# IMPLANTS For Total Knee Replacement



## IMPORTANT PATIENT LEAFLET





READ CAREFULLY THIS LEAFLET BEFORE SURGERY.

IT CONTAINS IMPORTANT INFORMATION FOR YOU.

## WHAT IS IN THIS LEAFLET

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Devices description

Materials of the devices

Devices expected lifetime

#### Page 4:

Contraindications
Possible side effects



AMPLITUDE

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## KEEP THIS LEAFLET

You may need to read it again. If you have any further questions, ask your surgeon.

If you experience any side effect, including **possible side effects not listed** in this leaflet, talk to your doctor or pharmacist. See page 4.

This leaflet has been written assuming the person receiving the implants is reading it .

#### INTENDED USE

The Total Knee system is intended to replace the natural knee joint (knee arthroplasty) through an artificial system.

Patients with a mature skeleton may be implanted with a total knee prosthesis in cases of severe joint pathology (cartilage wear, inflammation like arthritis or after an injury such as a bone fracture after a fall) and where other devices or treatments have failed.

Please ask your surgeon for details. The decision to implant a total knee prosthesis is left to the surgeon after evaluation of the risk/benefit balance and after discussion with you.

#### WARNING AND PRECAUTIONS

You must be informed the factors that could compromise the success of the surgery and post operative results:

- Overweight;
- Case history detailing infections and/or falls;
- Metabolic disorders that reduce your resistance or induce progressive bone deterioration;
- Local bone tumours;
- Severe bone deformities;

- Severe osteoporosis;
- Playing sports intensively;
- Playing risky sports or engaging in risky activities;
- Addictive behaviour.

#### SPECIFIC WARNINGS & MRI INFORMATION

The materials used in your implant may trigger security gates/scanners.

PLEASE INFORM PERSONNEL ABOUT YOUR IMPLANTED DEVICE.

Non-clinical testing demonstrated that the implants are **MR Conditional**. A patient with one of these devices can be scanned safely in a MR system under the following conditions:

- Static magnetic field of 1.5T or 3T for a 15min-procedure;
- Maximum spatial gradient field of 1,500 Gauss/cm;
- Normal operation mode only;
- Maximum MR system reported whole-body-averaged specific absorption rate (WB-SAR) of 2 W/kg for 15 minutes of scanning.
- The image artefact caused by the implants extends approximately 99mm from these implants. MR images may be blurred next to the implants.

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Maximum measured temperature rise	8.6°C
with 1.5T MRI, for a 15min procedure	(calorimetry WB-SAR of 3.27W/kg)
Maximum measured temperature rise with 3T MRI, for a 15min procedure	9.9°C (calorimetry WB-SAR of 2.39W/kg)



#### **REPORTING ADVERSE EVENTS**

Any incident in relation to the device shall be reported to your surgeon, healthcare facilities or family doctor.

## YOU HAVE BEEN IMPLANTED WITH:

The surgeon needs to tick boxes corresponding to the devices you have been implanted with.

Associations with other devices have to be validated by Amplitude.

Cobalt-Chromium alloy Cr : 26.50% - 30.00% / Mo : 4.50% - 7.00% / Ni ≤ 1.00% / Fe ≤ 1.00% / C	SCORE Femoral component - cemented
MATERIALS	
Inset patellar implant - cementless	
Inset patellar implant - cemented	
Resurfacing patellar implant NM - cemented	
Resurfacing patellar implant - cemented	
PATELLAR COMPONENTS	
Extension stem for Total Knee Prosthesis - cementer	
Offset adapter for Total Knee Prosthesis	
Tibial augment for Total Knee Prosthesis - cemented	
SCORE mobile bearing insert	
SCORE Tibial baseplate - cemented	3
SCORE Tibial baseplate - cementless	The same of the sa
TIBIAL COMPONENTS	
SCORE Femoral component - cemented	
SCORE Femoral component - cementless	
FEMORAL COMPONENTS	

Cobalt-Chromium alloy Cr: 26.50% - 30.00% / Mo: 4.50% - 7.00% / Ni ≤ 1.00% / Fe ≤ 1.00% / C ≤ 0.35% / Mn ≤ 1.00% / Si ≤ 1.00% / Co: Balance	SCORE Femoral component - cemented SCORE Tibial baseplate - cemented
Cobalt-Chromium alloy Cr: 26.50% - 30.00% / Mo: 4.50% - 7.00% / Ni ≤ 1.00% / Fe ≤ 1.00% / C ≤ 0.35% / Mn ≤ 1.00% / Si ≤ 1.00% / Co: Balance Hydroxyapatite coating (pentacalcium hydroxide tris(orthophosphate) Ca5(PO4)3OH: 100%) & titanium undercoating (C: ≤ 0.10% / H: ≤ 0.30% / Fe: ≤ 0.60% / N: ≤ 5.00% / O: ≤ 10.00% / Ti: Balance)	SCORE Femoral component - cementless SCORE Tibial baseplate - cementless
Polyethylene	SCORE mobile bearing insert
PE: 100%. Possible traces of Ti, Al, Ca, Cl.	Patellar components
	Standard keel (provided with tibial baseplates - cemented or cementless)
Stainless steel C ≤ 0.08% / Si ≤ 0.75% / Mn : 2.00% - 4.25% / Ni : 9.00% - 11.00% / Stainless steel	Tibial augment for Total Knee Prosthesis - cemented
Cr : $19.50\% - 22.00\%$ / Mo : $2.00\% - 3.00\%$ / Nb : $0.25\% - 0.80\%$ / S $\leq$ $0.01\%$ / P $\leq$ $0.025\%$ / Cu $\leq$ $0.25\%$ / N : $0.25\% - 0.50\%$ / Fe: Balance	Offset adapter for Total Knee Prosthesis
	Extension stem for Total Knee Prosthesis cemented

#### **DEVICES EXPECTED LIFETIME**

The SCORE total knee prosthesis expected survivorship is at least 95% at 10 years for primary cases and 80% at 10 years for revision cases. This can be reduced or increased depending on your activity level or events that could compromise implants integrity (falls, accidents...).

#### **CONTRAINDICATIONS**

At the time of the surgery, these conditions are not recommended:

- Pregnancy and breastfeeding;
- Allergy to the implant materials;
- Infections;
- Severe mental, muscular, neurological or vascular deficiencies affecting the limb in question;
- Destruction of bone or poor bone quality which may affect stability of the implant;
- Highly localized arthrosis requiring osteotomy or unicompartmental arthroplasty;
- Anatomic disorder requiring a constrained or hinge prosthesis.

These conditions should be discussed with your surgeon. Any pathology (even if not listed above ) must be mentioned to your surgeon beforehand as well.

#### POSSIBLE SIDE EFFECTS

You must be informed about the side effects in relation with the device that might occur. Those recorded by Amplitude are all rare (lower than 1 per 1000 cases) or occasional\*(between 1 in 1,000 and 1 in 100 implantations). Please consult your surgeon if any doubt.

- Difficult recovery after major surgery
- Injury to a major artery or nerve in the lower limb
- Disruption or rupture of the thigh tendons
- Tear of a thigh muscle
- Infection
- Stiffness\*
- Instability
- Pain\*
- Patellar problems\*
- Allergy to implanted materials

- Bone degeneration
- Tissue reactions to prosthetic debris and wear particles
- Bone fracture\*
- Prosthesis dislocation
- Prosthesis loosening
- Premature wear on joint surfaces
- Prosthesis breakage
- Prosthesis displacement
- Friction/conflict between the prosthesis and the surrounding tissue

Other events linked to the surgery or current knowledge can also occur:

- Phlebitis, fat or pulmonary embolism
- Bruises
- Complex regional pain syndrome (Algoneurodystrophy)

- Bone ossification abnormalities
- Poor bone healing

You must also be aware of the risks and possible side effects of surgery - please ask your surgeon for further information.

After a joint replacement, you should pay attention during your daily life: any blow, fall or accident may **jeopardise** your recovery or your implant lifetime. Please ask your surgeon for further information.

