



STAR[®] PSI

TOTAL ANKLE REPLACEMENT

HOW WOULD YOU TREAT ANKLE ARTHRITIS WITH SEVERE DEFORMITY?

By Ariel Palanca, MD - San Diego, CA

INITIAL PRESENTATION

A 73-year-old male farmer presented with end-stage arthritic ankle deformity in valgus malalignment. He was in daily pain and failing non-operative treatment with bracing and injections. The patient's history included end-stage ankle arthritis with 23° of coronal plane valgus deformity (FIGURE 1).



Pre-operative radiographs showing end-stage ankle arthritis with 23° of coronal plane valgus deformity.

PRE-PLANNING/INTRAOPERATIVE

An ankle replacement was performed using the STAR[®] Total Ankle, utilizing the PSI cuts guides and operative plan (FIGURE 2). The hindfoot alignment was successfully corrected during surgery by leveraging an MIS burr and a 7.0mm Arsenal screw (FIGURE 3).

CASE SUMMARY

TIBIAL AXES

Anterior to posterior Lateral to medial

There is a 1.15° difference between the Tibia Full Axis and the Tibia Distal Sagittal Axis. The sagittal slope of the Tibia Resection was planned perpendicular to the Tibia Full Axis.

FINAL IMPLANTS

DESIGN SPECIFICATIONS

	TIBIA	TALUS
RESECTION HEIGHT	6.0MM	3.6MM
CUT ANGLE	0° NEUTRAL	N/A
CORONAL DEFORMITY CORRECTION	0° NEUTRAL	17.9° NEUTRAL
CUT DEPTH FOR SAWBLADE	68.5MM	54.5MM

SELECTED TIBIAL IMPLANT SIZE LEFT

Size XL

MEDIAL MALLEOLUS THICKNESS

17.41mm

SELECTED TALAR TRIAL

Size L Left

FIGURE 2

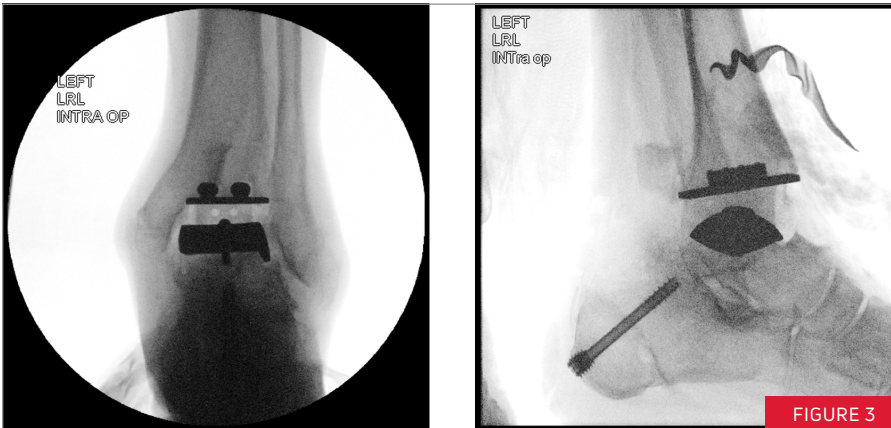


FIGURE 3

Intraoperative radiographs showing successful alignment of the hindfoot using a STAR® Ankle with an MIS burr and 7mm Arsenal screw.

POST-OPERATIVE

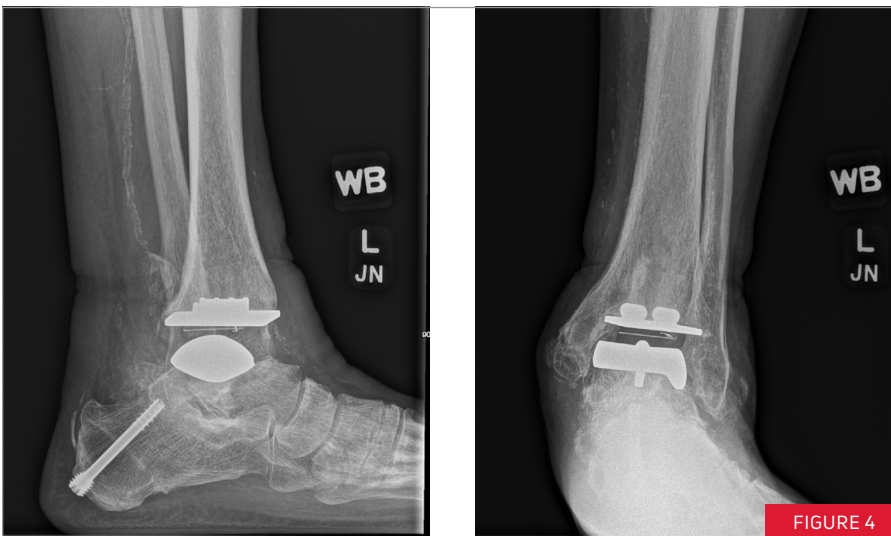


FIGURE 4

6-month post-operative radiographs showing maintained alignment and ongrowth. Patient is now ambulating without a brace and back to farming without pain.



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