INBONE® TOTAL ANKLE REPLACEMENT: SHORT-TERM OUTCOMES AND INTRAOPERATIVE COMPLICATIONS IN 128 CONSECUTIVE PATIENTS

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Disclosure

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Our disclosures are in the Final AOFAS Program Book.

There is a potential conflict with this presentation due to:
Consultant, Wright Medical (GCB, CFH, THL)
Introduction

• INBONE® Total Ankle System (Wright Medical Technology, Arlington, TN)
  – Modular total ankle replacement (TAR)
  – FDA approved for use in 2005
  – Implant design principles and surgical technique substantially different from the other FDA approved total ankle replacements
Purpose

• Report early surgical experience and complications with the INBONE® prosthesis
Methods

• Institutional Review Board (IRB) approved
  – Retrospective review
    • TAR database
• Single center, consecutive series
• 4 fellowship trained foot and ankle surgeons
Results

• 132 ankles in 128 patients
  – Males: 64
  – Females: 64
    • Avg age: 63 (sd +/- 10; r 32 -83)

• Average follow-up:
  – 23 months
Results

- Complications:
  - Intraoperative: 4
    - Medial malleolus fracture
  - Postoperative: 21
    - Impingement/Heterotopic Ossification (8)
    - Osteolysis/Aseptic loosening (2)
    - Infection – superficial (7), deep (1)
    - Medial malleolus fracture (3)

- Overall reoperation rate: 12.5%
  - 1 implant removed (deep infection) and converted to fusion
Conclusions

• INBONE® Total Ankle prosthesis is a unique fixed bearing modular design
  – surgical technique based on intramedullary guides for implant positioning and alignment
• Overall short-term operative and clinical results are encouraging
• More clinical data is needed to better clarify the indications and outcomes for this prosthesis
References


THANK YOU