

The following guidelines are indicative; it is responsibility of the surgeon to evaluate the adequacy and the use of this technique according to his experience and his medical skills.

# 1 Incision

Make a dorsal incision medially to the long extensor tendon of the big toe and perform a full thickness capsulotomy. Remove the deformed and hyperostotic portions, now exposed, by means of ossivora and saw.





## 2 Articular surfaces resection

Position the specific cutting guide using the dotted line on the back and medial sides of the guide as reference, so as to obtain the correct positioning of the cutting surfaces. The line has to coincide with the joint space. Evaluate the proper guide size (20/30; 35; 40/50), ensuring that the cutting mask adheres to the best with the bone portions. Fix the guide to the bone by applying the proper mask and two Kirschner wires on each side. Then proceed with the resection of the metatarsal and phalangeal joint surfaces using a 0.8 mm thick blade and paying attention to the short flexor of the big toe. Remove the resected surfaces.



Manually identify the metatarsal and phalangeal medullary canals using a tip. Once the canal has been identified, use the rasp (mounted on the appropriate rasp holder), of the size corresponding to the device chosen for the implant, to prepare the relative medullary canals (regardless of whether you rasp the metatarsal canal first and then the phalangeal one or vice-versa); pay attention to keep the upper, lateral and medial edges of the rasp parallel with the corresponding edges of the related metatarsal and phalangeal portions. Rasp up to the complete contact with the bone surfaces.

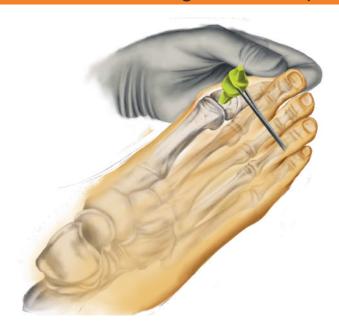


# **(4)**

## Size identification

Insert the test spacer, corresponding to the size of the implant that is presumed to be definitive, introducing first the proximal stem and then the distal one. Verify the perfect adherence of the spacer to the surface of the resected bone planes, checking the mobility and stability of the implant.





## **5** Grommets positioning

Once the definitive size has been identified, open the package of the chosen implant and remove the grommets, leaving the silicone spacer inside its envelope. Check grommets on the trial sizer in order to be sure to identify the correct portions and press-fit them in the medullary canals using impactor instrument: the impactor with rectangular section is used for positioning the metatarsal grommet, trapezoidal impactor for phalangeal grommet. Bring the grommets into contact with the resected bone surface. Use Volkmann spoon to remove possible bone residues that could interfere with spacer's stem.



## **Final implant**

Insert the final spacer of the same size of the tested one (introducing first the proximal stem and then the distal one) and test both its mobility and stability through bending movements of the big toe. It is useful at this phase to perform an X-ray for the evaluation of grommets and implant positioning.





## **7** Wound closure

Proceed with an accurate suture of the capsule, subcutaneous and skin planes and with the dressing and bandage of the wound.

In the case you need to remove the implant: make a dorsal incision of the big toe (proceeding medially to the long extensor tendon) and perform a full thickness capsulotomy. First remove the silicone component, using a needle holder, and then the grommets, using a surgical forcep. If resistance is encountered during the extraction of the metal component, use a small chisel. Perform an implant revision or an arthrodesis intervention according to the most appropriate clinical indication for the case and suture the patient's capsule and skin again.

#### **IMPLANT** CODE **DESCRIPTION**

- Spacer Silicone elastomer
- Grommets Titanium alloy
- Sterilization Ethylene Oxide (EO)

### MAIN CONTRAINDICATIONS:

- Active sepsis
- Neurological and/or circulatory and/or skin and/or bone irreparable deficiency and/or non-functioning musculotendinous system
- Psychologically unsuitable patient
- Child patient

### BRDNEWP2020L Silktoe Spacer - Size 20 Left BRDNEWP3030L Silktoe Spacer - Size 30 Left BRDNEWP3535L Silktoe Spacer - Size 35 Left BRDNEWP4040L Silktoe Spacer - Size 40 Left BRDNEWP5050L Silktoe Spacer - Size 50 Left BRDNEWP2020R Silktoe Spacer - Size 20 Right BRDNEWP3030R Silktoe Spacer - Size 30 Right Silktoe Spacer - Size 35 Right BRDNEWP3535R BRDNEWP4040R Silktoe Spacer - Size 40 Right Silktoe Spacer - Size 50 Right BRDNEWP5050R

### **INSTRUMENTS**

#### CODE **DESCRIPTION**

SET.SILKTOE Silktoe Instruments Set (full box) **BRDNEWPTSBOX** Silktoe Sterilization Box (no instruments) **BRDNPTHANDLE** Multifunctional Silktoe Handle **BRDNPTHANDSU** Silktoe Handle Sliding Unit BRDNPTCG2030 20-30 Silktoe Cutting Guide BRDNPTCG3535 35 Silktoe Cutting Guide 40-50 Silktoe Cutting Guide BRDNPTCG4050 **BRDNPTCGMASK** Silktoe Cutting Guide Mask BRDNPTR2030P 20-30 Silktoe Metatarsal Rasp BRDNPTR3535P 35 Silktoe Metatarsal Rasp BRDNPTR4050P 30-40 Silktoe Metatarsal Rasp BRDNPTR2030D 20-30 Silktoe Phalangeal Rasp BRDNPTR3535D 35 Silktoe Phalangeal Rasp BRDNPTR4050D 40-50 Silktoe Phalangeal Rasp **BRDNPTRADAPT** Silktoe Rasps Adapter BRDNPTEST20L 20 Left Silktoe Trial Sizer (Green) **BRDNPTEST30L** 30 Left Silktoe Trial Sizer (Orange) **BRDNPTEST35L** 35 Left Silktoe Trial Sizer (Yellow) **BRDNPTEST40L** 40 Left Silktoe Trial Sizer (Blue) **BRDNPTEST50L** 50 Left Silktoe Trial Sizer (Red) BRDNPTEST20R 20 Right Silktoe Trial Sizer (Green) **BRDNPTEST30R** 30 Right Silktoe Trial Sizer (Orange) **BRDNPTEST35R** 35 Right Silktoe Trial Sizer (Yellow) **BRDNPTEST40R** 40 Right Silktoe Trial Sizer (Blue) 50 Right Silktoe Trial Sizer (Red) **BRDNPTEST50R** 20-30 Silktoe Metatarsal Grommets Impactor BRDNPTI2030P BRDNPTI3535P 35 Silktoe Metatarsal Grommets Impactor BRDNPTI4050P 30-40 Silktoe Metatarsal Grommets Impactor BRDNPTI2030D 20-30 Silktoe Phalangeal Grommets Impactor









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35 Silktoe Phalangeal Grommets Impactor

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