

Ashley A Stratton-Powell¹, Alexandra Smyth¹, Sophie Williams¹, Anthony C Redmond², Joanne L Tipper¹, John Fisher¹, Claire Brockett¹
¹ Institute of Medical & Biological Engineering, University of Leeds, UK, ² NIHR LMBRU, Leeds Teaching Hospitals Trust, UK

Introduction

- Total ankle replacement (TAR) is less successful than other joint replacements with approximately 77% survivorship at 10 years [1].
- No international standard for pre-clinical testing TAR devices exists and only limited pre-clinical testing has been reported.
- Retrieval analyses can determine changes in bearing form (i.e. shape) as a result of plastic deformation or wear.



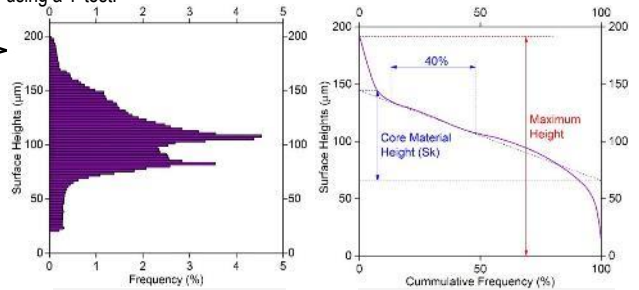
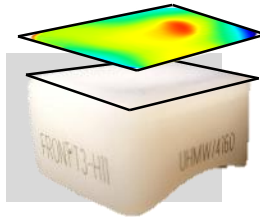
Corin Zenith TAR

- Replication of in-vivo wear/deformation behaviour is important in the validation of effective in-vitro pre-clinical testing regimes.
- This study compared the surface characteristics of UHMWPE mobile bearing inserts between retrieved TARs and devices tested in an ankle wear simulator.**

Materials and Methods

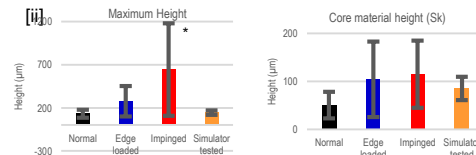
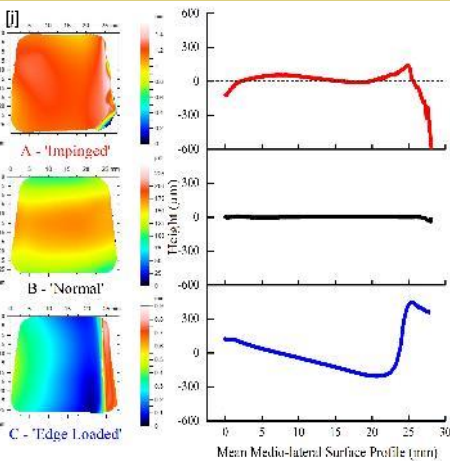
- Forty-four mobile-bearing TARs were retrieved (HRA ethics ref: 09/H1307/60). Mean implantation time was 7.8 years (range: 1.5-15.0).
- Concurrently, six unimplanted Zenith (Corin, UK) TARs were tested in an ankle joint simulator for 3 million cycles aligned optimally, followed by 2 million cycles with 7.5° coronal malalignment, lubricated with 25% bovine serum.

- An InfiniteFocus microscope (Alicona, AT) measured the superior surface of all mobile-bearing TAR inserts.
- Form-change was identified visually, quantified using surface characterisation parameters (ISO 25178-2:2012) and compared (retrieved vs. simulation) using a T-test.

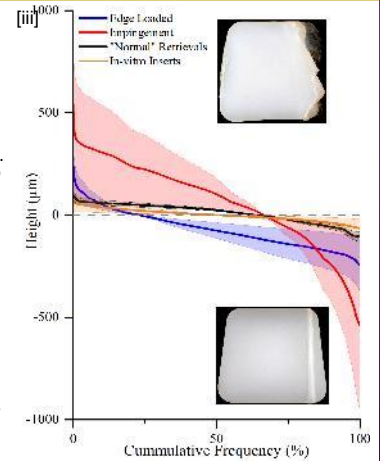


Results

- Fifteen retrievals (34.1%) were impinged showing insert destruction, 21 (47.7%) were edge-loaded, identified by an inflection of deformed material, and eight (18.2%) were considered 'normal', without edge-loading or impingement.
- Of the inserts tested in-vitro, one exhibited evidence of edge-loading and the remaining inserts were 'normal' in appearance.
- In-vitro tested inserts were not significantly different to 'normal' retrievals for any surface height parameters ($p > 0.05$).



Figures i, ii, iii.
 [i] Three examples from the cohorts of A- edge-loaded (n=21), B- impinged (n=15) and C- 'normal' (n=8) retrieved TAR inserts alongside their mean medio-lateral surface profile (normalised to zero).
 [ii] Mean maximum height and core material height (Sk) for each defined category.
 [iii] The mean Abbott-Firestone curves for each category of retrievals compared to those tested in-vitro (n=6).



Significance

- Edge-loading and impingement were frequent (81.8%) damage modes in retrieved failed TARs, which may negatively affect device function and patient outcomes.
- Visualisation and surface characterisation using non-contacting 3D profilometry highlighted form-changes that could otherwise be overlooked and underreported.
- Current in-vitro ankle joint simulation can replicate in-vivo insert form-changes to an extent, although enhanced ankle simulation methods are required to represent more diverse in-vivo conditions and to better simulate conditions of failure.

[1] Gougoulas, N., et al (2010). *Clinical Orthopaedics and Related Research*, 468(1), 199-208.

Financial Disclosure: AS is funded by an EPSRC CASE studentship, supported by Corin Group. JF and SW are paid consultants to DePuy International. CB receives research funding from Corin Group, MalOrtho and Xiros.
Acknowledgements: JF is an NIHR senior investigator. This research work is supported by EPSRC, the Leeds Centre of Excellence in Medical Engineering, WELMEC, funded by the Wellcome Trust and EPSRC, WT088908/Z/09/2 and the Leeds Musculoskeletal Biomedical Research Unit (LMBRU), funded by NIHR.