References

The advanced features of the Corail® stem, and its bone-preserving surgical technique, have made it the implant of choice for minimally invasive hip surgery. 20 years ago, we began a revolution with the use of HA in orthopaedics. Today we face an exciting new era, and we look forward with confidence in sharing continued success with the world’s orthopaedic community.

Intelligent Hip Surgery is an approach to patient treatment that places equal importance on:
- Maximising survivorship
- Optimising function
- Accelerating recovery

The Corail® system is an integral part of the Intelligent Surgery campaign.

The S-ROM® Modular System provides orthopaedic surgeons and patients with the most successful solution to address, without compromise, the biomechanical challenges encountered in primary, complex primary and revision surgery.

Intelligent Surgery

The Gold Standard in Femoral Biomechanics
The S-ROM® Modular Hip System is a global product with an excellent clinical heritage. For more than 20 years, over 150,000 S-ROM® stems have been implanted throughout the world with no design changes. The numerous combinations of stems, sleeves and femoral heads allow for the creation of a customised implant that provides maximum fit and fill, proven stability and optimal biomechanics in primary surgery.

“380 stems implanted between 5 and 17 years and only 2 revisions.”
Cameron HU Orthopedics 2005.

“The S-ROM® stem remains stable at mean follow-up of 12 years.”
73 hips at mean 12 years follow up

“Typical post-operative follow-up of 98% survivorship at 5 years for primary.”
175 hips in 159 patients at mean 5 years follow-up
Christie M et al. JBJUS 1999.
RESTORATION OF BIOMECHANICS
The S-ROM® stem offers extensive intraoperative choices for managing offset, leg length and version independently to achieve restoration of patients biomechanics.\(^6\)

MOBILITY AND STABILITY MAXIMISATION
The S-ROM® stem permits accurate combined version adjustment to avoid impingement and dislocation.\(^7\) This feature combined with the neck design and with the availability of large heads such as DePuy ASR™ XL Heads maximises range of motion and joint stability.

PROVEN MECHANICAL FIXATION
The S-ROM® stem demonstrates a clinically proven stability and strong modular junction\(^8\)\(^9\) resulting in a long term efficient function.
The enhancements to the calcar miller enable the S-ROM® implant, an implant with 20 years of clinical use, to meet the evolving needs of current MI surgeons.

The S-ROM® MI calcar miller was designed to work more in-line with the femoral axis to make the calcar milling step more conducive to a minimally invasive surgical approach reducing soft tissue damage.

The reliable and precise surgical technique combined with the MI approach, and the unique design features of the S-ROM® implant provide initial fixation, rapid weight bearing and accelerated recovery.
20 years of clinical experience have given the S-ROM® modular cementless femoral prosthesis a high degree of success when addressing the unique challenges of the DDH patient. Cameron and Gorski have both reported successful results when using S-ROM® stem to manage DDH cases.

- An independent proximally loading sleeve that allows the ability to restore normal version.
- The availability of 6, 7, 8, and 9 mm cementless straight stems to accommodate the narrow and straight canal.
- An independent proximally loading sleeve that can be rotated within the metaphyseal region to load in the most viable host bone available (the calcar is often atrophic or missing in DDH patients).
- Distal flutes provide additional rotational stability should the surgeon be required to perform a sub-trochanteric osteotomy to reduce an elevated hip centre towards the true acetabulum.

“As stem retention rate over 95% at a mean follow-up of 7.8 years.”
31 consecutive cases at mean follow-up of 7.8 years
Cameron H J. Arthroplasty 2003.

As a modular revision implant, the S-ROM® stem is indicated for Type 1 to Type 3A according to the Paprosky’s classification. The S-ROM® stem allows the surgeon to optimise existing anatomy and manage difficult revision cases.

- To address fixation and biomechanics issues without compromise.
- To provide greater intraoperative adaptability in unpredictable cases.
- To offer a high number of combinations to handle a wide variety of femoral defects.

“Re-revision rate for aseptic loosening of 0.93% at mean time of 7 years.”
320 stems at mean 7 years follow-up
Cameron H J. Arthroplasty 2003.

“94% of the hips showed stable or improved proximal bone stock.”
63 complex revisions at mean 6 years follow-up
Bono JV et al. JBJS 1999.

“The Harris hip scores rose in the 129 hips 87.5 and only 1 stem required revision.”
129 stems at mean 6.2 years follow-up
Distal flutes enhance rotational stability and coronal slot reduces distal stem stiffness and helps reduce end-stem thigh pain.

Multiple stem lengths offer a range of stability options, especially for revision and DDH management.

Independent neck and sleeve enables 360° of version.

High Performance Bearings

Sleeves are available with ZTT and ZT™ HA coatings.

Availability of +4, +6, +8, +12 necks provides additional lateral offset without increasing leg length.

Independent neck and sleeve enables 360° of version.