INnate™ Case Results

A New Standard For Metacarpal Fracture Fixation

INnate is an intramedullary threaded nail designed specifically for metacarpal fractures to provide surgeons with a reliable solution through a simple, minimally invasive approach. Our rapidly-growing technology is being used by many of the world’s top surgeons and institutions. Please see below some case results, demonstrating how INnate is raising the standard of care for metacarpal fractures.

Case 1: 28 year-old male patient with clench fist injury and 5th MC fx.

- Pre-op
- Post-op

Case 2: 34 year-old female patient with 5th MC distal shaft fx, approximately 45° angulation.

- Pre-op
- Post-op

Case 3: 16 year-old male patient with narrow ring finger MC shaft fx.

- Pre-op
- Post-op

Percutaneous fixation. Immediate range of motion in recovery room.
Percutaneous fixation. Normal range of motion in recovery room. Immediate unrestricted use allowed.
Small, open incision aids reduction with 4.5mm INnate fixation.
Case 4: 14 year-old female patient with spiral oblique MC fx.

INnate placed across ring finger, later removed. Normal range of motion result.

Case 5: Multiple MC base fx.

INnate placed across ring finger, later removed. Normal range of motion result.

Case 6: 35 year-old male patient. Hand crushed by 1.5 ton air conditioning unit. Open injury with crushed devascularized hand, dead thenar muscles, severe open wounds.

Temporary fixation, wounds debrided, post-op Day 3 INnate placement for proper fixation. Radial thumb wound debrided serially. First web space contracture managed with PIN flap, then thumb INnate ultimately removed and bone graft placed at first metacarpal. Returned to auto body work full time after 6 months.

Case 7: 47 year-old male presented with a self-inflicted, accidental gunshot wound to the left hand. Multiple open fractures and significant associated soft tissue injuries.

Wound debrided temporary fixation with k-wires and dorsal free flap placed. INnate placed at day 12 with hip graft placed at day 14. Bone union occurred. Final range of motion was normal. Patient returned to regular duties after 5 months.