Digifix

dynamic finger fixation





Technical notes

The Gexfix external fixator is designed for treatment of diaphyseal and epiphyseal fractures. Its versatility makes osteotomy fast and efficient.

Components are completely compatible between the various models (small, large or hybrid).

- Pins can be inserted independently in any plane. They are then connected with carbon tubes to form the fixation frame.
- Pin cluster clamps holding 2 or 3 parallel pins provide a simple frame in one plane.
- Three-plane fracture reduction and intraoperative or post-operative correction of fracture alignment is possible.

Technical features

- MRI compatible.
- Titanium and surgical steel.
- Carbon fibre.
- Reduces post-op pain.
- Swiss made.
- Made of high performance composite material providing.
- The high-performance composite materials are radiolucent (transparent to X-rays), allowing better visualisation of the fracture.
- Maximum stability.
- Significantly reduced weight compared with other external fixation frames.
- High strength components result in frame configurations that are more compact than those of other systems.
- Short learning curve for the surgeon.
- Versality limited only by the anatomy.
- Configuration possibilities are limited only by the anatomy.
- Sterilisation boxed sets contain assorted components for construction of a virtually unlimited variety of frame configurations.
- Can be used for definitive or temporary fixation.

Method of installation Proximal interphalangeal joint

Placement of a first d: 1.5 mm Schanz pin using a drill at low speed.

Percutaneous insertion of the first pin is made in the neck of the proximal phalanx through both cortices. The percutaneous insertion of the second Schanz Pin is made on the base of the middle phalanx through both cortices.

Percutaneous insertion of one or two supplementary pins is made in the diaphyses of the proximal and middle phalanxes through both cortices.

The Digifix fixator is installed and operational.

Metacarpophalangeal joint

Placement of a first d: 1.5 mm Schanz pin using a drill at low speed.

Percutaneous insertion of the first pin is made in the neck of the metacarpal phalanx through both cortices.

The percutaneous insertion of the second Schanz Pin is made in the base of the proximal phalanx through both cortices.

Percutaneous insertion of one or two supplementary pins is made in the diaphyses of the metacarpal and middle phalanges through both cortices.

The Digifix fixator is installed and operational.

Avantages and benefits

- Pivot lock Early mobilization of the joint
- Setting the relaxation force
- Composite materials light for the patient
- Radio transparent, allows better monitoring of the trauma
- Two possible positions for each pin
- Exercise protocol available for each patient

Indications /use

- IFP Articular fractures
- MF Articular fractures
- Open fractures of phalanges and / or associated with loss of soft tissue
- Unstable metaphyseal fractures

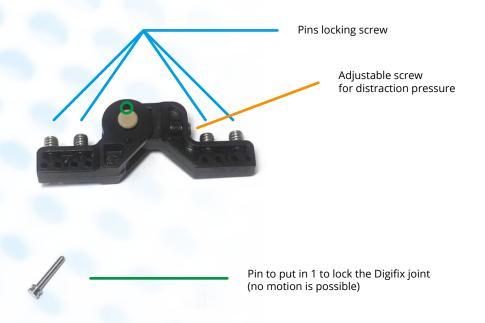
References and variants available 1060-1002.

I. Presentation

The Digifix Kit is composed of one Digifix, 4 Ø1.5mm Schanz pins, and a key for assembly and disassembly.



Different parts of Digifix:



To properly use Digifix, you have to respect the following surgical technique.

II. Surgical Technique

1. Proximal interphalangeal joint

NB: All pins are inserted percutaneously using a drill at low speed.

Step 1: First pin placement

The first pin is implanted in the neck of the proximal phalanx through both cortices.



Step 2: Digifix placement

Lock the Digifix joint and unscrew the four screws on the top of Digifix.

Slide Digifix along the first pin, using one of the two proximal holes (of the proximal branch).



Step 3: Second pin placement

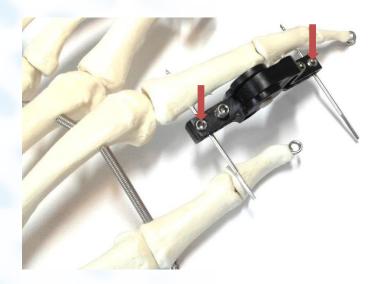
The insertion of the second pin is made on the base of the middle phalanx through both cortices.

You can use the Digifix as a guide to be sure to implant the second pin in the right position (Use one of the two distal holes (of the distal branch)).



Step 4: Digifix position locking

When Digifix is correctly positioned, lock the two screws.



Step 5: Supplementary pins insertion

You can implant one or two supplementary pins in the diaphysis of the proximal and middle phalanxes through both cortices.

Lock the two others screws.



Step 6: Digifix working

Digifix joint is locked



• Digifix joint is free





NB: you can adjust distraction pressure by screwing or unscrewing adjustable screw.

2. Metacarpophalangeal joint

NB: All pins are inserted percutaneously using a drill at low speed.

Step 1: First pin placement

The first pin is implanted in the neck of the metacarpal phalanx through both cortices.



Step 2: Digifix placement

Lock the Digifix joint and unscrew the four screws on the top of Digifix.

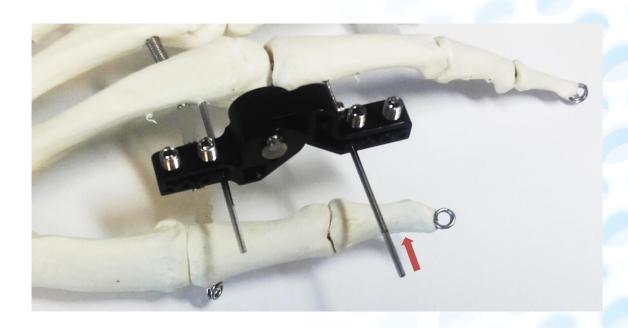
Slide Digifix along the first pin, using one of the two distal holes (of the proximal branch).



Step 3: Second pin placement

The insertion of the second pin is made on the base of the proximal phalanx through both cortices.

You can use the Digifix as a guide to be sure to implant the second pin in the right position (Use one of the two proximal holes (of the distal branch)).



Step 4: Digifix position locking

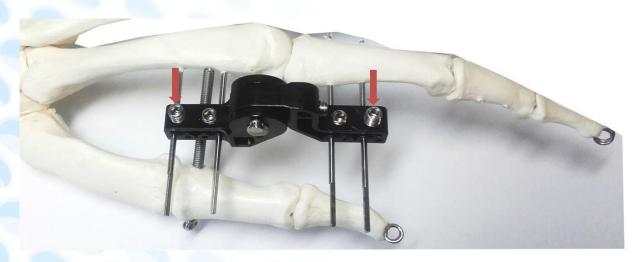
When Digifix is correctly positioned, lock the two screws.



Step 5: Supplementary pins insertion

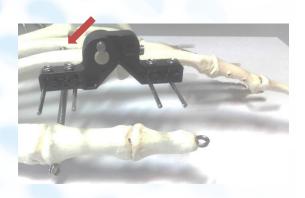
You can implant one or two supplementary pins in the diaphysis of the proximal and middle phalanxes through both cortices.

Lock the two others screws.



Step 6: Digifix working

Digifix joint is locked





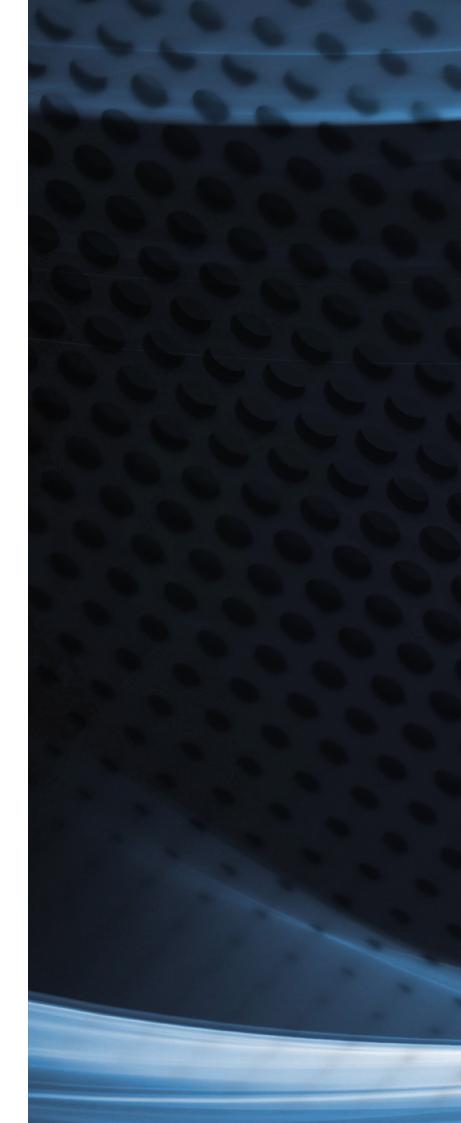
Digifix joint is free





NB: you can adjust distraction pressure by screwing or unscrewing adjustable screw.







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