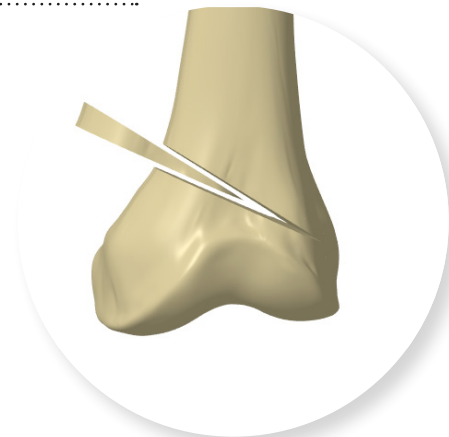
- ANC119-SK: 3.0 mm quick coupling hexagonal non prehensor screwdriver,
- ANC312: 3.0 mm quick coupling hexagonal screwdriver,
- ANC352: Ø6 mm US quick coupling handle.



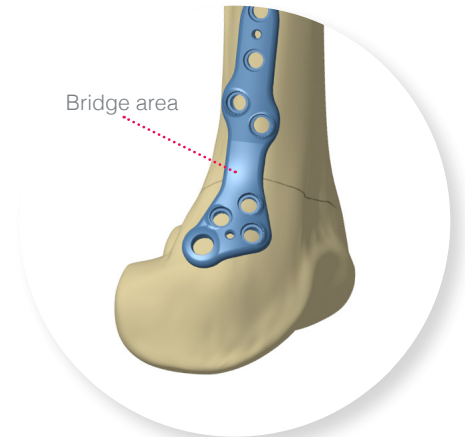
SURGICAL TECHNIQUE



1. Perform the osteotomy:
Start the first cut approximately at 5 mm above the patella groove. The cut might ends at around 10 mm before the lateral cortical bone.
Then perform the proximal 2nd osteotomy at the chosen correction degree in the medial supracondylar region with the cutting guide (ANC014-1 / ANC014-2).
Set the chosen correction degree. Introduce the blade of the cutting guide into the first cut and perform the second osteotomy in the cutting slot with a oscillating saw.



2. Remove the wedge and check that any residual bone fragments have been removed from the osteotomy.
Then, the osteotomy carefully by applying continuous pressure to the lateral lower limb while stabilizing the knee joint region.



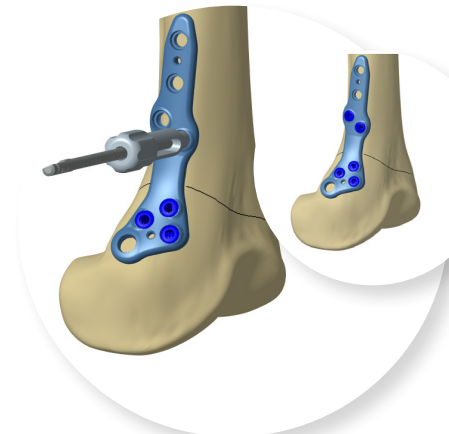
3. Position the plate onto the medial surface of the distal femur. The polyaxial hole must be positioned around 1cm above the insertion of the medial collateral ligament. It is important to ensure that the bridge region of the plate is located onto the osteotomy site and that the distal screws do not penetrate the joint.



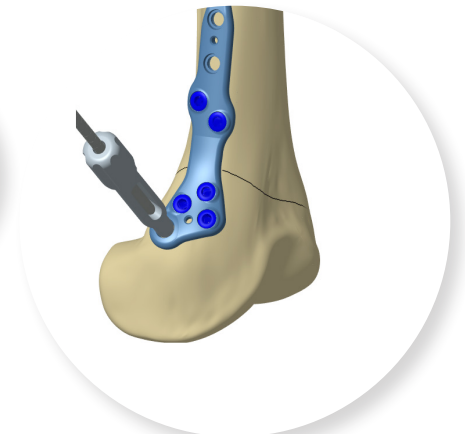
4. Lock the first Ø4.0 mm drill guide (ANC212) into the hole situated below the osteotomy cut, start drilling using the Ø4.0 mm drill bit (ANC211).

To ease the insertion of the Ø4.5 mm locking screw (ST4.5Lxx), use the countersink (ANC120-US) to widen the first cortex previously drilled. Then, insert the Ø4.5 mm locking screw (ST4.5Lxx-ST) using the screwdriver (ANC119-SK).

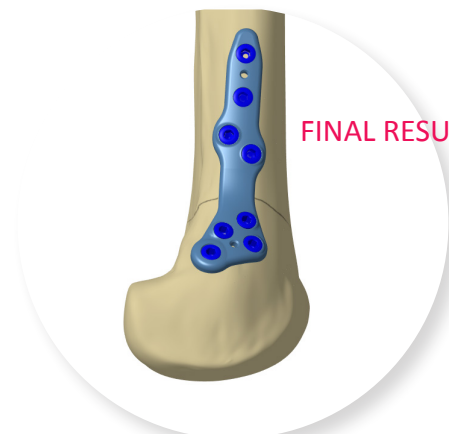
Repeat this procedure with the 2 others monoaxial holes situated below the one described.



5. Proceed similarly for the insertion of the Ø4.5 mm locking screws (ST4.5Lxx) into the 2 holes situated above the osteotomy cut.



6. Lock the Ø4.0 mm drill guide (ANC212) into the polyaxial hole. Adjust the drilling direction in order to avoid the intercondylar notch. Start drilling using the Ø4.0 mm drill bit (ANC211).
To ease the insertion of the Ø4.5 mm locking screw (ST4.5Lxx), use the countersink (ANC120-US) to widen the first cortex previously drilled. Then, insert the Ø4.5 mm locking screw (ST4.5Lxx) using the screwdriver (ANC119-SK).



7. Repeat the previous steps to insert the remaining Ø 4.5 mm locking screws (ST4.5Lxx) situated on the proximal part of the plate.