

PRODUCT RANGE

QUADRA SYSTEM

- Triple tapered design.
- Wide range.
- Reliable, compact and precise instrumentation.
- AMIS friendly.

MiniMAX

- Cementless anatomical stem.
- Easy to introduce.
- Reliable metaphyseal fixation.
- Reduced risk of thigh pain.



AMISstem SYSTEM

- First stem specifically designed for AMIS.
- Easy stem introduction through AMIS.^[14]
- Reduced bone removal.
- Proven stability.^[15,16]

VERSAFITCUP DM

- Low wear rate.^[17,18]
- Low dislocation rate.^[18-20]
- High range of motion.^[20,21]
- Long clinical history.^[22]

VERSAFITCUP CC FAMILY

- Elliptical press-fit geometry for enhanced primary stability.
- Equatorial macrostructures promoting bone on growth.
- Wide range of liners for preoperative and intraoperative flexibility.
- Ceramic heads 36 mm starting at 50 mm liner.
- 5° raise for additional antiluxation coverage, even with ceramic liners.

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AMIS & MEDACTA: LEADERS ON ANTERIOR APPROACH EDUCATION

A TESTED AND PROVEN METHOD OF CONTINUING EDUCATION

Minimally Invasive Surgery may be challenging to adapt to especially with the associated early learning curve. This learning curve has occasionally discouraged surgeons forcing them to abandon MIS/LIS for other techniques. It is Medacta's mission to reduce the challenges by providing unconditional support to surgeons wanting to change to AMIS. Medacta has created the M.O.R.E. AMIS Education Program, embraced by hundreds of surgeons worldwide who have already performed over 200'000 AMIS cases.

INSTRUCTIONAL LEVEL: HOW TO START WITH AMIS

■ 1ST STEP: AMIS REFERENCE CENTER VISIT

In several countries, you will have the opportunity to visit a Reference Center and to observe the AMIS procedure.



■ 2ND STEP: INTRODUCTION TO MEDACTA IMPLANTS

Before proceeding to the next step, Medacta recommends that you become familiar and confident with Medacta instruments and implants using your current approach. Being comfortable with the implants and instruments prior to the AMIS Learning Center and cadaver lab will allow you to focus on the AMIS approach and help decrease the learning curve.



■ 3RD STEP: ATTEND AN AMIS LEARNING CENTER

Here you will have the opportunity to operate on cadaver specimens, to experience the advantages of the AMIS Mobile Leg Positioner, to analyse difficult cases and to thoroughly explore indications.

■ 4TH STEP: RECEIVE SUPPORT FOR YOUR FIRST AMIS SURGERIES

You will receive the assistance of a Reference Surgeon for your first surgeries in your hospital.

ADVANCED LEVEL:

HOW TO IMPROVE THE AMIS TECHNIQUE AND WIDEN THE PATIENT SELECTION

The Advanced Learning Center focuses on detailed scientific topics that stimulate expert-to-expert open discussion, increase AMIS confidence and widen the patient selection for almost all primary cases.



MASTER LEVEL:

HOW TO MASTER THE AMIS TECHNIQUE, FOCUSING ON DIFFICULT CASES AND REVISIONS

The Revision AMIS Learning Center offers the opportunity to experience a cadaver workshop that includes a variety of strategies to help fracture management along with your chance to operate on complex revision arthroplasties. Strengths and limitations of the AMIS approach in revision surgeries are analysed and discussed with international high-level experts.

Simply contact Medacta and we will arrange the AMIS Education Program for you!

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rev.1.1
Last update: August 2017



Brochure

Hip

Knee

Spine

Navigation

THE ANTERIOR APPROACH: THE LOGICAL APPROACH FOR HIP REPLACEMENT

The anterior approach is the only technique which follows a path both intermuscular and internervous and therefore reduces considerably the risk of the damage to periarticular structures such as muscles, tendons, vessels and nerves.

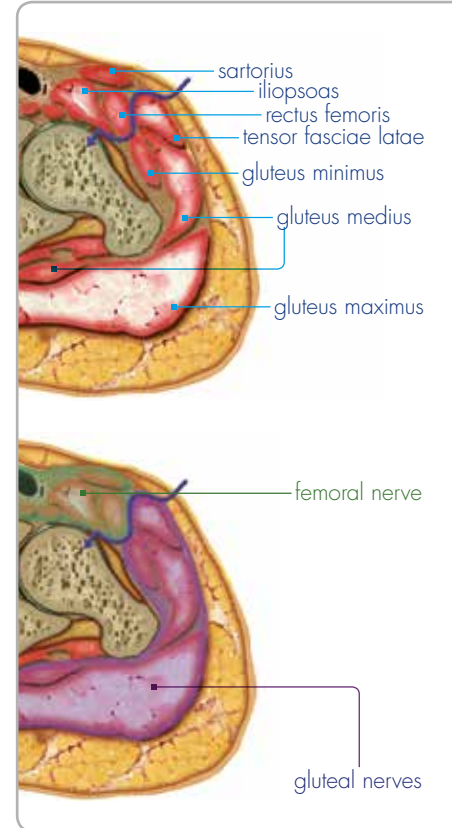
THE AMIS BY MEDACTA: TRUE MINIMALLY INVASIVE SURGERY

The AMIS (Anterior Minimally Invasive Surgery) approach has been developed by Medacta in 2004 to optimize and enhance the reproducibility of the anterior approach.

The AMIS is not only a surgical technique, but a complete set of services for a surgeon who wants to perform the anterior approach, including on-going medical education, a dedicated plan to help increase the activity (the MyPractice Development Plan), dedicated implants and instruments.

A specific leg positioner was developed to allow for stable and reproducible leg positioning, which is essential to enable an easier exposure and a simple and reproducible surgical procedure to restore patient anatomy and function.

With an extensive clinical experience (more than 10 years of clinical experience and over 200,000 procedures performed) the AMIS made Medacta the market leader worldwide for the anterior approach.



- NO MUSCLES CUT THROUGH AN INTERNERVOUS PATH
- Significantly shortened rehabilitation
- Many years of clinical experience
- Possible long-term benefits
- Increase Surgeon practice
- Hospital economical benefits

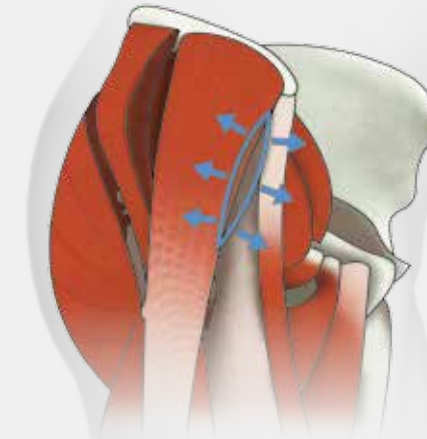
MORE THAN
250,000
AMIS

AMIS ADVANTAGES

NO MUSCLES & NERVES DAMAGE

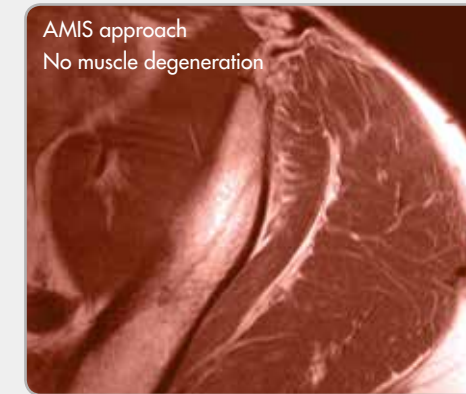
The preservation of the periarticular structures potentially assists with:

- Shorter hospitalization. ^[1,2]
- Significantly shortened rehabilitation. ^[3,4]
- Immediate post-operative muscle tone preservation. ^[5]
- Reduced risk of dislocation. ^[4]
- Decreased post-operative pain. ^[3,6]
- Faster return to daily activities. ^[1]
- Less blood loss. ^[2,3]
- Reduced risk of mortality (-60%) after femoral neck fracture. ^[7]



RESULTS ARE NOT ONLY SEEN IN THE SHORT TERM

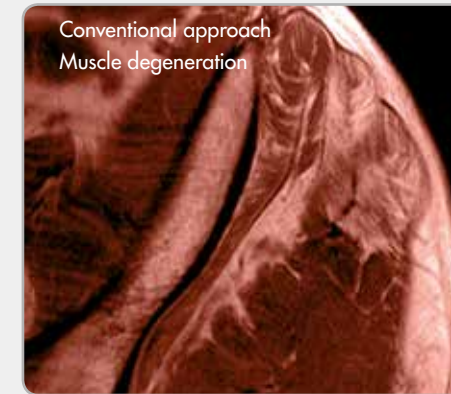
Thanks to the AMIS technique risks are decreased when compared to a standard technique both in the short and in the medium term. The AMIS approach shows that, at one year after surgery, there is:



NO MUSCLE DEGENERATION ^[8-11]

NO RESIDUAL PAIN AND LIMPING ^[8-11]

ADVANTAGES IN CASE OF REVISION ^[12]



AMIS: SAVING COST AND ADDING VALUES

The complete set of services offered by the AMIS provides for healthcare efficiency with no additional cost. In fact, the AMIS allows not only for economical but also for commercial advantages:

- Decrease of total costs ^[13]
- Decrease of surgical team
- Increase in bed turnover
- Excellent marketing tool
- Increase in surgeon's activity
- Increase in hospital's activity ^[14]

DEDICATED INSTRUMENTATION

Specific instrumentation and a leg positioner should be used to facilitate the AMIS procedure. Medacta, in collaboration with orthopaedic surgeons around the globe, developed a set of instruments and the AMIS Mobile Leg Positioner with the objectives of:

REDUCING ERRORS

REDUCING THE LEARNING CURVE

SIMPLIFYING THE IMPLEMENTATION OF THIS TECHNIQUE

AMIS MOBILE LEG POSITIONER

A Medacta patented design complying with ISO standards, the AMIS Mobile Leg Positioner is not a complete table but an extension which easily adapts to any operating table.

Why consider the AMIS Mobile Leg Positioner?

- Facilitates the anterior approach procedure.
- Allows an easy extraction of the femoral head, and optimum exposure of the femur.
- Aids reducing the hip and enables ROM test without removing the shoe.
- Allows multiple movements (traction, flexion, hyper-extension, rotation, adduction).
- Supplied at NO capital expense - the AMIS Mobile Leg Positioner is provided at no cost to the hospital.
- Is easy to handle by one person.
- Allows to reduce the surgical team.

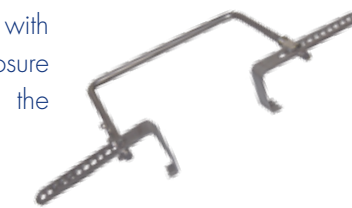


A UNIQUE AND COST-EFFECTIVE OPTION TO
FACILITATE THE ANTERIOR APPROACH!

AMIS INSTRUMENTS

AMIS CHARNLEY

A modified Charnley retractor with hooks designed to enhance exposure of the operative site, especially the acetabulum.



AMIS BROACH HANDLE

A straight rasp handle which gives a firm hold during femoral preparation, decreasing the risk of malpositioning of the stem.



GASTON

A flexible pneumatic arm which allows the surgeon to easily change instrument placement and maintain them in a stable position.

