ArcPhix™

An Innovative, Functional Solution for Distal Interphalangeal (DIP) Joint Fusions

Functional Fusion

- Angled screw allows for fusion of the DIP joint in a functional position

Stable Fixation

- Differential thread pitch facilitates compression across the DIP joint to create stability during bone fusion

Less Traumatic

- Percutaneous insertion method minimizes surrounding tissue damage upon implantation and avoids screw prominence

INDICATIONS FOR USE

The ArcPhix functional flexion compression screw is indicated for use in the surgical fixation of small bones, bone fragments, and osteotomies. The device is not indicated for soft tissue fixation.

The sterile, single use system includes a stainless steel implant with all necessary instrumentation to perform the case.

DESIGN RATIONALE

Late stage arthritis in phalangeal joints presents a variety of challenges for physicians. Although current treatment methods provide suitable outcomes, there is a likelihood of inadvertently producing a straight DIP joint fusion. These outcomes are not optimal.

Research has shown that when a patient's DIP joint is fused in a functional position, finger dexterity and grip strength improve over that of a patient with a straight, full extension fusion.[1] Physicians can achieve angled fusions by using K-wire fixation, however, the immobilization protocol can lead to several complications and varied results. While compression screws may provide reliable DIP fusions, they do not offer the additional benefit of functional flexion.

To address this unmet need, ExsoMed has developed ArcPhix: an innovative angled compression screw for controlled functional flexion DIP joint fusions.

TECHNIQUE COMPARISON

Operative Goal: Angled fusion of the distal interphalangeal joint, allowing functional flexion to support early mobilization with ease of use and minimal soft tissue damage.

ArcPhix

Straight Headless Compression Screws

Plates/Screws

Traditional techniques such as utilizing straight screws down the intramedullary canals result in zero-degree fusions, limiting grip strength and overall hand function. In addition, outcomes are aesthetically poor and are typically associated with uncontrolled bone compression. Other options such as plates and pins are bulky, ineffective, expensive, and are associated with complications such as adhesions.

EXSOMED™
Innovations in Hand Surgery

EXSOMED™

WHY USE ARCPHIX?

Specifically sized to optimally fit the anatomy of the distal and middle phalanges

18° angle for functional fusion of the DIP joint

Self-tapping tip for ease of insertion

T8 hexalobe design for optimal torque transfer during insertion

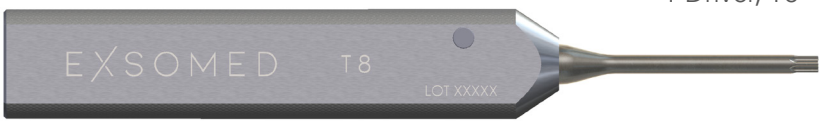
ORDERING INFORMATION

The ArcPhix System Disposable Kit

EXARC903028 3.0mm x 28mm Implant

Accessories Included in Kit

1 ArcPhix Implant
1 Guidewire, Single Trocar, 0.035" x 6"
1 Guidewire, Double Trocar, 0.035" x 6"
1 Cannulated Drill, 2.0mm
1 Driver, T8



T8 Driver

Cannulated Drill, 2.0mm

K-Wire, 6", Single Trocar, 0.035"

K-Wire, 6" Double Trocar, 0.035"

Reference
1. Eitan Melamed, MD, Daniel B. Polatsch, MD, Steven Beldner, MD, Charles P. Melone, Jr, MD Scientific Article. Simulated Distal Interphalangeal Joint Fusion of the Index and Middle Fingers in 0 degree and 20 degrees of Flexion: A Comparison of Grip Strength and Dexterity. J Hand Surg Am. 2014;39(10): 1986-1991.

MKG-ASP-0001 Rev B

135 Columbia, Suite 201 | Aliso Viejo, CA 92656 | USA | +1 (855) ExsoMed