MiniBone

external fixator





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.

I. Presentation

Indications

Description: Hand and foot fractures. Metacarpal bone lengthening and metatarsals. Processing brachymétatarsalgies.

REF: 1060 -1014



The potential other uses are:

- Fracture reduction (metacarpus or metatarsus)
- Linear mandibular bone reconstruction
- Circular mandibular bone reconstruction

	REF	Designation
	REF 2010-1016	Self drilling pin 2*50 titanium
	REF 2010-2010	Self drilling pin 2*50 inox
	REF 2010-1005	Self drilling pin 1.5*50 titanium
	REF2010-1007	Self drilling pin 1.5*50 inox
	REF 1060-1014	Minibone
	REF 5015-1000	Screw handle
	Wera 2 Stainless	Allen key

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

II. Surgical Technique

Step 1: Minibone set up

Set up the MiniBone to the initial configuration (0 mm).



Step 2 : Pins implantation (manually with the drill brace)

Firstly, implant the first pin (Ø1.5 mm or Ø2 mm (inox or titanium)) in the proximal part of the concerned metatarsus (the 4th metatarsus in the example). Then, use the MiniBone as a guide to implant others pins.



Step 3: Osteotomy

Cut the metatarsus between the 2^{nd} and the 3^{rd} pin.



Step 4: MiniBone positionning

- Slide the MiniBone along the four pins.
- Lock the Minibone in the optimal position by screwing the screws (with the Allen Key) topress the pin into the MiniBone.



Step 5: Lengthening step

Unscrew gradually (frequency and value of distraction are chose by the surgeon himself) the spanner adjuster to allow bone reconstruction.



Be careful: Do not exceed the maximal lengthening of the MiniBone (2.5 cm materialized by a STOP line)

BRACHIMETATARSIA





OSTEO-ARTHRITE FISTULAE

Osteo-arthritis with fistulae metatarsian first radius of the foot.

Good results, return to no infection after joint resection with the saw concave convex of cartilage, to limit the loss of bone substance and implementation of the MINIBONE. Compression to the follow-up consultation.

Case n ° 1 with axial pins in the suites.

Case n ° 2 implantation to 60 days not pins, Arthrodesis only by the external fixator.



MANDIBULAR PSEUDOARTHROSIS

Description:

Facial reconstruction. Mandibles elongation.





Preimplantation simulation.

Coupling Minibone plus easyclip.



Bone transport after osteotomy.





ADRIAN MED, s.r.o. Lazovná 53 974 01 BANSKÁ BYSTRICA info@adrianmed.eu www.adrianmed.eu



Gexfix external fication orthopeadics

Gexfix SA Avenue de la Praille 50 CH - 1227 Carouge



