

VILEX Total Ankle Replacement REVISION

HINTERMANN SERIES® H3

CASE STUDY



Pre-Op

A 40-year-old male, previously very active and ASA 1 with no other medical conditions, developed post-traumatic arthritis following a distal tibial fracture and underwent a custom total ankle replacement 12 months earlier using the FAR implant (AdlerOrtho), which the surgeon had used once to test custom PSI for complex distal tibial anatomy; he presented with pain, query loosening, poor sizing, no joint mobility, and requested revision.

Preoperative assessment demonstrated undersized components with malpositioned tibial and talar implants, an approximately 20 mm space measured on x-ray, osteophytes on the medial and posterior malleoli, zero osteointegration of either component, and good joint space in the subtalar and talar-navicular joints.

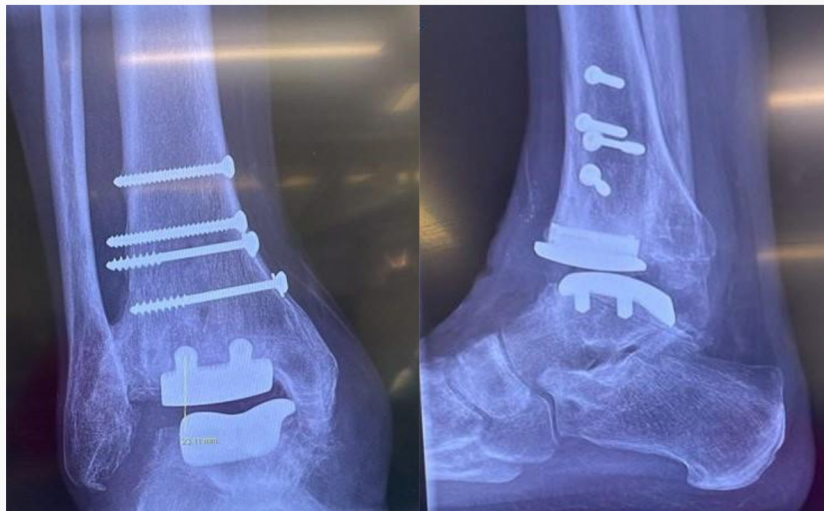


Mr. Sanya Adedapo | James Cook University Hospital

Mr. Sanya Adedapo, is a paid consultant for Vilex, LLC. Vilex provided financial support for this case study.

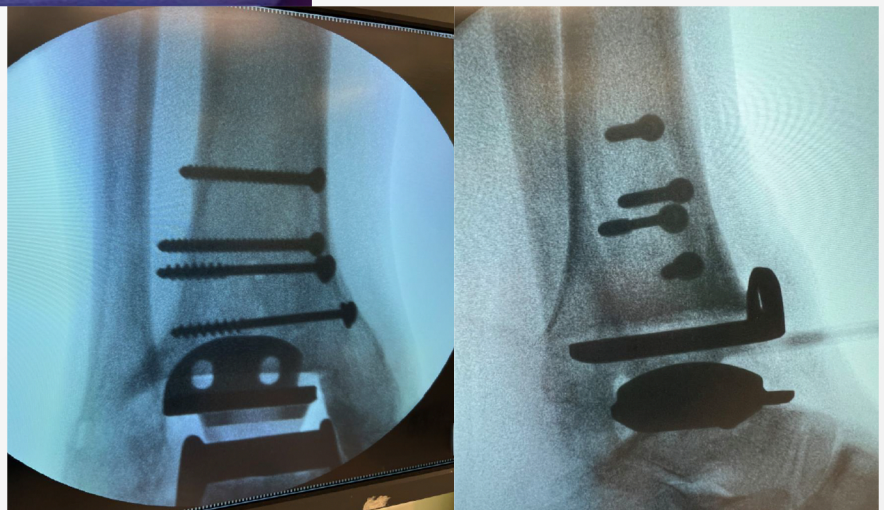
These results are specific to this individual only. Individual results and activity levels after surgery vary and depend on many factors including age, weight, and prior activity levels. There are risks and recovery times associated with surgery, and there are certain individuals who should not undergo surgery.

This case study is a publication of Vilex, LLC.



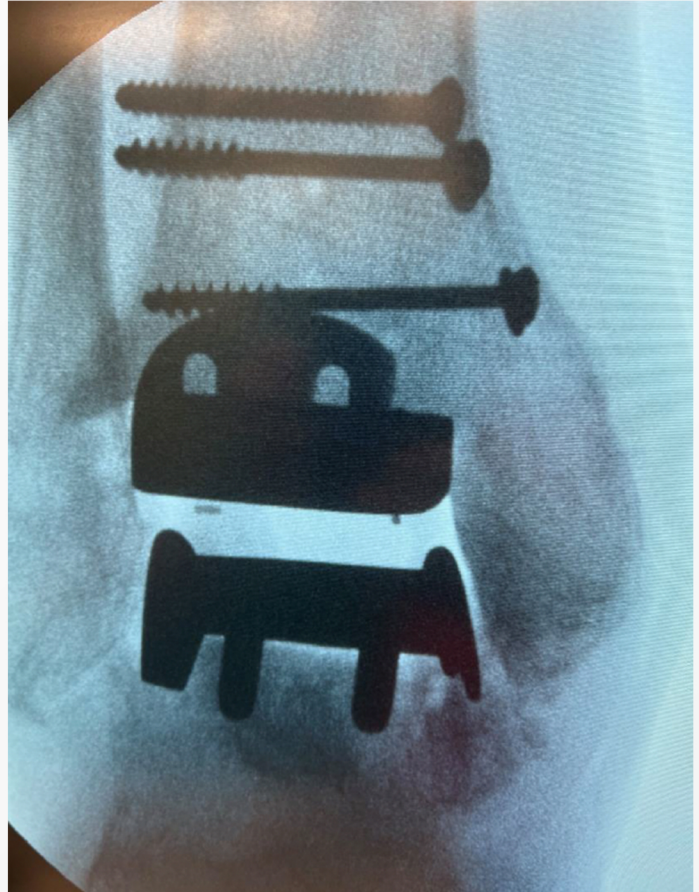
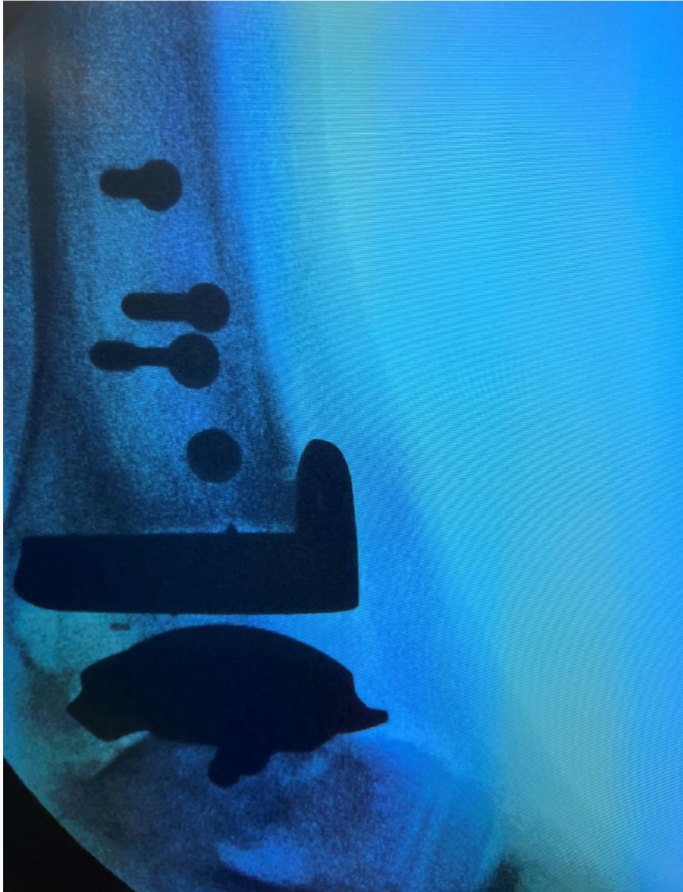
Intra-Op

Intraoperatively, no screws required removal, and a simple parallel resection was performed using standard saw guides; only the shown x-rays were taken intraoperatively, a blue 4 mm plastic insert was used to simulate an 8 mm implant, and a green 8 mm insert was tried with a 5 mm trial poly, but the ankle was tight.



Post-Op

Postoperative findings included a size 4 flat cut talus, size 4 8 mm H3 tibial component, 7 mm poly, restoration of 21 mm joint space with the joint line maintained, and a 90-minute tourniquet time; the surgeon reported satisfaction with flat cut security, the ankle felt stable immediately, approximately 20° of dorsiflexion was achieved, and the surgeons were excited that this option is available on the market.



Take-Aways

Vilex offers a comprehensive ankle revision system designed to maintain the joint line and support a more natural-feeling ankle. Vilex also offers a revision option that does not require going through the subtalar joint, while supporting reduced x-ray exposure, tourniquet time, and procedural stress commonly associated with revision ankle surgery. The system includes flat cut talus options and thicker tibial component options, including H3 8 mm and 12 mm and H2 9.5 mm and 12 mm.

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