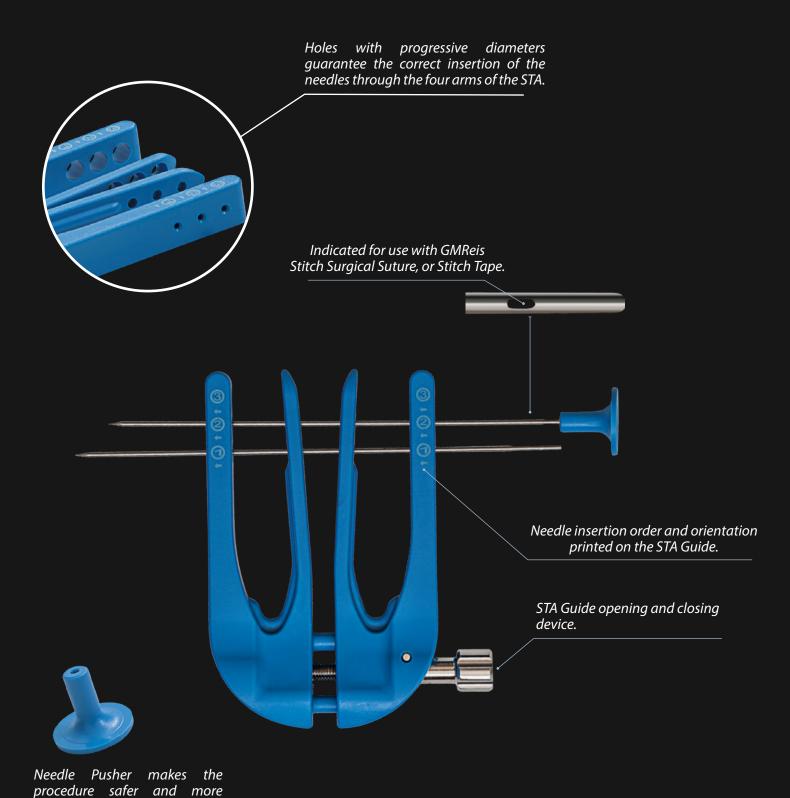
STA ACHILLES TENDON SUTURE SYSTEM ENGLISH 💥



STA - ACHILLES TENDON SUTURE SYSTEM

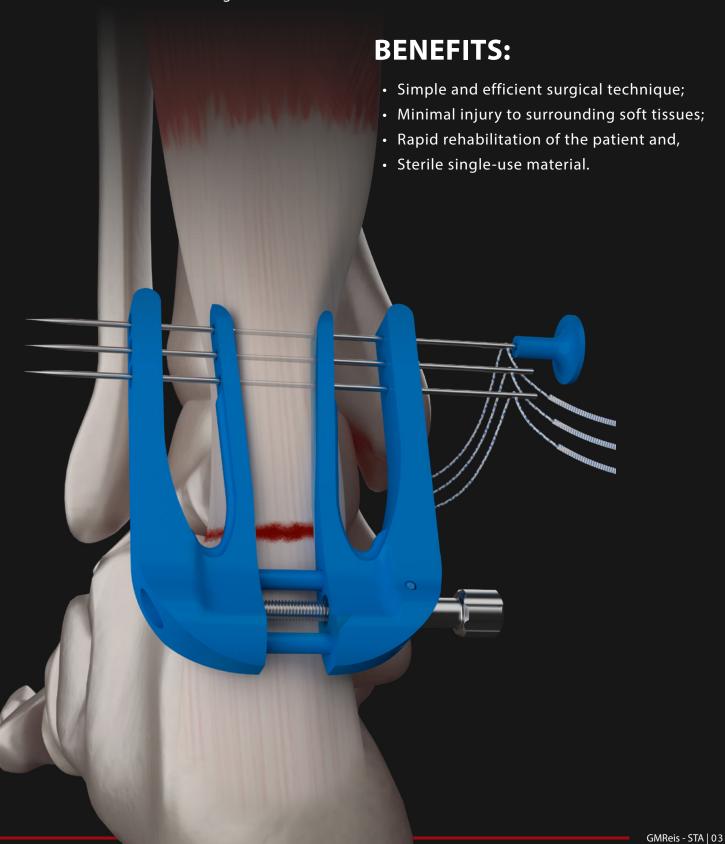
The STA was developed for the minimally invasive surgical treatment of Achilles tendon rupture, providing safety to the percutaneous suture treatment and allowing visual monitoring of the tenorrhaphy.



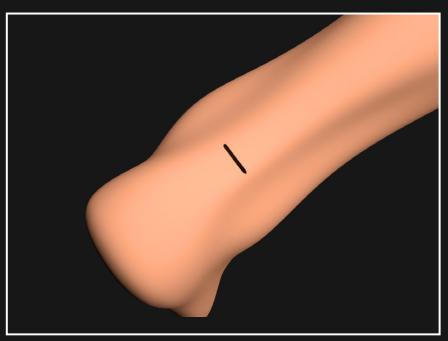
comfortable for the surgeon.

INDICATIONS:

- Acute Achilles tendon ruptures located between 2 and 8 cm from the insertion of the tendon;
- Closed ruptures and,
- Ruptures with exposure less than 6 hours and without loss of skin coverage.



TÉCNICA CIRÚRGICA

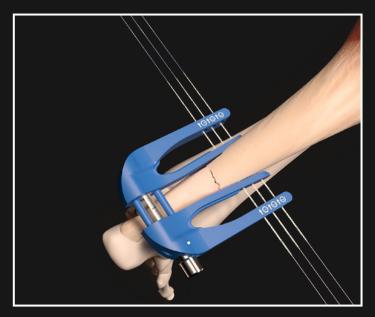


Make a 15 to 20 mm incision, transversal to the tendon, in the region of the clinically palpable gap. After blunt dissection of the subcutaneous cellular tissue, incise the paratenon in a longitudinal orientation.





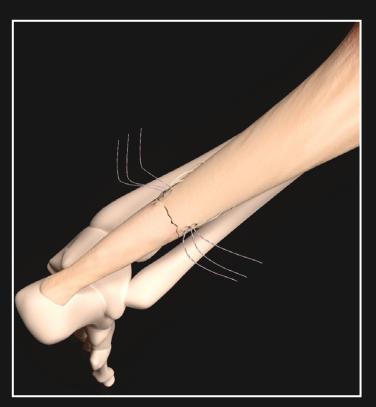
Identify the tendon stumps, if there is a difficulty, the skin incision should be enlarged. By gently separating the edges of the paratenon, position the proximal stump of the tendon centrally to the internal arms of the STA Guide (C: 223-01-01) with the aid of a surgical instrument (e.g. Allis or Kocher). Progress the STA Guide cranially into the space between the tendon and the paratenon, progressively opening its internal arms, and rotating the metallic device.

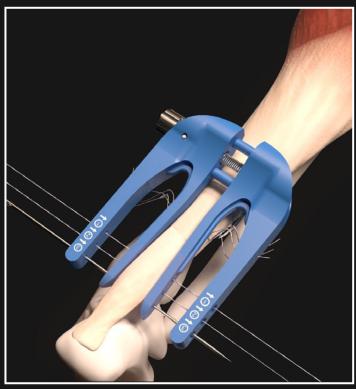




Palpate the tendon externally and perform the second check of the correct position and angulation of the STA Guide. With the help of the STA Pusher (C: 223-01-02), pass the three STA Needles (C: 223-01-03) through the STA Guide Body, according to the orientation of the arrows and sequence printed on the STA Guide.

Withdraw the STA Guide gently to avoid soft tissue damage. While the STA Guide Body is withdrawn, the inner arms are progressively closed, rotating the metallic device.





Perform the same sequence of procedures at the distal end, in which the STA Guide Body should be introduced until it touches the calcaneus bone. After removing the wires from the distal end, properly organize the suture pairs or tapes in the break area.





The approximation of the tendon stumps is controlled under direct visualization and its tension must be compared to the opposite leg. The knots of the three sutures are performed, the Thompson test should be negative, and then the paratenon, subcutaneous cellular tissue and skin are closed.



To increase the resistance of the fixation, it is possible to replace the sutures of the proximal stump with GMReis Stitch high-resistance tapes.

STA BRIDGE

The STA Bridge technique consists of the combined use of STA products for the percutaneous passage of GMReis Stitch Tapes through the proximal stump, and Fastlock knotless anchors for insertion into the calcaneus.

INDICAÇÕES

- Distal ruptures of the Achilles tendon, relatively close to the insertion into the calcaneus bone;
- Achilles tendon ruptures whose distal stump has poor tissue quality and,
- Achilles tendon ruptures to accelerated rehabilitation.

BENEFITS

- · Simple and efficient surgical technique;
- Minimal injury to surrounding soft tissues;
- Rapid rehabilitation of the patient and,
- Sterile single-use material.



Proximal stump suture with GMReis Stitch high-resistance tapes provides greater security for the treatment.

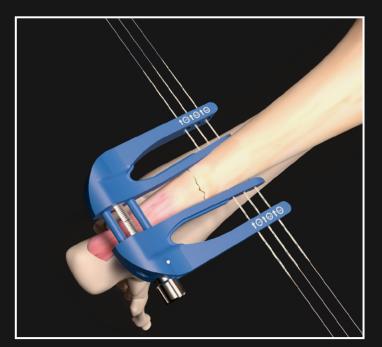
The tapes are transported using the Easy Pass GMReis suture passer.



Fastlock anchor Ø4.75 x 19.1 mm

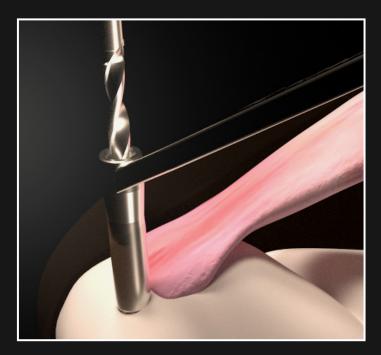


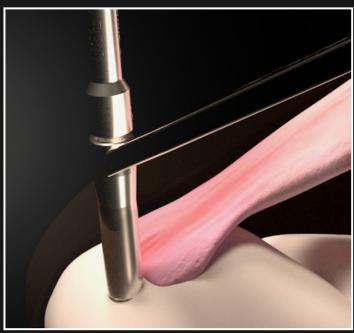
SURGICAL TECHNIQUE



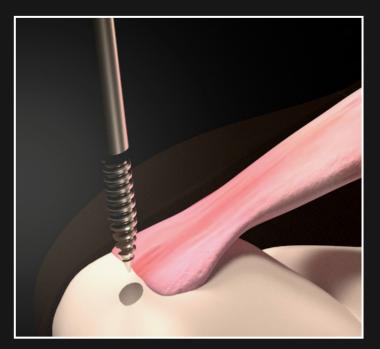


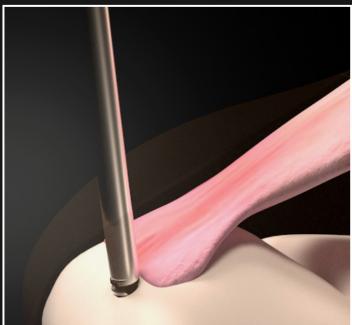
Carry out the steps of incision, the introduction of the STA Guide, and percutaneous passage of the STA needles loaded with Stitch tapes through the proximal stump.



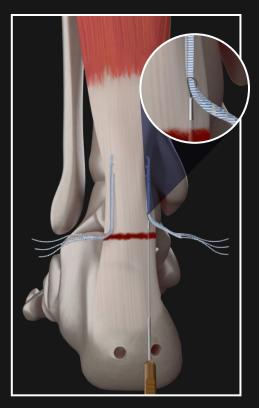


Make two small incisions in the insertion region of the Achilles tendon into the calcaneus bone, one medial and one lateral, respecting a safety distance between them. Perform the perforations using the Fastlock drill Ø3.4 mm (C: 320-110-34) to the depth limit determined by the Fastlock Guide (C: 320-110).





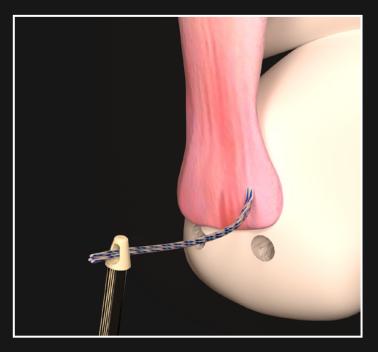
Tap the drilling to the laser marking of the 4.75 mm Fastlock Tap (C: 320-FL-475).

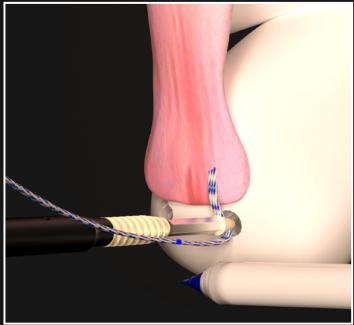




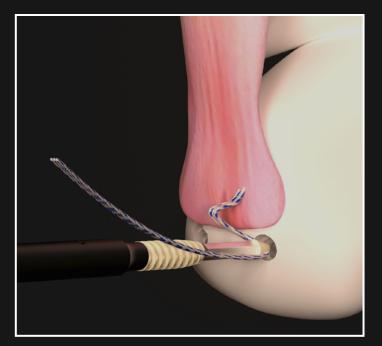


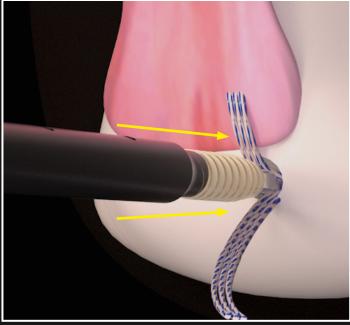
Introduce the Easy Pass through the one of the distal accesses until it crosses the proximal stump above the injury area. Through the proximal access, position the the respective ends of the tapes in the Easy Pass nitinol loop, and transport them to the distal access. Repeat this step to transport the lateral ends of the tapes for lateral distal access.



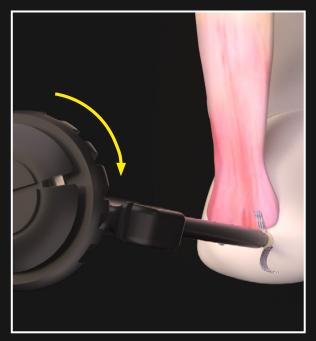


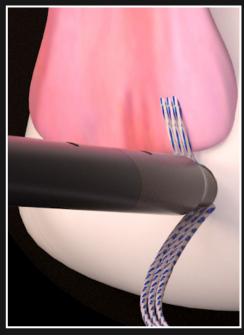
Pass the three tapes ends through the eyelet of the Fastlock anchor Ø4.75 x 19.1 mm. position the eyelet of the anchor at the entrance of the drilling with the tension determined by the surgical planning, and use the inserter's laser marking to highlight the tapes.





Reposition the pen-marked parts of the tape inside the anchor eyelet, and insert the eyelet of the anchor anchor into the bottom of the hole.







Apply the anchor by holding the square part of the inserter cable, with light pressure against the botton of the hole, and turn the round part of the cable clockwise, until the Fastlock anchor is completely implanted with zero profile.





Repeat the steps for implant the second anchor.



STA KIT

CODE	DESCRIPTION
233-01	Achilles Tendon Suture System Contents

CONTENTS

	CODE	DESCRIPTION
1	223-01-01	STA Guide
2	223-01-02	STA Pusher
3	223-01-03	STA Needles





STITCH – SUTURE AND TAPE WITH CLOSED EYELET

CODE	DESCRIPTION	MEASUREMENTS	
333-20-AB	Needle UHMWPE Tape	2.0 x 100.0 mm	
333-20-В	Needle UHMWPE Tape	2.0 x 100.0 mm	



MICRO EASYPASS

CODE	MODEL
335-600	Micro EasyPass - Micro Suture Passer Extra Large Curve

FASTLOCK KNOTLESS PEEK ANCHORS

CODE	Ø	LENGTH	TAPE	WIRE
320-475191-PE4	4.75 mm	19.1 mm		
320-475191-PE5	4.75 mm	19.1 mm		
320-475191-PE2	4.75 mm	19.1 mm		





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