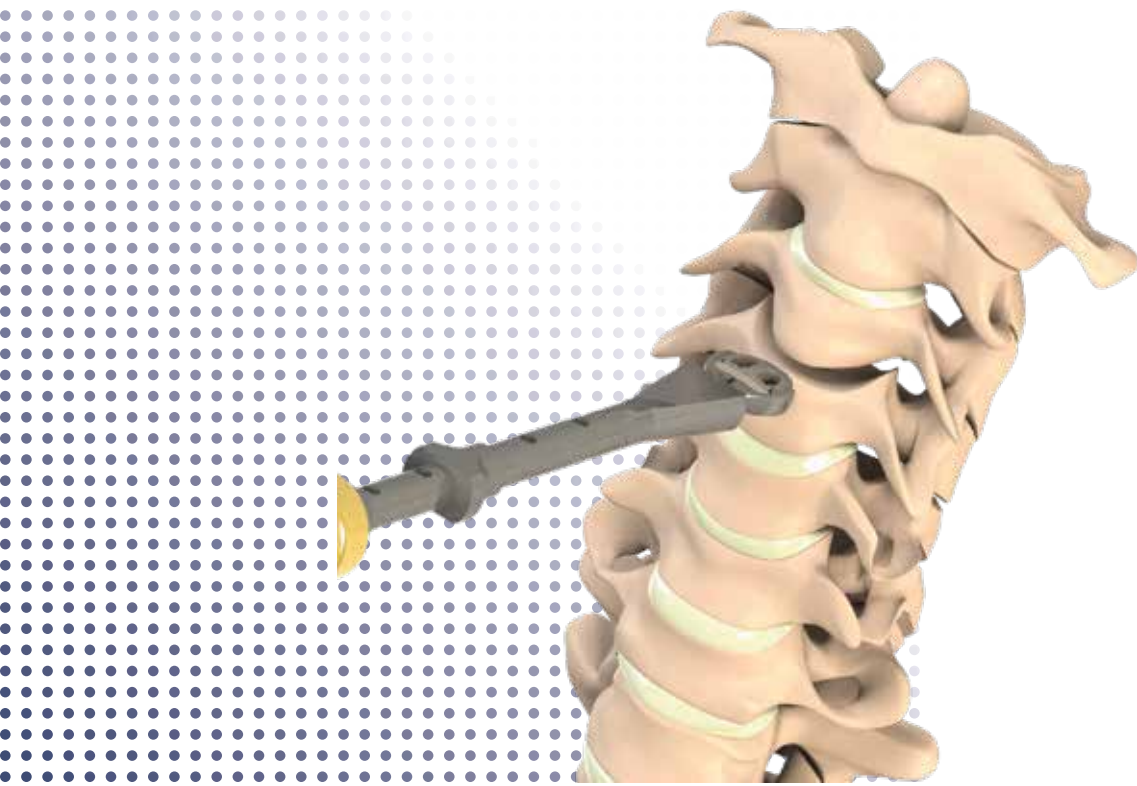


Alecta™

Cervical Peek Cage System

Surgical Technique & Instrument Set Information



General Characteristics

- Full stability with controlled locking mechanism
- Homogeneous load distribution
- Rehabilitation in early period without any need for support in the post-operative period
- Operative productivity
- Revisability
- Adaptation to different surgical techniques
- Easy-to-use instruments
- Easy implantation



Indications & Contraindications

Indications

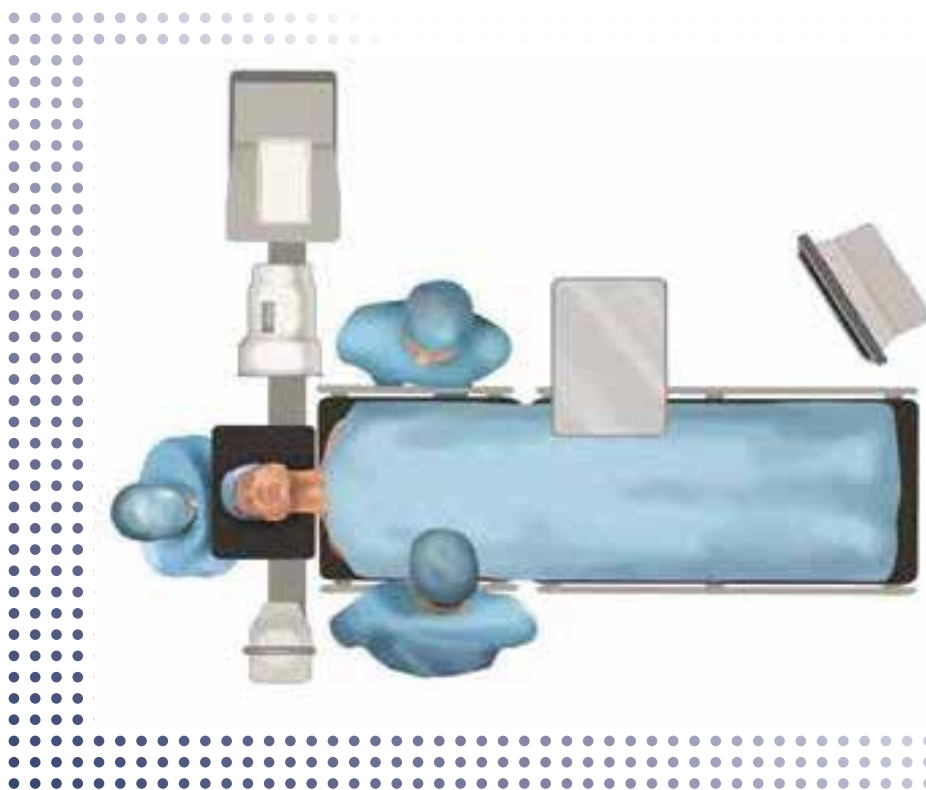
- Cervical Disc Hernia
- Degenerative Cervical Disc Hernia
- Cervical Arthrosis

Contraindications

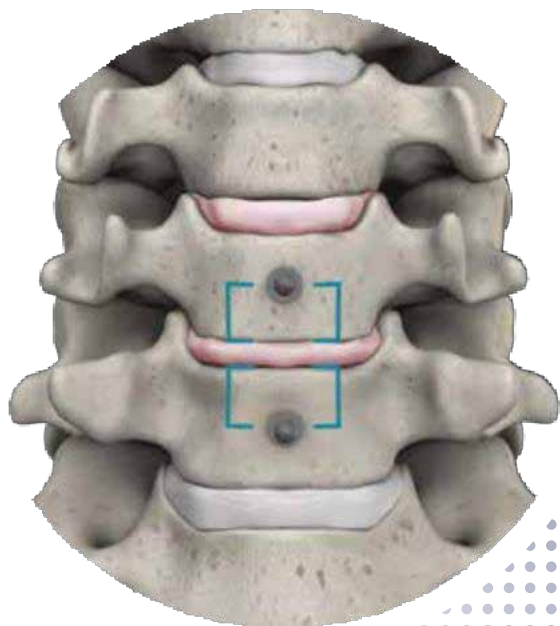
- Local infection or inflammation
- Existence of Active infection of pronounced infection risk
- Fever and leucocytosis (increase in leucocytes)
- Doubtful or identified intolerance to PEEK and/or titanium alloys or metal allergy
- Pregnancy
- Physical problems such as excessive obesity
- Disorders which causes loss of bones such as joint diseases, bone occlusion, osteopenia, osteomalacia or osteoporosis
- All cases not included in the indications

The surgery table and patient positioning is selected in accordance with the pathology and Smith Robinson surgical technique. The patient is placed in the supine position following induction of anesthesia, intubation and placement of monitors. Care should be taken in positioning to avoid pressure areas and compromise of the back. The patient is then prepped and draped in usual manner.

The right hemicollar skin and subcutaneous tissue are incised the planned implantation. The artery of carotis and common nerves moved to lateral side. The trachea and esophagus has moved to right side and entering the prevertebral fascia.

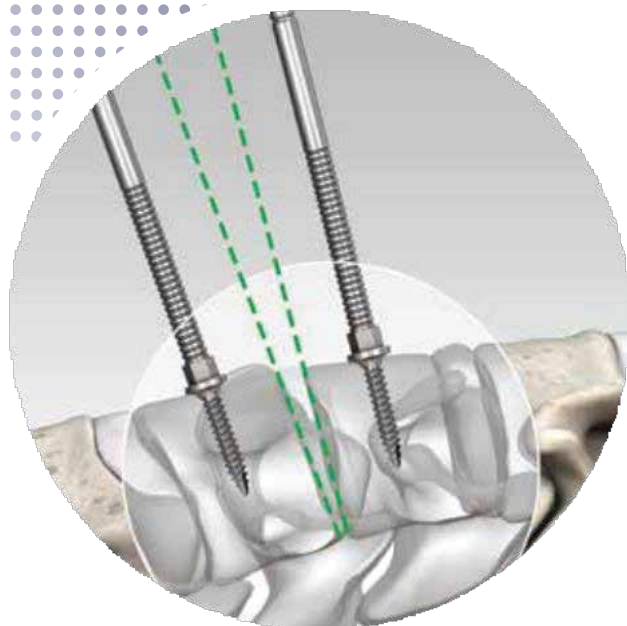


The surgeon should use the C arm scopy for controlled the suitable intervertebral implantation space and applying discectomy. Scrape the osteofits with instrument of curet.

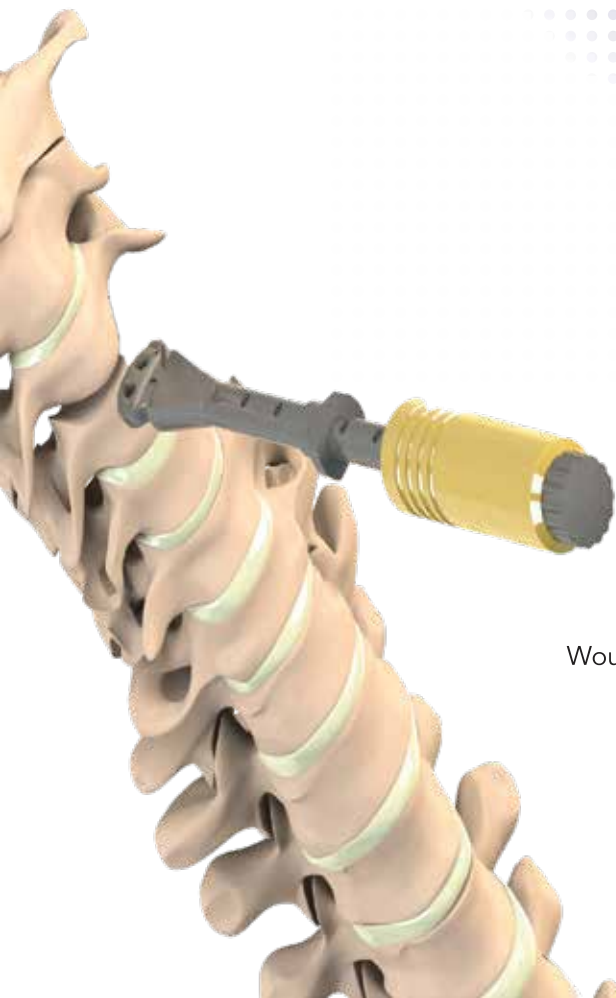
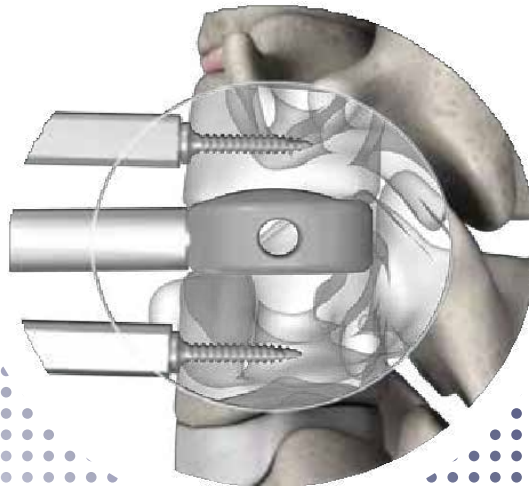


The depth and width measurements previously taken help to determine the trial size to use.
The trial will determine the final implant height to be used as well as implant footprint (width and depth).

Each footprint size is color coded by width and there is one trial for every size (footprint/height).
Heights are available in 4, 5, 6 and 7mm.
Trialing should begin with the smallest height first (5mm) and should not exceed the height of healthy adjacent discs.



When the surgeon controlled the bleeding, choose the suitable cervical disc prosthesis (generally between 5mm – 8mm and each size to increased 0,5mm) and implanted of the right area by using C Arm scopy



Wound closure is then performed in the customary manner.

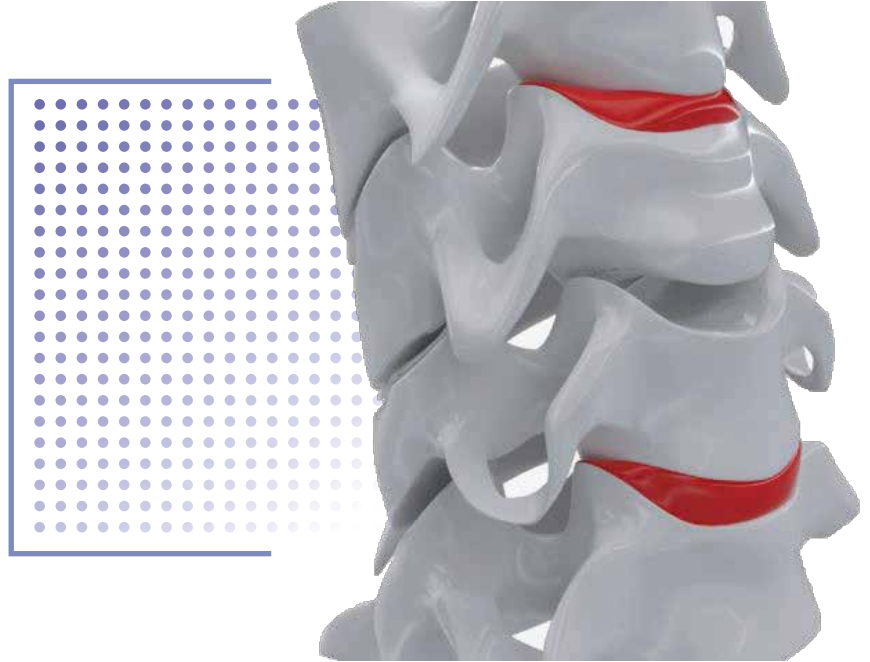
Implant Preparation

Discectomy

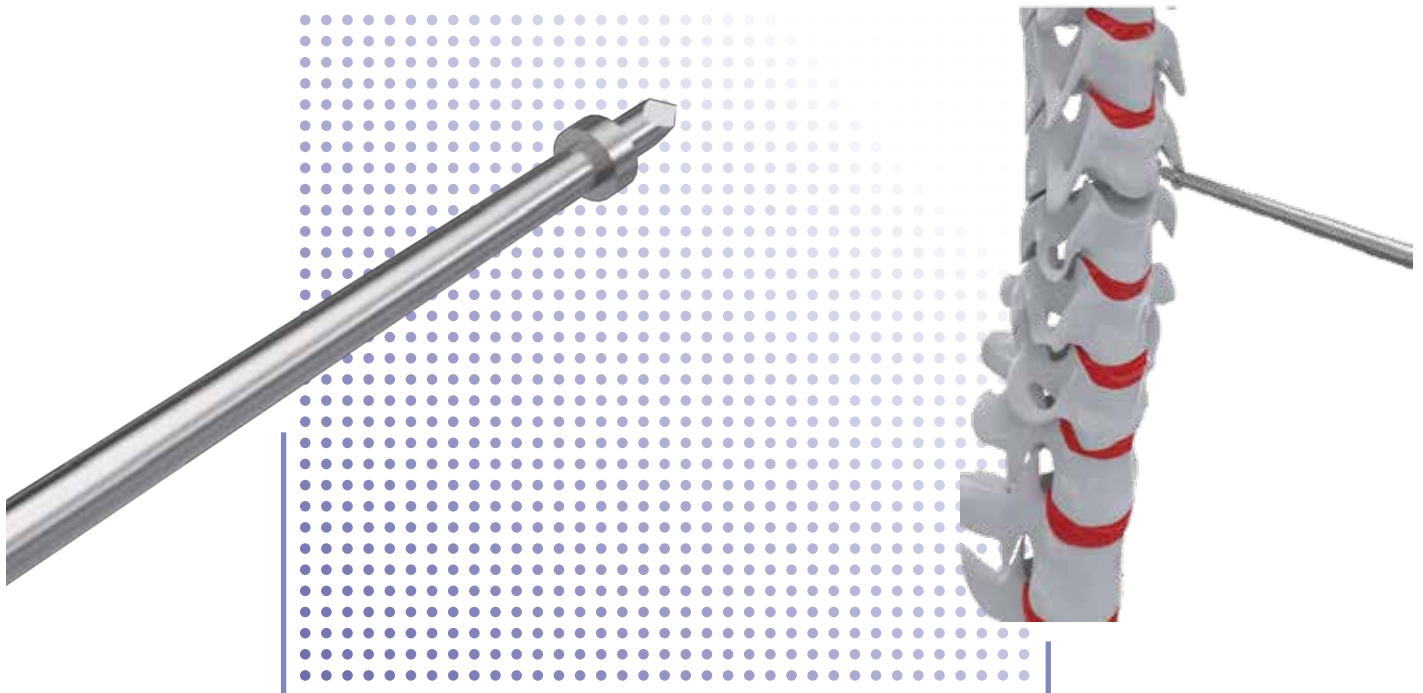
With proper surgical technique, the area where the implant will be placed is cleaned from the discs and the appropriate area for the implant is prepared.



Alecta Awl



The necessary surgical preparations and procedures are performed, an access hole is opened to send the screw with the Alecta Awl.



Alecta Caspar Pin Driver - Caspar Pin

The pins may be selected to widen interbody disc space. If possible, drive 2 pins into the middle of superior and inferior vertebrae in each using Alecta Pin Driver .



Alecta Caspar Distractor - Caspar Pin

It is recommended that pins should be driven at least 5mm apart from the endplates. Then put the 2 holes of Caspar retractor into the pins driven into the vertebra. The disc space can be prepared by turning the knob prior to discectomy.

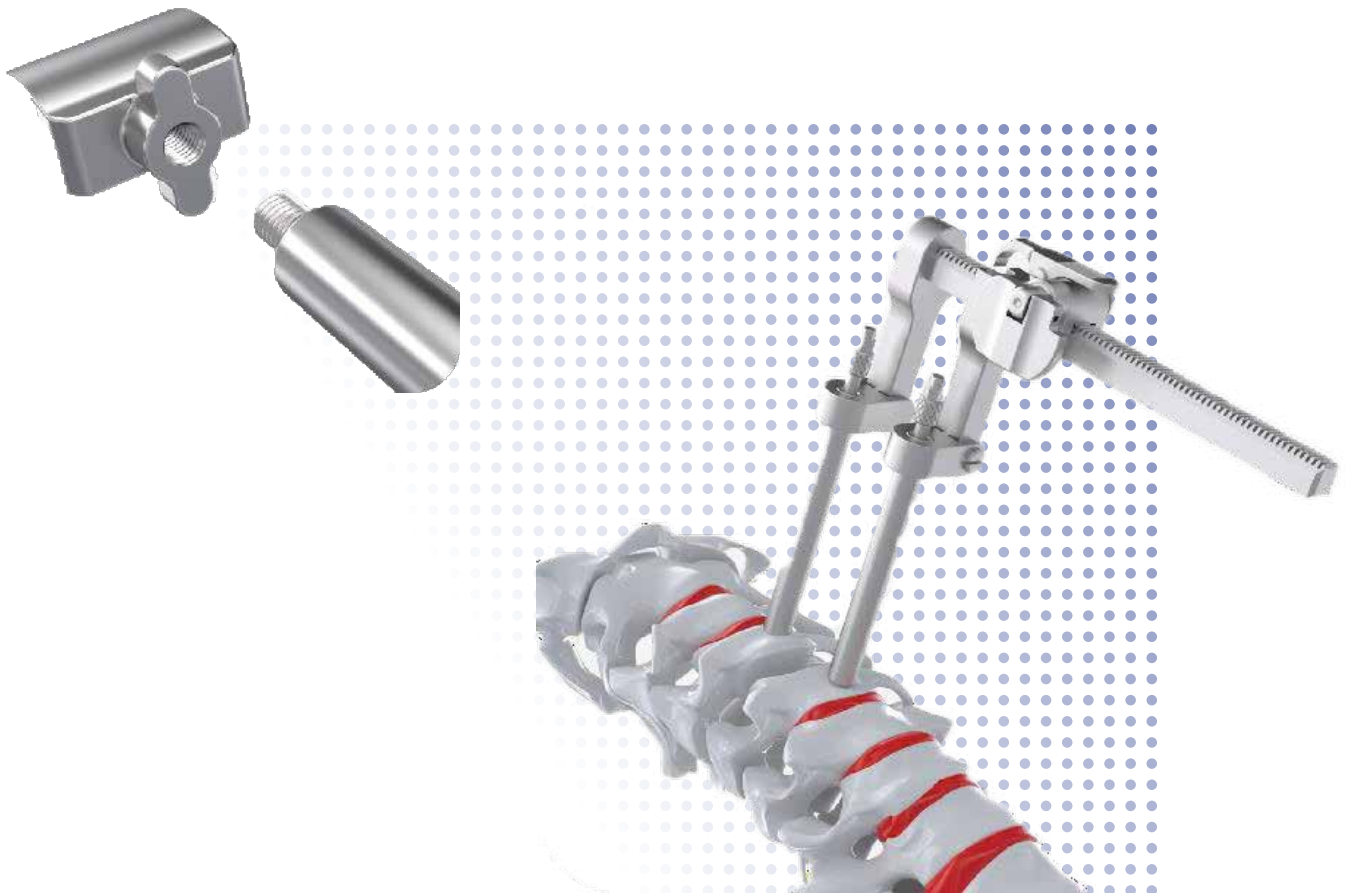


Implant Selection

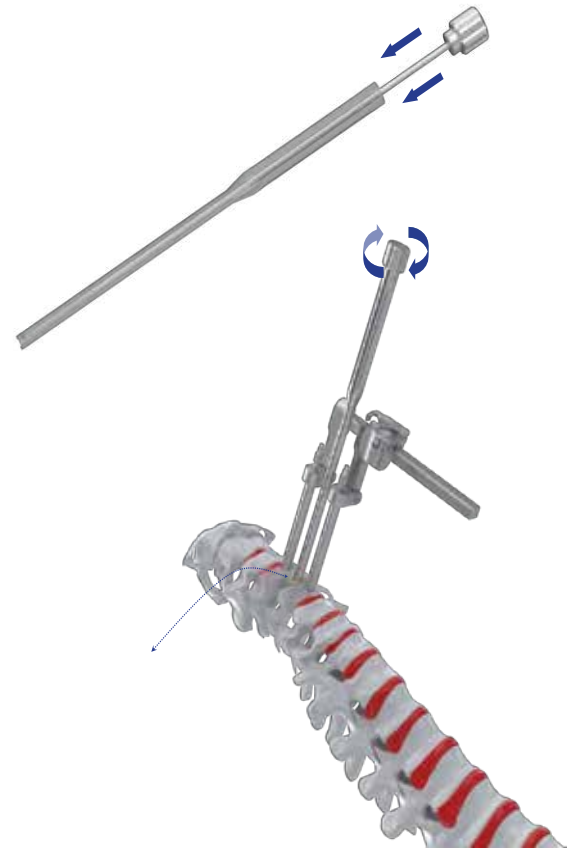
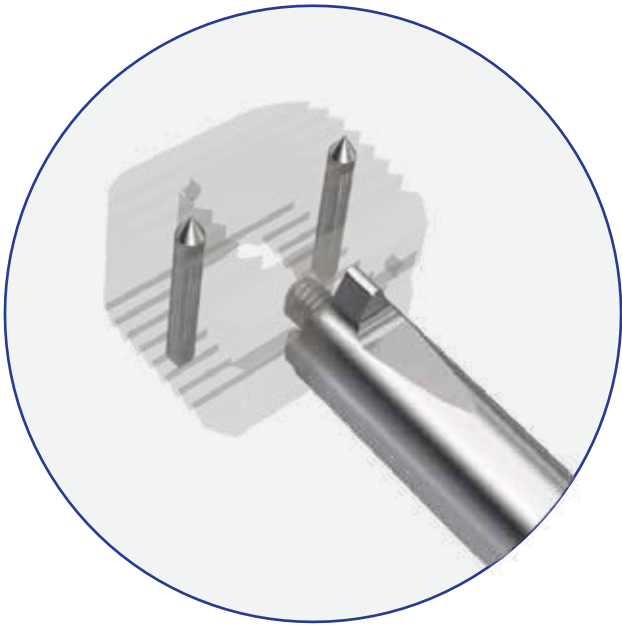
Trial



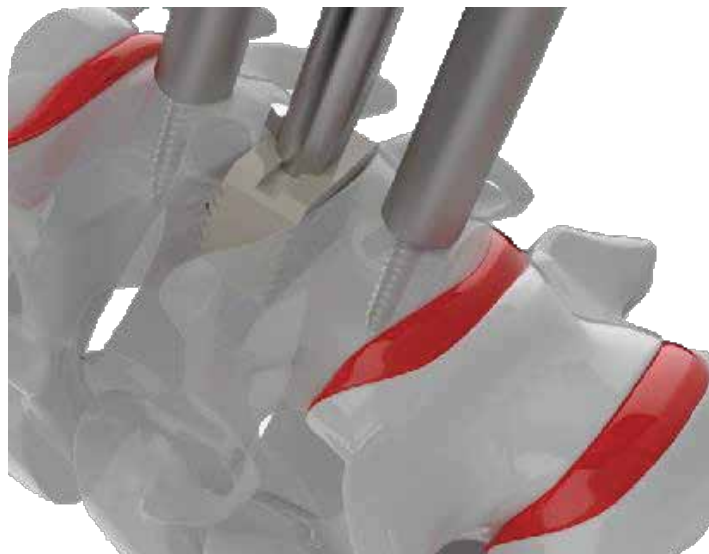
The Alecta Trial Cage is designed for use with prosthesis holder in any cervical instrument. Starting with the smallest trial, sequentially larger trials are tamped completely into the disc space. The most satisfying trial that fits to the disc space are selected. Successful trial selection confirms parallel end plate preparation. The trial should fit and produce a tight fit in the disc space. If this is not possible, a larger trial should be attempted, or the end plates should be more adequately prepared, or both .



Implant Insertion

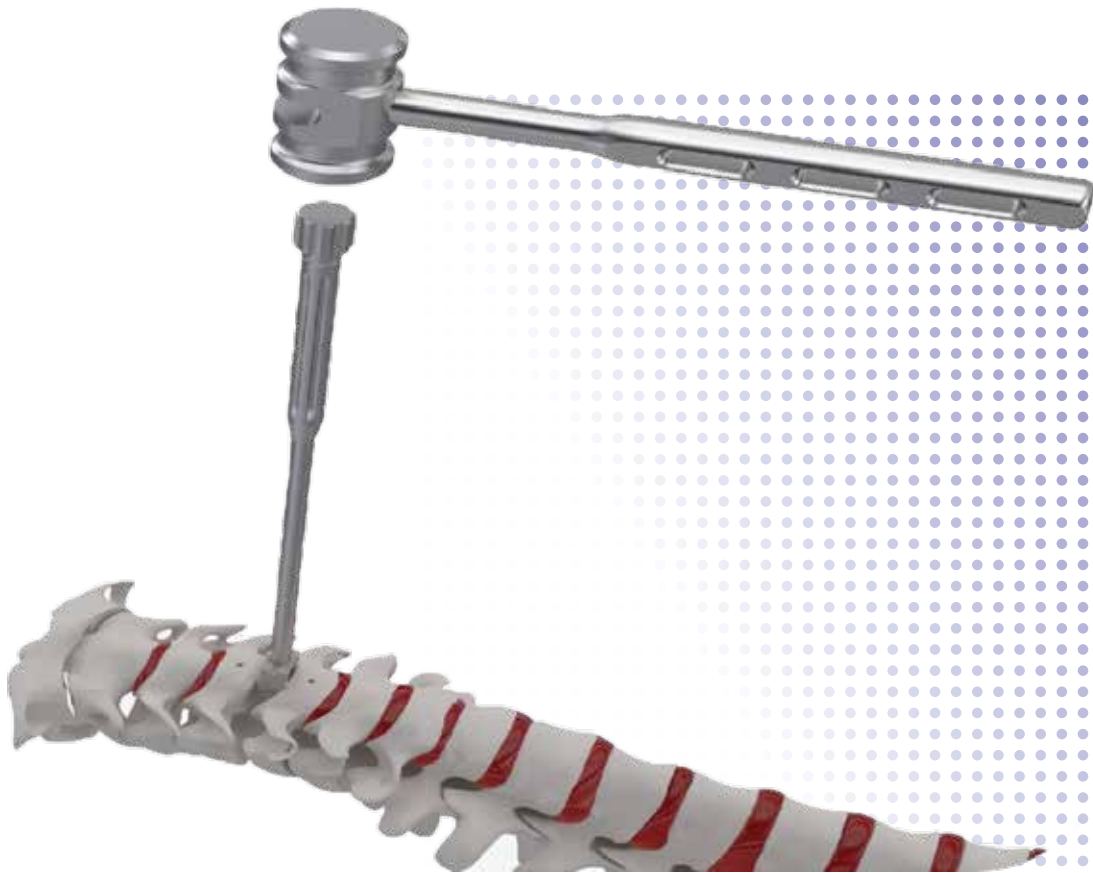


Cage is placed to disk space made up in required size before for implementation process via caspar. Then inserter is separated from cage placed to bone, rotating top side of it counter clock wise.



Alecta Free Impactor - Alecta Hammer

Position the implant and holder in the correct cranial/caudal alignment and carefully insert them into the distracted segment. The Cervical Cage is impacted using the mallet or Alecta hammer while distraction of the interbody space is maintained. Release the caspar retractor and remove all instruments.



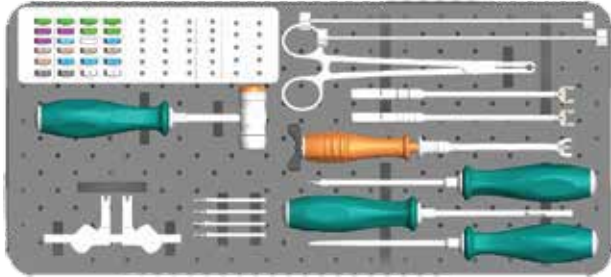
Implant Removal

Alecta Implant Inserter - Alecta Hammer

This procedure is reverse of the implantation process. Fixed the impactor to the implant. Turn the handle on the impactor 90 degree counter clockwise in a controlled manner. When the handle becomes vertical with the vertical axis , the cage is pulled backwards.



Cervical Cage System Instrument Set



Device Name	Ref. Number	Quantity
Mallet	13000.INS001	1
Trial Inserter	13000.INS002	1
Prosthesis Inserter	13000.INS003	1
Cervica Cage Driver	13000.INS004	2
Caspar Pin Driver	13000.INS005	1
Caspar Distractor	13000.INS006	1
Caspar Pin	13000.INS007	4
Awl	13000.INS008	1
Trial Implants	13000.INS009	5
Cage Box	13000.INS010	1
Container	13000.INS011	1

NOTES

[illegible]



Produced Exclusively for

EOS
MEDICAL SOLUTIONS

10, Kassiopis Str., 17237,
Ymittos, Greece
Email: info@eosmed.eu
Website: www.eosmed.eu
Tel: +302160033602