VERSAFITCUP® CC FAMILY

EACH TO THEIR OWN

Surgical Technique

Hip | Knee | Spine | Navigation

Medacta International

EACH TO THEIR OWN

The Versafitcup® CC Family is a range of press-fit acetabular shells which offers different solutions according to patient needs: flat and hooded liners in standard UHMWPE or Highcross® cross-linked Polyethylene; ceramic liners; possibility to be supported or not by screws. The acetabular shell is available in three different versions: Versafitcup® CC and Versafitcup® CC Trio with lateral screw holes, and Versafitcup® CC Light, without lateral holes.

The Versafitcup® CC Family and the Versafitcup® constitute the Versafitcup® System: a unique concept, which offers a complete product range for any requirement.

PREAMBLE

This document describes the Surgical Technique for Versafitcup® CC, Versafitcup® CC Trio and Versafitcup® CC Light version.

For more details about Versafitcup® please see the dedicated Surgical Technique.

Carefully read the instructions for use and if you have any questions concerning product compatibility please contact your Medacta® representative.

INDEX

1 INDICATIONS

The Versafitcup® CC Family is designed to be used in total hip arthroplasty, for primary or revision surgery.
Total hip arthroplasty is indicated in the following cases:

- Severely painful and/or disabled joint as a result of arthrosis, traumatic arthritis, rheumatoid polyarthritis or congenital hip dysplasia.
- Avascular necrosis of the femoral head.
- Acute traumatic fracture of the femoral head or neck.
- Failure of previous hip surgery: joint reconstruction, internal fixation, arthrodesis, partial hip arthroplasty, hip resurfacing replacement or total hip arthroplasty.

2 CONTRAINDICATIONS

The Versafitcup® CC Family contraindications are the standard contraindications for total hip replacement:

- Acute, systemic or chronic infection.
- Skeletal immaturity.
- Severe muscular, neurological, vascular deficiency or other pathologies of the affected limb that may compromise the function of the implant.
- Bone condition that may compromise the stability of the implant.

Mental or neuromuscular disorders may create an unacceptable risk to the patient and can be a source of postoperative complications.
It is the surgeon's responsibility to ensure that the patient has no known allergy to the materials used.

3 SPECIAL CONSIDERATIONS

The Versafitcup® CC Family is particularly suitable for ceramic on ceramic bearing, for patients with high activity levels.
Thanks to the lateral screw holes, the Versafitcup® CC and Versafitcup® CC Trio acetabular shell versions guarantee the possibility to implant screws for a further fixation.

4 PREOPERATIVE PLANNING

The goal is to determine the optimum acetabular implant size. Using the set of X-ray templates to the scale of 1.15:1 (with an X-ray of the same magnification) it will be possible to determine:

- The implant size.
- The ideal position of the acetabular shell for optimum coverage.

NOTICE: The final implant will be selected intra-operatively, because of possible discrepancies between actual conditions and templating. The choice will be determined by the last used reamer size and tests made with trial cup.

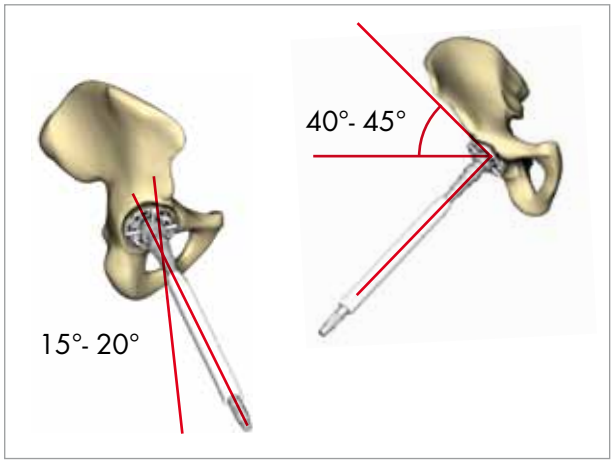
5 SURGICAL APPROACH

The choice of surgical approach is up to the surgeon.
The instrumentation has been developped for a posterior approach. A specifc instrumentation for the anterior approach is available under request (for further information see the AMIS® dedicated surgical technique).

6 REAMING

After performing an osteotomy of the femoral neck, expose and prepare the acetabular cavity and remove osteophytes.
Start reaming with the acetabular reamers.

The ideal reaming axis has an inclination of 40°/45° and an anteversion of 15°/20° (anteversion recommended for posterior approaches).



Reaming of the acetabulum starts with the smallest reamer and increases in increments of 2 mm, until a perfectly regular hemispherical cavity has been obtained, in the presence of bleeding subchondral bone.

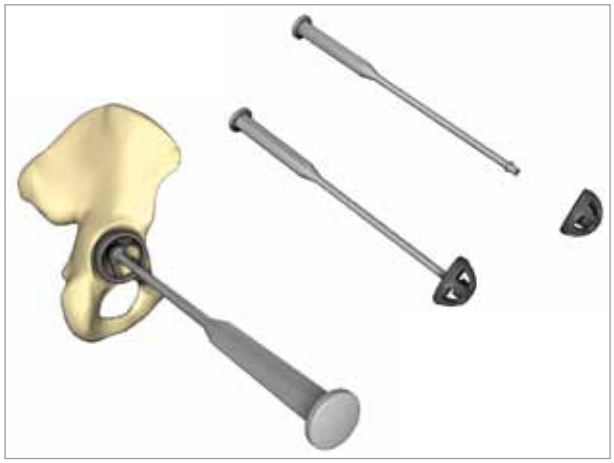
WARNING

During final reaming, avoid changing the reamer axis, in order not to make the prepared bed oval, which may affect or prevent primary seating of the implant.

As a general rule the right diameter corresponds to 4 or 6 mm greater than the femoral head diameter size. Take care to retain, as far as possible, the bone stock up to the level of anterior and posterior columns.
Bone reamings may be saved for void filling between implant and acetabulum.

7 TRIALS

Assemble the trial cup with the same diameter of the last reamer onto the multifunction handle.
Insert the trial cup into the reamed cavity in order to estimate the depth and the orientation of the acetabular component.

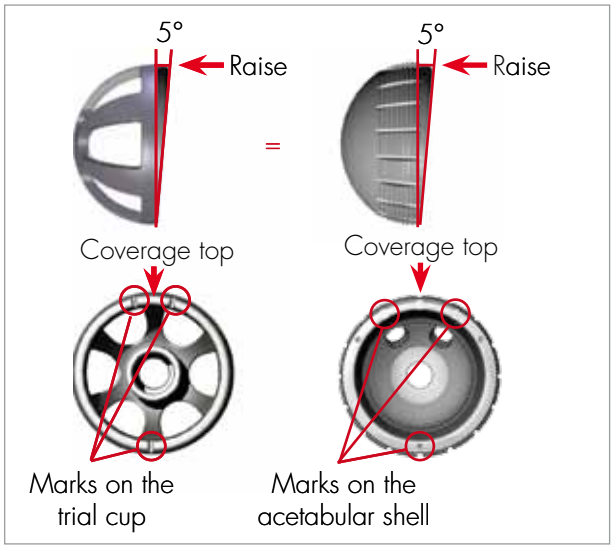


Trial cups:

- Are smooth and have the same dimensions as the reamers to avoid damaging the socket.
- Are slightly undersized compared to the implant to allow a maximum press-fit effect with the definitive implant.
- Have several openings to permit a direct view of the underlying acetabular surface.

Both reamers and trial cups are hemispherical, whereas the implants are elliptical and equatorially expanded, providing a good initial press-fit.

Both implant and trial cup have a 5° raise. Marks on the trial cup and on the acetabular shell help to identify coverage top (see image).



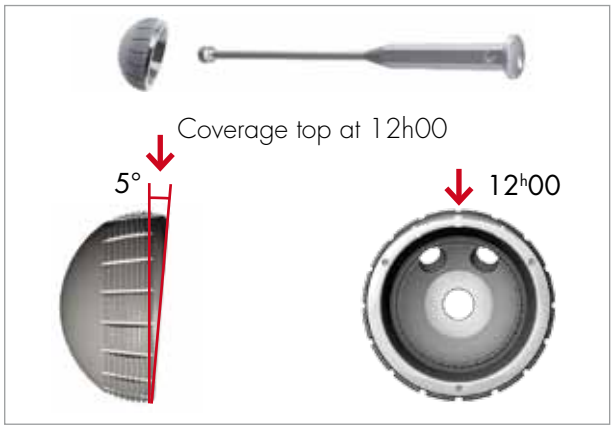
OPTION

In order to ensure the correct positioning of the definitive acetabular shell, use electrocautery to mark the coverage top.

NOTICE: If the trial cup is not stable or primary stability is doubtful, especially in the presence of poor bone quality, it is possible to choose a larger cup size, either with or without additional acetabular reaming.

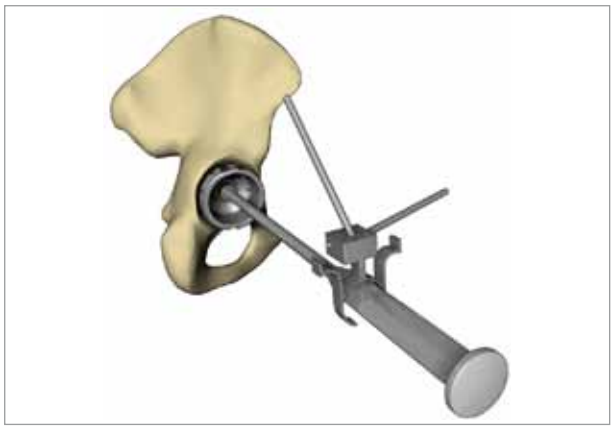
8 IMPACTION OF THE ACETABULAR SHELL

After a satisfactory trial, the final acetabular shell can be positioned. The definitive acetabular shell size will be the same as the final trial cup size. However the acetabular shell is slightly oversized in order to allow a maximum press-fit.
Assemble the impactor handle (ref. 01.26.10.0062) with the acetabular shell until it is completely locked, in order not to damage the impactor screw thread during the impaction. Impact the implant at the desired angle of orientation into the prepared acetabulum.

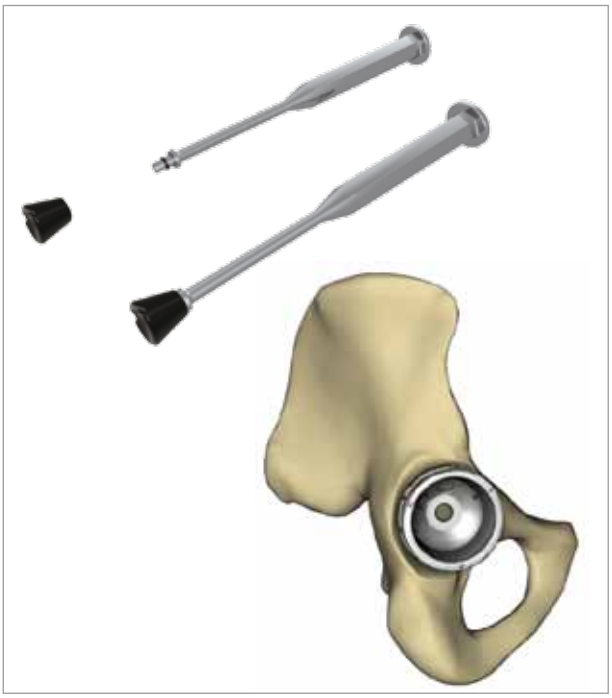


OPTION

An orientation guide is available to aid in the acetabular shell positioning and to find satisfactory orientation tested during trials: the orientation guide will be positioned on the top of the impactor handle. The two rods are inclined at 45° and 20° to the handle.



Never use the impactor handle after the impaction to reposition or rotate the acetabular shell, in order not to damage the threaded end. If needed, use only the acetabular shell correction impactor, assembled with the multifunction handle. Impact the acetabular shell with the aid of a hammer, until it is completely stable.
Remove the impactor handle.



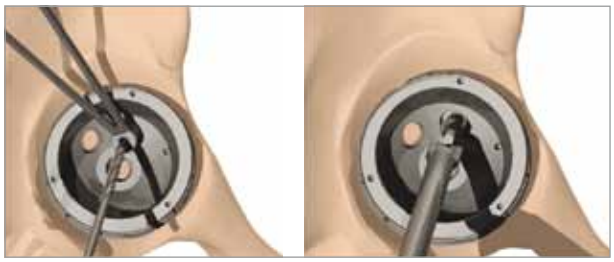
CAUTION

After impaction of the acetabular shell, ensure osteophytes have been properly removed in order to avoid any impingement.

TRICK

In order to ensure the correct depth of the definitive acetabular shell, use the mark made during the test with the trial cup or use the holes to see the acetabulum floor. Because of the elliptical shape of the acetabular shell, it is normal to have a space between acetabular shell and acetabulum floor. This distance should be no deeper than 2 mm.

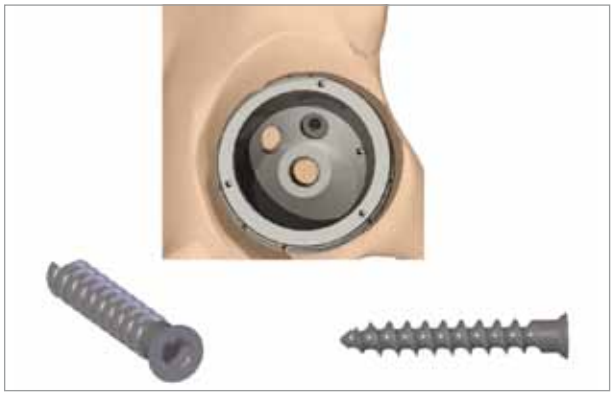
In case of instability of the trial cup or any doubt of its primary stability, it is possible to add intra acetabular screws (only for Versafitcup® CC and Versafitcup® CC Trio versions).
In order to implant acetabular screws, drill through the acetabular shell holes using a ∅ 3.2 mm drill bit with the help of a drill guide.
Use the hooked depth gauge in order to measure the drilling depth and select a self-tapping screw of appropriate length (with flat head and ∅ 6.5 mm).
Screwing is performed with the aid of a universal hex-head screwdriver.



CAUTION

Always use flat head screws and check that the screws are fully seated (ensure that the screw heads do not protrude from the inner surface of the acetabular shell).
The maximum screw angle allowed round the radial positioning is 10°.

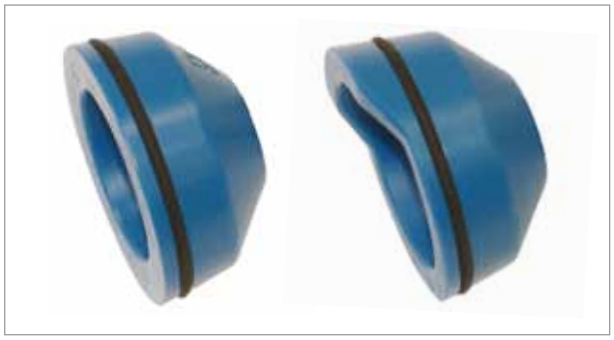
NOTICE FOR VERSAFITCUP® CC LIGHT AND VERSAFITCUP® CC TRIO: it is possible to close the central hole with a metallic plug, which is packed together with the acetabular shell.



NOTICE FOR VERSAFITCUP® CC: for the Versafitcup® CC version, if screws have not been implanted, it is possible to close the lateral acetabular shell holes with metallic plugs. The acetabular shell is packed separated from metallic plugs (ref. 01.26.55.TP).

9 STABILITY TEST

During stability tests, the choice between a flat and a hooded liner can be made according to the surgeon's choice (ceramic liner is not available in hooded version).



Clean the interior surface of the acetabular shell.
Assemble the multifunction handle with the trial liner corresponding to the acetabular shell size and femoral head diameter (liners with interior diameter of 36 mm are available only for ceramic and flat UHMWPE Highcross® versions).
Position the assembly in the acetabular shell.
Unscrew the multifunction handle and reduce the hip in order to test the joint stability and limb length.
After checking and testing mobility, joint stability and lower limb length, remove the trial liner with the aid of the multifunction handle.

TRICK

In case of hooded trial liner, use electrocautery to mark the satisfactory position of the hood.

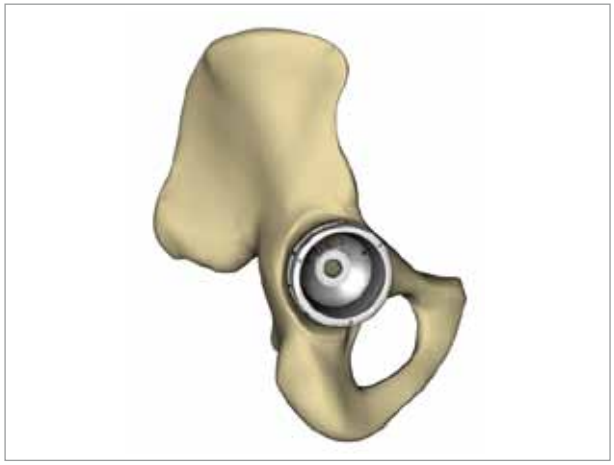
WARNING

Tests of stability must be performed with trial heads and not with definitive heads. The head sizes XL (for ∅ 28 mm, ∅ 32 mm) and XXL (for ∅ 28 mm, ∅ 32 mm, ∅ 36 mm) have a collar. This may decrease the Range of Motion in comparison to smaller sizes. Always perform trial reduction with the chosen head size.

10 POSITIONING OF DEFINITIVE LINER

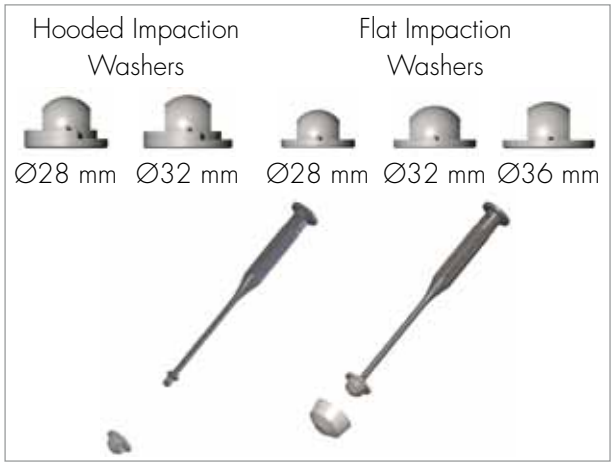
The definitive liner must be chosen following the specific letter encoding, which is reported also in the paragraph "possible combinations of implants"; the internal diameter of the liner will be the same as the head chosen.

Before inserting the liner clean the interior surface of the acetabular shell, carefully remove any bone debris and tissue residues to avoid damage that could compromise the mechanical bearing.

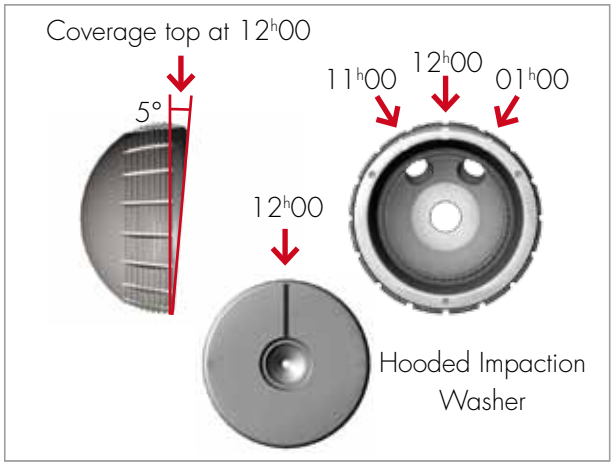


10.1 Positioning of definitive UHMWPE liner

The definitive UHMWPE liner is assembled on the multifunction handle always together with the impaction washer for the fixed liner corresponding to the head diameter and type of liner chosen.
The assembly is positioned in the acetabular shell.



The hooded liner raise orientation can be performed with the aid of: markings on the acetabular shell at 11h00, at 12h00 and at 13h00, a laser marking on the impaction washer at 12h00 and finally, a mark made during the test with hooded trial liner.



Impact the UHMWPE liner with the aid of a hammer, until completely fixed.
Remove the multifunction handle with its impaction washer.

TRICK

In order to control the correct placement for flat liners and the flat part of the hooded liner: check that the outside rim of the acetabular shell is exactly aligned with the outside rim of the liner.

Position the definitive head and reduce the hip.

OPTION

It is possible to use the release key for the washer in order to unlock the impaction washer from the multifunction handle.

10.2 Positioning of definitive ceramic liner

Carefully and manually place ceramic liner in the acetabular shell axis. A suction cap is available to manipulate ceramic liners without touching them.
Check whether the liner has been positioned correctly.

TRICK

In order to control the correct placement for the ceramic liner: check that the outside rim of the acetabular shell is exactly aligned with the outside rim of the liner.

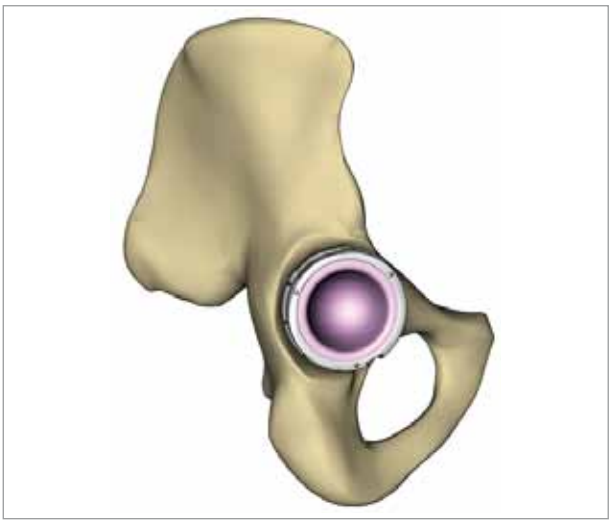
CAUTION

It is not advised to implant a ceramic liner if the cup placement is too vertical, e.g. if the inclination is greater than 45°.
In case of incorrect positioning of the ceramic liner, remove the liner with the blue suction cap and reposition it properly.

If the liner is positioned correctly fix it in the final position by pushing it in with the thumb.

In order to perform a final impaction assemble the ceramic liner impaction sphere of correct diameter with the multifunction straight impactor.

Insert the sphere into the liner and fix the liner into place by exerting a slight hammer stroke in the axial direction.



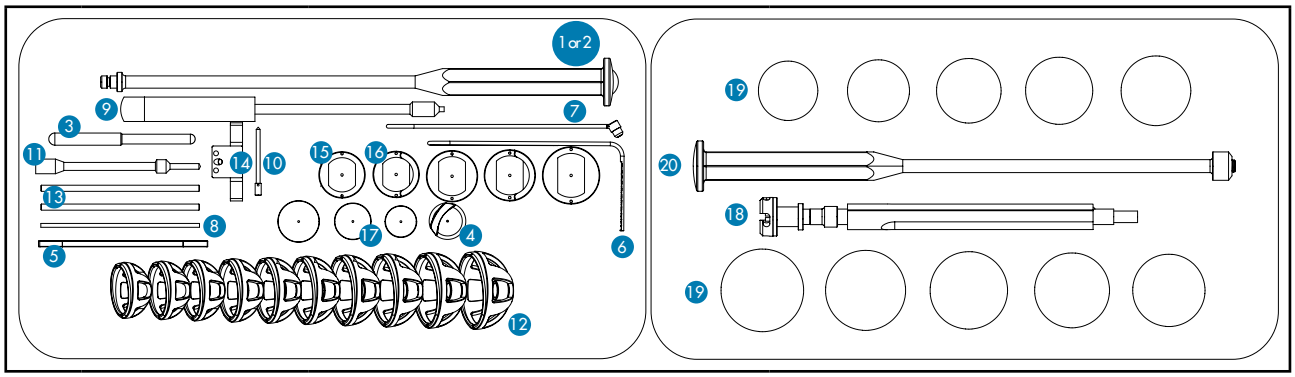
CAUTION

Never bring a metal hammer in contact with a ceramic liner.

Position the final ceramic head and reduce the hip.

11 INSTRUMENTATION NOMENCLATURE

GENERAL INSTRUMENTATION SET - TRAY N° 1

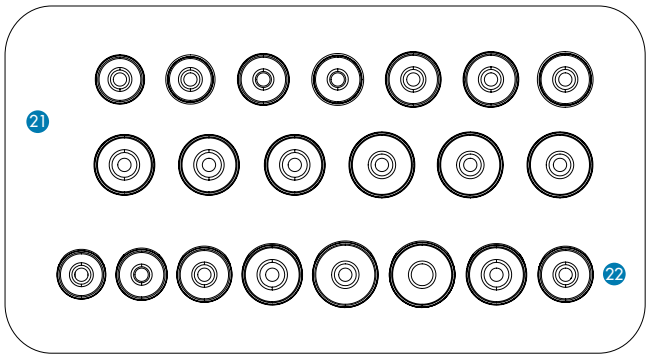


N.	Ref.	Description	
1 or 2	01.26.10.0001 or 01.26.10.0162	Short multifunction handle or Long multifunction handle	
3	01.26.10.0063	Rod for multifunction handle	
4	01.26.10.0075	Acetabular shell correction impactor	
5	01.26.10.0150	Release key for impaction washer	
6	01.26.10.0068	Hooked depth gauge	
7	01.26.10.0078	Angle drill guide	
8	02.02.10.0130	Drill bit Ø 3.2 mm L 130 mm	
9	01.26.10.0011	Cardan hex-head screwdrivers 3.5 mm	
10	01.26.10.0012	Bayonet drill Ø 3.2 mm L 56 mm	
11	01.26.10.0013	Flexible bayonet drill holder	
12	01.26.10.0020	Trial Cup Ø 46 mm	
	01.26.10.0021	Trial Cup Ø 48 mm	
	01.26.10.0022	Trial Cup Ø 50 mm	
	01.26.10.0023	Trial Cup Ø 52 mm	
	01.26.10.0024	Trial Cup Ø 54 mm	
	01.26.10.0025	Trial Cup Ø 56 mm	
	01.26.10.0026	Trial Cup Ø 58 mm	
	01.26.10.0027	Trial Cup Ø 60 mm	
	01.26.10.0028	Trial Cup Ø 62 mm	
	01.26.10.0029	Trial Cup Ø 64 mm	
13	01.04.10.0012	Rod for orientation guide	

N.	Ref.	Description	
14	33.22.0066	Orientation guide	
15	01.26.10.0090 01.26.10.0091 01.26.10.0092	Impaction washer for flat liner PE Ø 28 mm Impaction washer for flat liner PE Ø 32 mm Impaction washer for flat liner PE Ø 36 mm	
16	01.26.10.0093 01.26.10.0094	Impaction washer for hooded liner PE Ø 28 mm Impaction washer for hooded liner PE Ø 32 mm	
17	01.26.10.0095 01.26.10.0098 01.26.10.0099	Ceramic liner impaction sphere Ø 28 mm Ceramic liner impaction sphere Ø 32 mm Ceramic liner impaction sphere Ø 36 mm	
	01.11.10.0600	Ceramic liner suction cap	
	01.26.10.0059	Hexagonal head screwdriver L 350 mm	
18	01.11.10.0600	Handle for acetabular reamer	
19	01.30.10.3140	Acetabular reamer Ø 40 mm	
	01.30.10.3142	Acetabular reamer Ø 42 mm	
	01.30.10.3144	Acetabular reamer Ø 44 mm	
	01.30.10.3146	Acetabular reamer Ø 46 mm	
	01.30.10.3148	Acetabular reamer Ø 48 mm	
	01.30.10.3150	Acetabular reamer Ø 50 mm	
	01.30.10.3152	Acetabular reamer Ø 52 mm	
	01.30.10.3154	Acetabular reamer Ø 54 mm	
	01.30.10.3156	Acetabular reamer Ø 56 mm	
	01.30.10.3158	Acetabular reamer Ø 58 mm	
	01.30.10.3160	Acetabular reamer Ø 60 mm	
	01.30.10.3162	Acetabular reamer Ø 62 mm	
	01.30.10.3164	Acetabular reamer Ø 64 mm	
20	01.26.10.0062	Impactor handle	

	01.26.10.0400	Empty tray	
	02.02.10.0412	External tray for sterilisation	

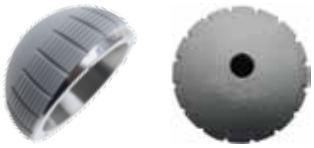
DEDICATED INSTRUMENTATION FOR VERSAFITCUP® CC - TRAY N° 2



N.	Ref.	Description	
21	01.26.10.0200 01.26.10.0211 01.26.10.0201 01.26.10.0210 01.26.10.0202 01.26.10.0203 01.26.10.0212 01.26.10.0204 01.26.10.0205 01.26.10.0206 01.26.10.0207 01.26.10.0208 01.26.10.0209	Flat Trial Liner Ø 28 mm C (Red) Flat Trial Liner Ø 32 mm C (Red) Flat Trial Liner Ø 28 mm D (Yellow) Flat Trial Liner Ø 32 mm D (Yellow) Flat Trial Liner Ø 28 mm E (Blue) Flat Trial Liner Ø 32 mm E (Blue) Flat Trial Liner Ø 36 mm E (Blue) Flat Trial Liner Ø 28 mm F (Black) Flat Trial Liner Ø 32 mm F (Black) Flat Trial Liner Ø 36 mm F (Black) Flat Trial Liner Ø 28 mm G (Green) Flat Trial Liner Ø 32 mm G (Green) Flat Trial Liner Ø 36 mm G (Green)	
22	01.26.10.0220 01.26.10.0221 01.26.10.0222 01.26.10.0223 01.26.10.0224 01.26.10.0225 01.26.10.0226 01.26.10.0227	Hooded Trial Liner Ø 28 mm C (Red) Hooded Trial Liner Ø 28 mm D (Yellow) Hooded Trial Liner Ø 28 mm E (Blue) Hooded Trial Liner Ø 32 mm E Blue) Hooded Trial Liner Ø 28 mm F (Black) Hooded Trial Liner Ø 32 mm F (Black) Hooded Trial Liner Ø 28 mm G (Green) Hooded Trial Liner Ø 32 mm G (Green)	

	01.26.10.0402	Empty tray	
	02.02.10.0413	External tray for sterilisation	

12 IMPLANTS NOMENCLATURE



VERSAFITCUP® CC LIGHT ACETABULAR SHELL

Diameter (mm)	Ref.	Liner Size
46	01.26.46MBTL	C
48	01.26.48MBTL	C
50	01.26.50MBTL	C
52	01.26.52MBTL	D
54	01.26.54MBTL	E
56	01.26.56MBTL	E
58	01.26.58MBTL	F
60	01.26.60MBTL	F
62	01.26.62MBTL	G
64	01.26.64MBTL	G

VERSAFITCUP® CC ACETABULAR SHELL

Diameter (mm)	Ref.	Liner Size
48	01.26.48MBT	C
50	01.26.50MBT	C
52	01.26.52MBT	D
54	01.26.54MBT	E
56	01.26.56MBT	E
58	01.26.58MBT	F
60	01.26.60MBT	F
62	01.26.62MBT	G
64	01.26.64MBT	G

ACETABULAR SHELL SCREW PLUG VERSAFITCUP® CC

Description	Ref.
Plug	01.26.55.TP

VERSAFITCUP® CC TRIO ACETABULAR SHELL

Diameter (mm)	Ref.	Liner Size
46	01.26.45.0046	C
48	01.26.45.0048	C
50	01.26.45.0050	E
52	01.26.45.0052	E
54	01.26.45.0054	E
56	01.26.45.0056	F
58	01.26.45.0058	F
60	01.26.45.0060	F
62	01.26.45.0062	G
64	01.26.45.0064	G

CANCELLOUS BONE SCREW (FLAT HEAD - Ø 6.5 mm)

Length (mm)	Ref.
20	01.26.65.20
25	01.26.65.25
30	01.26.65.30
35	01.26.65.35
40	01.26.65.40
45	01.26.65.45

UHMWPE FLAT LINER

Liner size (mm)		C	D	E	F	G
head	Ø 28	01.26.2839STT	01.26.2841STT	01.26.2844STT	01.26.2848STT	01.26.2852STT
	Ø 32	-	-	01.26.3244STT	01.26.3248STT	01.26.3252STT

UHMWPE HOODED LINER

Liner size (mm)		C	D	E	F	G
head	Ø 28	01.26.2839AT	01.26.2841AT	01.26.2844AT	01.26.2848AT	01.26.2852AT
	Ø 32	-	-	01.26.3244AT	01.26.3248AT	01.26.3252AT

FLAT CROSSLINKED UHMWPE LINER (Highcross®)

Liner size (mm)		C	D	E	F	G
head	Ø 28	01.26.2839HCT	01.26.2841HCT	01.26.2844HCT	01.26.2848HCT	01.26.2852HCT
	Ø 32	-	-	01.26.3244HCT	01.26.3248HCT	01.26.3252HCT
	Ø 36	-	-	-	01.26.3648HCT	01.26.3652HCT

HOODED CROSSLINKED UHMWPE LINER (Highcross®)

Liner size (mm)		C	D	E	F	G
head	Ø 28	01.26.2839HCAT	01.26.2841HCAT	01.26.2844HCAT	01.26.2848HCAT	01.26.2852HCAT
	Ø 32	-	-	01.26.3244HCAT	01.26.3248HCAT	01.26.3252HCAT

CERAMIC LINER (BIOLOX® *delta*) CeramTec

Liner size (mm)		C	D	E	F	G
head	Ø 28	38.49.7188.765.20	38.49.7188.775.20	38.49.7188.785.20	38.49.7188.795.20	38.49.7188.805.20
	Ø 32	38.49.7188.525.20	38.49.7188.535.20	38.49.7188.845.20	38.49.7188.855.20	38.49.7188.865.20
	Ø 36	-	-	38.49.7188.545.20	38.49.7188.555.20	38.49.7188.565.20
	Ø 40	-	-	-	38.49.7188.585.20	38.49.7188.595.20

13 POSSIBLE COMBINATIONS OF IMPLANTS

All Medacta® implants possible combinations are represented in the table "Medacta® hip product compatibility" (ref. 99.99.COM), available at www.medacta.com.

IMPORTANT NOTE: With the ceramic on ceramic bearing it is compulsory to use ceramic of femoral heads compatible with that of the ceramic liner.

VERSAFITCUP® CC TRIO LETTER ENCODING

LINER	Ø HEAD (mm)	Ø ACETABULAR SHELL (mm)									
		46	48	50	52	54	56	58	60	62	64
UHMWPE Flat	28	C	C	E	E	E	F	F	F	G	G
	32			E	E	E	F	F	F	G	G
UHMWPE Hooded	28	C	C	E	E	E	F	F	F	G	G
	32			E	E	E	F	F	F	G	G
BIOLOX® *delta*	28	C	C	E	E	E	F	F	F	G	G
	32	C	C	E	E	E	F	F	F	G	G
	36			E	E	E	F	F	F	G	G
	40						F	F	F	G	G
Highcross® Flat	28	C	C	E	E	E	F	F	F	G	G
	32			E	E	E	F	F	F	G	G
	36						F	F	F	G	G
Highcross® Hooded	28	C	C	E	E	E	F	F	F	G	G
	32			E	E	E	F	F	F	G	G

VERSAFITCUP® CC and VERSAFITCUP® CC LIGHT LETTER ENCODING

LINER	Ø HEAD (mm)	Ø ACETABULAR SHELL (mm)									
		46	48	50	52	54	56	58	60	62	64
UHMWPE Flat	28	C	C	C	D	E	E	F	F	G	G
	32					E	E	F	F	G	G
UHMWPE Hooded	28	C	C	C	D	E	E	F	F	G	G
	32					E	E	F	F	G	G
BIOLOX® *delta*	28	C	C	C	D	E	E	F	F	G	G
	32	C	C	C	D	E	E	F	F	G	G
	36					E	E	F	F	G	G
	40							F	F	G	G
Highcross® Flat	28	C	C	C	D	E	E	F	F	G	G
	32					E	E	F	F	G	G
	36							F	F	G	G
Highcross® Hooded	28	C	C	C	D	E	E	F	F	G	G
	32					E	E	F	F	G	G

Part numbers subject to change.

NOTE FOR STERILIZATION

The instrumentation is not sterile upon delivery. It must be cleaned before use and sterilized in an autoclave respecting the regulations of the country EU, directives where applicable and following the instruction for use of the autoclave manufacturer.
For detailed instructions please refer to the document "Recommendations for cleaning decontamination and sterilization of Medacta® International reusable orthopedic devices" available at www.medacta.com.

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