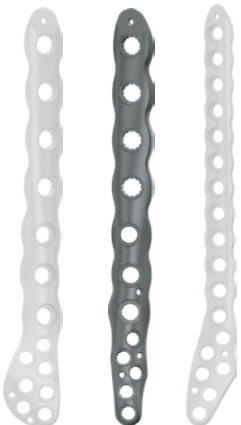


Pangea[®]

Distal Posterolateral Fibula Plate

Design rationale



Pangea Distal Posterolateral Fibula Plate

Design rationale

stryker

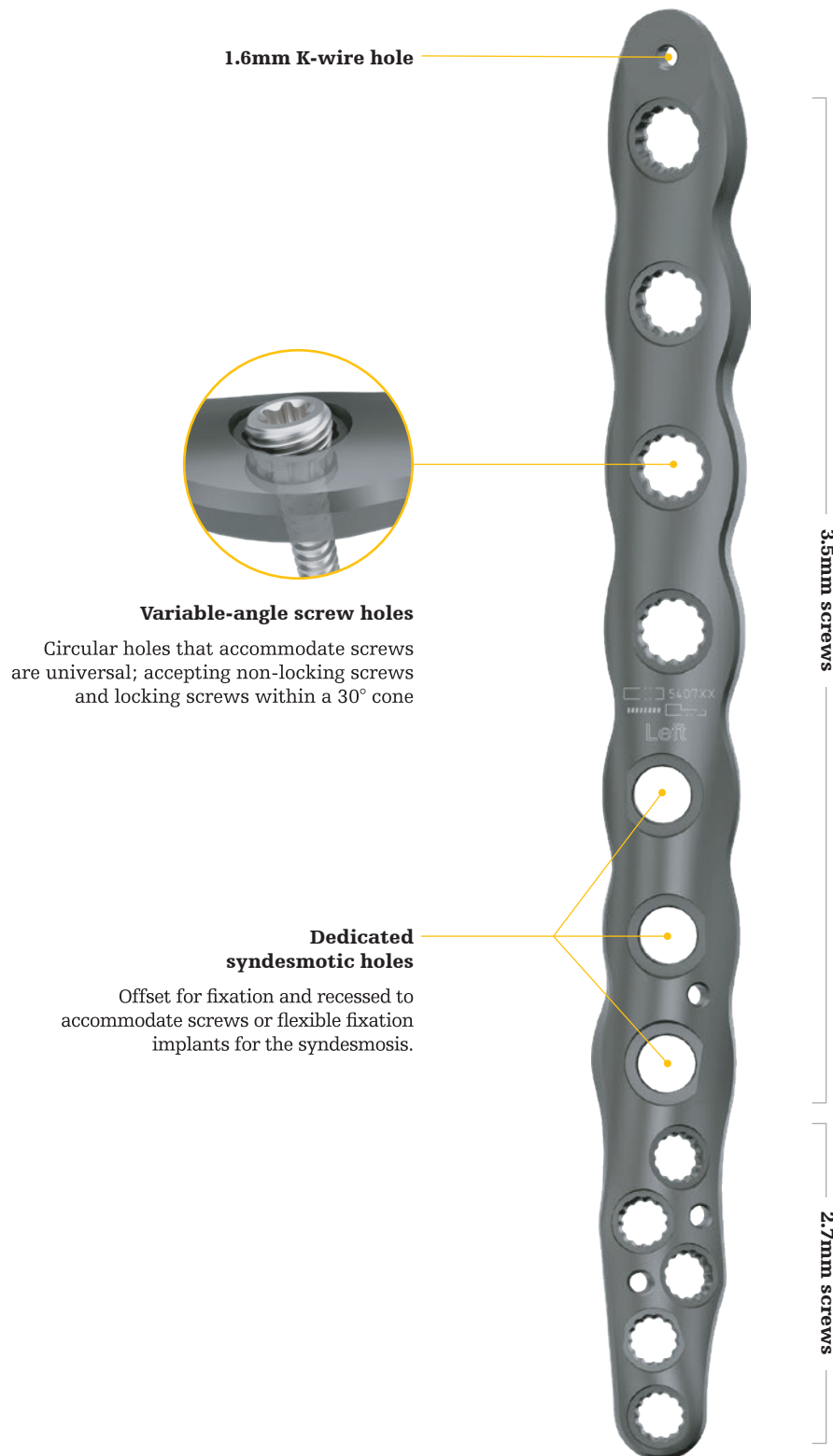
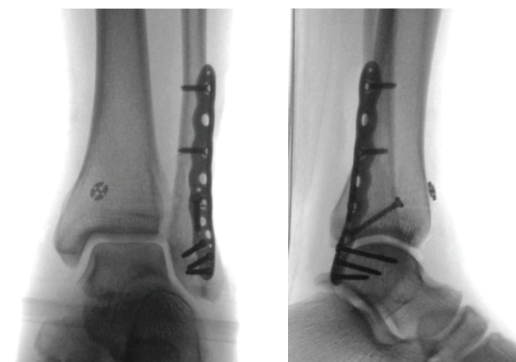


Plate placement



- The distal portion of this plate should be placed so the 2.7mm cluster is centered over the Posterolateral metaphyseal fibula, just proximal to the peroneal groove (Confirm there is no overhang over the edge of the distal fibula)
- When placed correctly, the distal aspect of the plate should not contact the peroneal tendons
- This plate sits on the edge of the fibula, at 45° posterior from the lateral side
- Posterolateral plate placement helps to neutralize forces for SER (supination external rotation) fracture patterns, while screw hole placement allows for fixation of these fragments

Pangea Distal Posterolateral Fibula Plate X-rays



Pangea Distal Posterolateral Fibula Plate

Design rationale

stryker

Fit

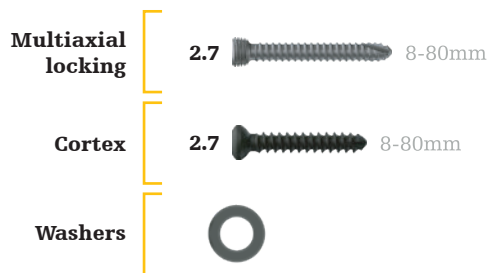
- Designed with the use of SOMA: Stryker Orthopedics Modeling and Analytics¹
- SOMA includes a database with CT scans from hospitals across the world and state-of-the-art algorithms to mine the data for shape variability, bone density, and implant fit
- The SOMA bone database contains a collection of over 40,000 3D bone models generated from more than 6,000 CT scans²
- Plate rotation allows for placement along the posterolateral shaft of the fibula while buttressing the distal fibula in spiral and oblique fracture patterns
- The distal cluster is tapered to reduce the profile under the soft tissue and reduce plate prominence over the distal fibula
- The 2.0mm distal end and 2.6mm shaft are designed to reduce the profile under the soft tissue
- Designed for buttressing of oblique or supination external rotation ankle fractures and to treat distal fibula fractures and the syndesmosis
- To assess the anatomical compliance of the Pangea Distal Fibula plates, the plates were fitted with the Stryker Implant Fitting Tool (SIFT) onto 544 adult bone models available within the SOMA database. The mean distance between plate and bone was calculated for each plate type. This metric was found to be lower for the Pangea Distal Fibula plates compared with the Synthes VA-LCP plates, meaning the plate fits closer to the bone.*¹

Technical specifications

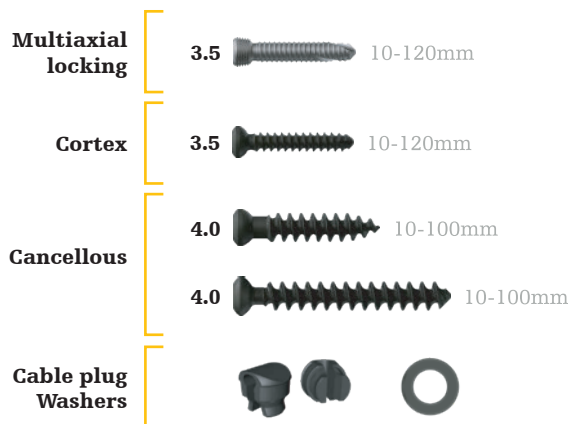
- Standard plate lengths: 4-15 hole (81-235mm)
- Thickness: 2.0mm distal, 2.6mm shaft
- Left and right anatomic plate options
- **Drill bits for T8:**
Ø2.0mm x 135mm (542000(S))
Ø2.0mm x 175mm (542001(S))
- **Drill bits for T15:**
Ø2.5mm x 135mm (542020(S))
Ø2.5mm x 215mm (542021(S))

Screw platform

T8 screw platform



T15 screw platform



* These findings are derived from computer-based anatomical modeling using SOMA data and internal analysis and may not be indicative of clinical performance.

References:

1. Internal Report № D0000262573, Rev AA
2. Internal Report № D0000124129, Rev AF

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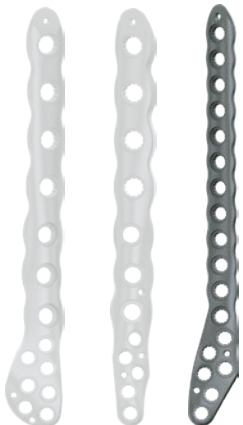
Manufacturer:

Stryker GmbH
Bohnackerweg 1
2545 Selzach, Switzerland
stryker.com

Pangea[®]

Distal Posterior Fibula Plate

Design rationale



Pangea Distal Posterior Fibula Plate

Design rationale

stryker

1.6mm K-wire hole



Variable-angle screw holes

Circular holes that accommodate screws are universal; accepting non-locking screws and locking screws within a 30° cone

High screw hole density

Allows flexibility for buttressing of plate and to match the thinner coronal width of the fibular shaft

6 metaphyseal 2.7mm distal cluster

Distal cluster is tapered to reduce the profile under the soft tissue and sits immediately lateral and proximal to the peroneal retinaculum



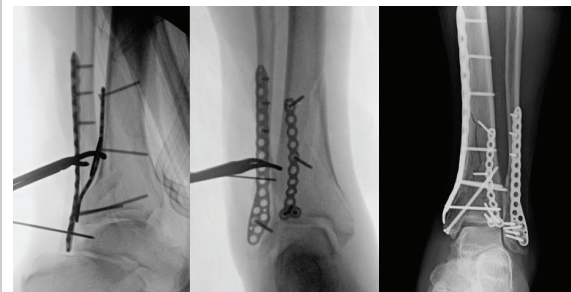
2.7mm screws

Plate placement



- The distal portion of this plate should be placed so the 2.7mm cluster is centered over the posterior metaphyseal fibula, just proximal to the peroneal groove (Confirm there is no overhang over the edge of the distal fibula)
- When positioned correctly, the distal aspect of the plate should not contact the peroneal tendons
- The proximal aspect of the plate should be centered on the posterior aspect of the shaft of the fibula

Pangea Distal Posterior Fibula Plate X-rays



Pangea Distal Posterior Fibula Plate

Design rationale



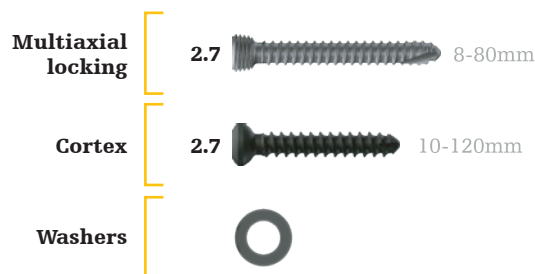
Fit

- Designed for buttressing of oblique or supination external rotation ankle fractures
- Designed for direct posterior placement on the fibular shaft
- Designed for placement through the posterolateral approach and can be placed through a window medial or lateral to the peroneal tendons
- Distal cluster is tapered to sit immediately lateral and proximal to the peroneal retinaculum
- To assess the anatomical compliance of the Pangea Distal Fibula plates, the plates were fitted with the Stryker Implant Fitting Tool (SIFT) onto 544 adult bone models available within the SOMA database. The mean distance between plate and bone was calculated for each plate type. This metric was found to be lower for the Pangea Distal Fibula plates compared with the Synthes VA-LCP plates, meaning the plate fits closer to the bone.*¹
- Designed with the use of SOMA: Stryker Orthopedics Modeling and Analytics¹
- The SOMA bone database contains a collection of over 40,000 3D bone models generated from more than 6,000 CT scans.²
- Uses 2.7mm screws in the plate shaft to match the thinner coronal width of the fibular shaft

Technical specifications

- Standard plate lengths: 6-26 holes (79-231mm)
- Thickness: 2.0mm distal, 2.3mm shaft
- Left and right anatomic plate options
- **Drill bits:**
 - Ø2.0mm x 135mm (542000(S))
 - Ø2.0mm x 175mm (542001(S))

Screw platform



1. These findings are derived from computer-based anatomical modeling using SOMA data and internal analysis and may not be indicative of clinical performance.

References:

1. Internal report N° D0000262573, Rev AA
2. Internal report N° D0000124129, Rev AF

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Manufacturer:
Stryker GmbH
Bohnackerweg 1
2545 Selzach, Switzerland
stryker.com