



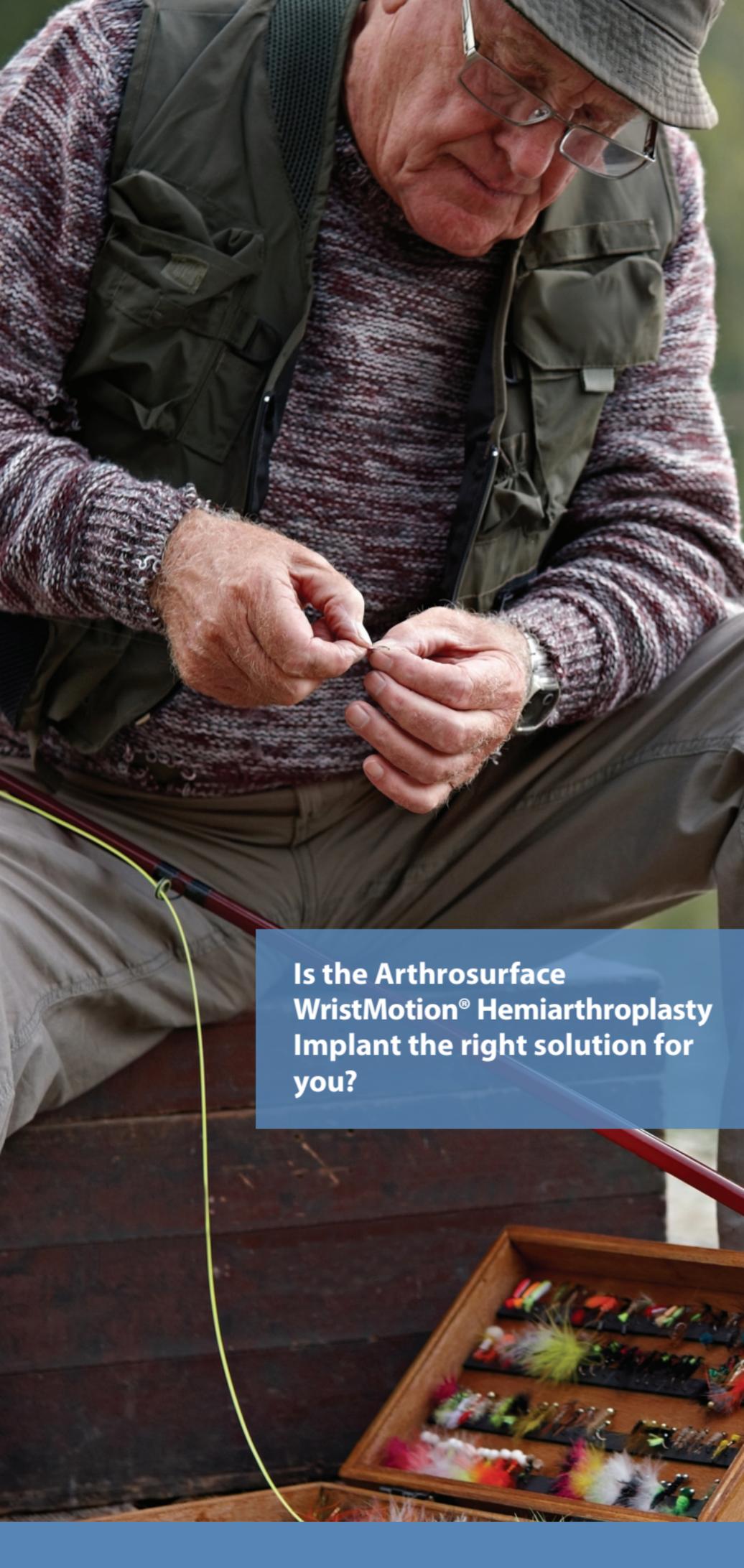
*Actual Patient



Restore Your Active Lifestyle

WristMotion® Patient Pamphlet


arthrosurface®
#STAYACTIVE



**Is the Arthrosurface
WristMotion® Hemiarthroplasty
Implant the right solution for
you?**

OUR PATIENTS STAY ACTIVE

Preserve and prolong motion with The WristMotion® Hemiarthroplasty Implant System

Have you been told that you suffer from degenerative arthritis of the wrist? Did you know that traditional treatments can limit a person's range of motion and ability to perform daily tasks? Or, that they can also restrict physical activities that require grip, strength and wrist rotation?

Unlike traditional treatments, the ArthroSurface WristMotion® Hemiarthroplasty Implant System can allow you to resume activity by preserving the natural anatomy of your joint. It consists of a cap and mating fixation component that allows the surgeon to restore only the damaged area of the joint, without removing excessive bone and tissue. The WristMotion Implant System preserves your natural anatomy and enables you to resume an active lifestyle, without pain.



Wrists and Arthritis

What is arthritis of the wrist?

The wrist is comprised of multiple joints where the bones of the arm and hand meet to allow movement. Arthritis attacks your bones by destroying the cartilage, causing your bones to rub against one another. Arthritis of the wrist can result in severe pain and restriction of movement. Common signs and symptoms of arthritis of the wrist include:

- Stiffness
- Weakness
- Swelling
- Limited range of motion
- Clicking, cracking, or grinding sounds during movement

Can arthritis get worse?

Any event, continued malalignment, or inflammation that injures the cartilage may cause joint damage or arthritis. A minor cartilage injury may become larger and lead to widespread cartilage loss or degenerative joint disease over time. Initially, wrist arthritis treatments typically include splint immobilization, anti-inflammatory medication, and steroid injections. As arthritis progresses, additional treatment options are often sought.





What are the treatment options for wrist arthritis?

Depending on the degree of cartilage injury, patient age, and the level of activity desired, there are now four options for patients suffering from wrist arthritis and SNAC and SLAC Wrists. These include a Proximal Row Carpectomy (PRC), Four Corner Fusion (4-CF), the WristMotion Implant System and Wrist Arthroplasty.



**For more information on
The WristMotion[®], visit
www.arthrosurface.com**





Traditional Proximal Row Carpectomy (PRC) involves excision of the proximal row of carpal bones (scaphoid, lunate, and triquetrum). The procedure removes bones that are arthritic and creates non-anatomic articulation between the capitate and the radius. PRC is an option for a limited patient population because it requires the capitate to not be arthritic, something a doctor cannot identify until the capitate is exposed during surgery. If the capitate is determined to be arthritic, the doctor must change procedures, on-the-fly, and decide what the next best option is. Also, a PRC may not perform well for patients under forty because the capitate can wear over time, creating pain and reducing range of motion.



Four Corner Fusion removes only the scaphoid bone, which is where most wrist arthritis originates. The remaining arthritic joints are treated by fusing them together, allowing only the lunate and radius joint to move. In a long-term comparison of PRC vs. Four Corner Fusion, one study reported no statistical difference in grip strength or functionality at 15 years, although the PRC provided significantly better range of motion. Also, the complication rate of Four Corner Fusions was four times higher than PRC.¹

1. Mulford JS et al. Proximal row carpectomy vs four corner fusion for scapholunate (Slac) or scaphoid nonunion advanced collapse (Snac) wrists: a systematic review of outcomes. *J Hand Surg Eur Vol.* 2009 Apr;34(2):256-63

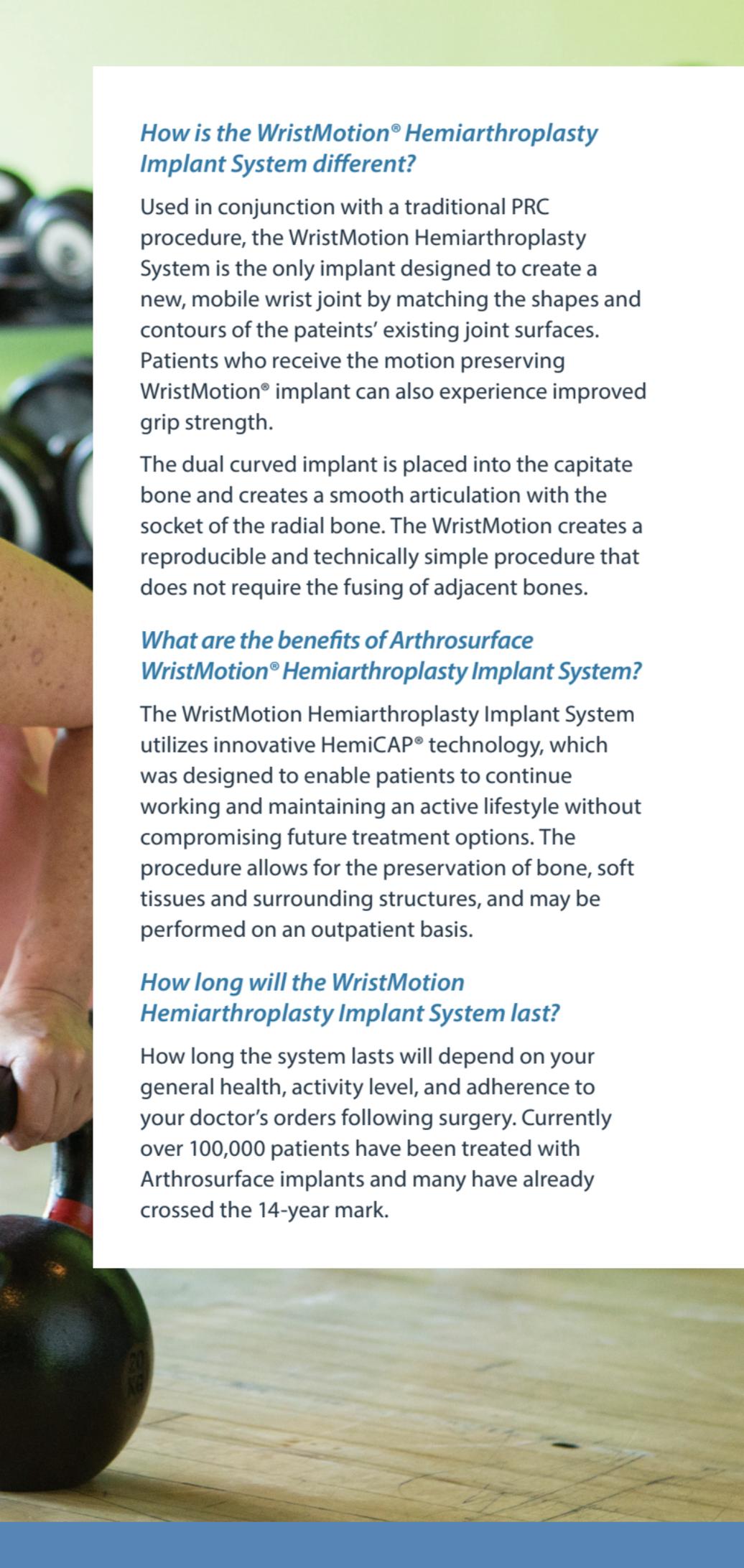


Wrist Arthroplasty is typically used to treat severe arthritis of the Wrist Joint. Although an option, they are typically hardware-intense systems which require difficult cuts across multiple small bones, which are then fused. This requires the removal of significant bone. Once performed, carpal loosening can become a problem.



WristMotion® Hemiarthroplasty Implant System is used in conjunction with a PRC, widening the patient population and enabling more patients to benefit from PRC treatment. Unlike a PRC, the WristMotion® is designed to recreate the lunate's curvature on the capitate, preserving the anatomic curvature relationship with the radius and creating a more stable, congruent articulation, while also eliminating the concern for capitate wear.





How is the WristMotion® Hemiarthroplasty Implant System different?

Used in conjunction with a traditional PRC procedure, the WristMotion Hemiarthroplasty System is the only implant designed to create a new, mobile wrist joint by matching the shapes and contours of the patients' existing joint surfaces. Patients who receive the motion preserving WristMotion® implant can also experience improved grip strength.

The dual curved implant is placed into the capitate bone and creates a smooth articulation with the socket of the radial bone. The WristMotion creates a reproducible and technically simple procedure that does not require the fusing of adjacent bones.

What are the benefits of ArthroSurface WristMotion® Hemiarthroplasty Implant System?

The WristMotion Hemiarthroplasty Implant System utilizes innovative HemiCAP® technology, which was designed to enable patients to continue working and maintaining an active lifestyle without compromising future treatment options. The procedure allows for the preservation of bone, soft tissues and surrounding structures, and may be performed on an outpatient basis.

How long will the WristMotion Hemiarthroplasty Implant System last?

How long the system lasts will depend on your general health, activity level, and adherence to your doctor's orders following surgery. Currently over 100,000 patients have been treated with ArthroSurface implants and many have already crossed the 14-year mark.

What happens if my WristMotion® Hemiarthroplasty Implant System fails?

One of the benefits of the WristMotion® Hemiarthroplasty Implant System is that it preserves skeletal anatomy and bone stock. This gives your doctor the flexibility to perform a fusion or total wrist arthroplasty in the future, if recommended.

What is the recommended rehab protocol?

Because the WristMotion® Hemiarthroplasty Implant System is used in conjunction with a traditional PRC, it does not prolong recovery time. Your doctor will recommend a rehab protocol similar to that following a traditional PRC.

Will I feel the device?

You should not feel the device. The implant is designed to be surgically placed so that there are no protruding edges.

How long will I be out of work?

This will depend on your overall health, range of motion, and the type of work you do. Many patients have experienced a rapid return to daily activities. However, as with all medical treatments, individual results may vary.





**The bone and the implant
become a smooth
surface.**





Questions to ask your doctor during your visit

- Will my joint feel normal and move naturally after I have the surgery?
- Will I be able to perform daily tasks (open jars, grip handles, etc.)?
- Will I be able to participate in my favorite activities (golf, tennis, bowling, etc.)?
- Does this treatment preserve skeletal anatomy and bone stock?
- How long will I be hospitalized?
- Can the procedure be performed on an outpatient basis?
- Will the recovery take weeks or months?
- Can I go back to all my previous sports and activities?

Are you a candidate for WristMotion® Hemiarthroplasty Implant System in conjunction with PRC?

- You are 35 to 75 years old
- You have been diagnosed with SLAC or SNAC Wrists
- You want to regain your active lifestyle
- You have had non-surgical treatment such as nonsteroidal anti-inflammatories and/or biologic injections, but the pain has returned
- You cannot afford lengthy rehabilitation time or excessive time off work
- You are experiencing weakness, dislocation, instability, pain and/or reduced grip strength in the wrist
- Your surgeon has told you that you will need a wrist fusion in the future



A photograph of a man in a garden, seen from the side, using pruning shears to trim a rose bush. The scene is set outdoors with a clear blue sky and green foliage. The man's face is partially visible in the upper left corner, and his hands are in the lower left corner, holding the shears. The rose bush has green leaves and some reddish-brown buds. The background shows a blurred green lawn and more trees.

A Patient's Story

"For years it hurt just to bend my wrist, but I love playing golf and working in my garden, so fusing my wrist wasn't an option. Today I hunt, fish, work in my garden, and play softball – there's nothing I can't do at the age of 59. Furthermore, I have improved range of motion in my wrist and no pain! I remember that the procedure went smoothly and recovery time was short. The best part of all of this, is that I get to spend time again with my wife Janice in the garden. Choosing the WristMotion® was the greatest thing I ever did in my life."

*– Stephen, 59 years old,
WristMotion® Patient*



Due to its general applicability, do not rely on information in this brochure to assess any particular patient condition. Individual results may vary. Seek professional medical advice for specific personal care. Do not delay seeking professional medical advice or disregard professional medical advice because of something you have read in this brochure.

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