Meril

Orthopedics
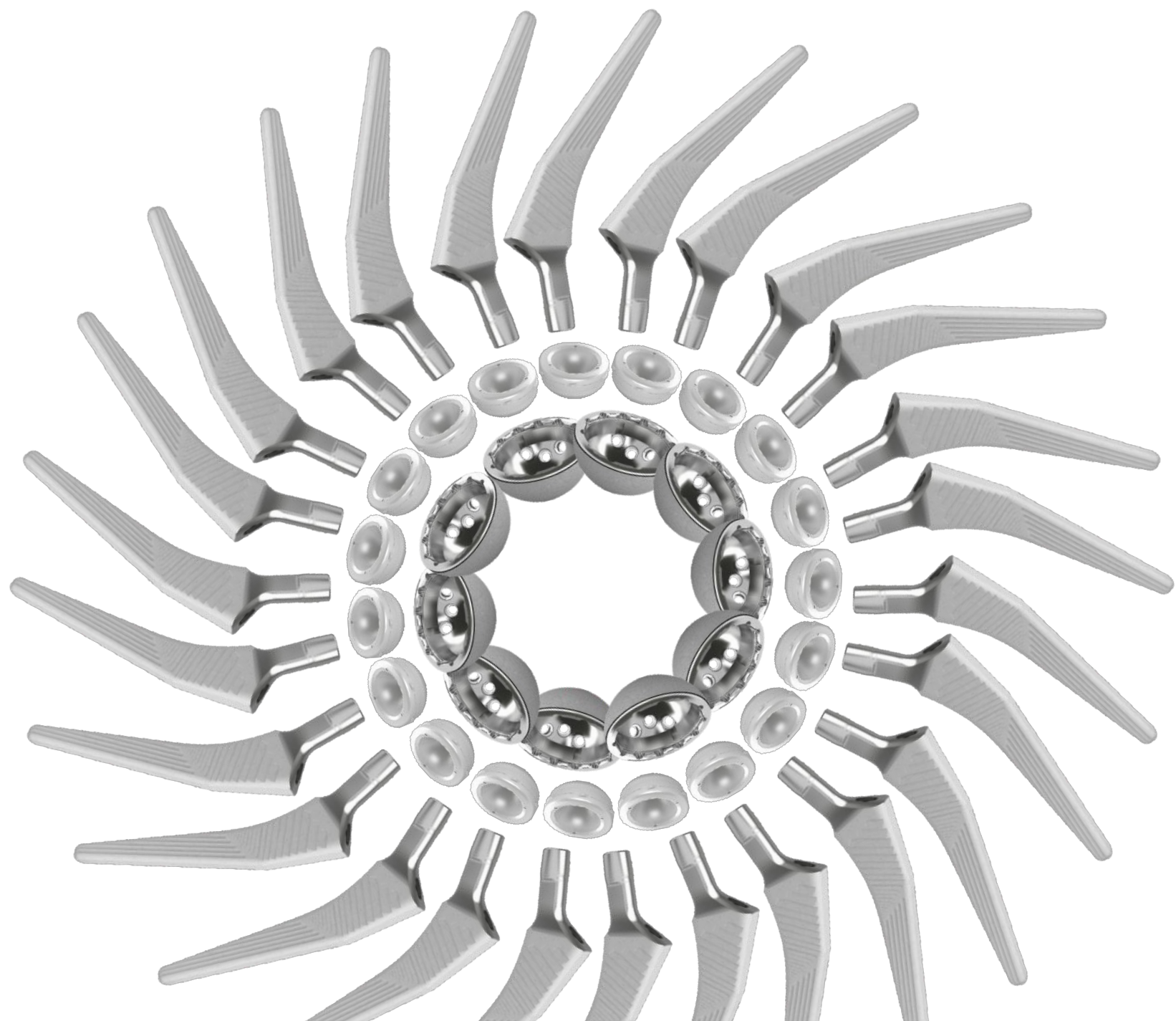
LATITUD™ | HIP SYSTEM
Freedom of Choice

Acetabular Cup System & Uncemented Stems

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Meril is a global medical device company dedicated towards design and development of novel, clinically relevant, state-of-the-art and best-in-class devices to alleviate human suffering and improve the quality of life, spanning broad operational canvas from vascular interventional devices to orthopedics, in-vitro diagnostics and endo-surgery.

We share an enduring commitment to advance healthcare solutions, so more patients live longer, healthier lives. We thus have a strong commitment towards R&D and adherence to best quality standards in manufacturing, scientific communication and distribution known today.

Meril Orthopedics | HIP SYSTEM

Meril Orthopedic, a new venture of Meril in association with Maxx Ortho Inc (www.maxxmed.com), is at the helm of developing and marketing innovative Orthopedic implants. Our joint replacement technologies and wide range of products make us a valuable partner to healthcare institutions in more than 40 countries. At Meril, we have a guiding principle that the Physician-Patient-Product interaction is of utmost importance.


Established in 2006, Meril was launched in line with the health-care diversification plan of Bilakhia Group. Located 150kms north of Mumbai at Vapi, ensconced within the serene hill-sides of Chala town, Meril sits proud in its ultra modern manufacturing facilities.

Acetabular Cup System

Acetabular cup system is a modular acetabular replacement system consisting of a range of Titanium coated modular shells designed for use with highly cross-linked polyethylene liners articulating with a range of dedicated cobalt chromium alloy modular heads.

Enhance the Press Fit

The design geometry of the shell allows press fit to occur just below the acetabular bone margin to assist retention and stability.
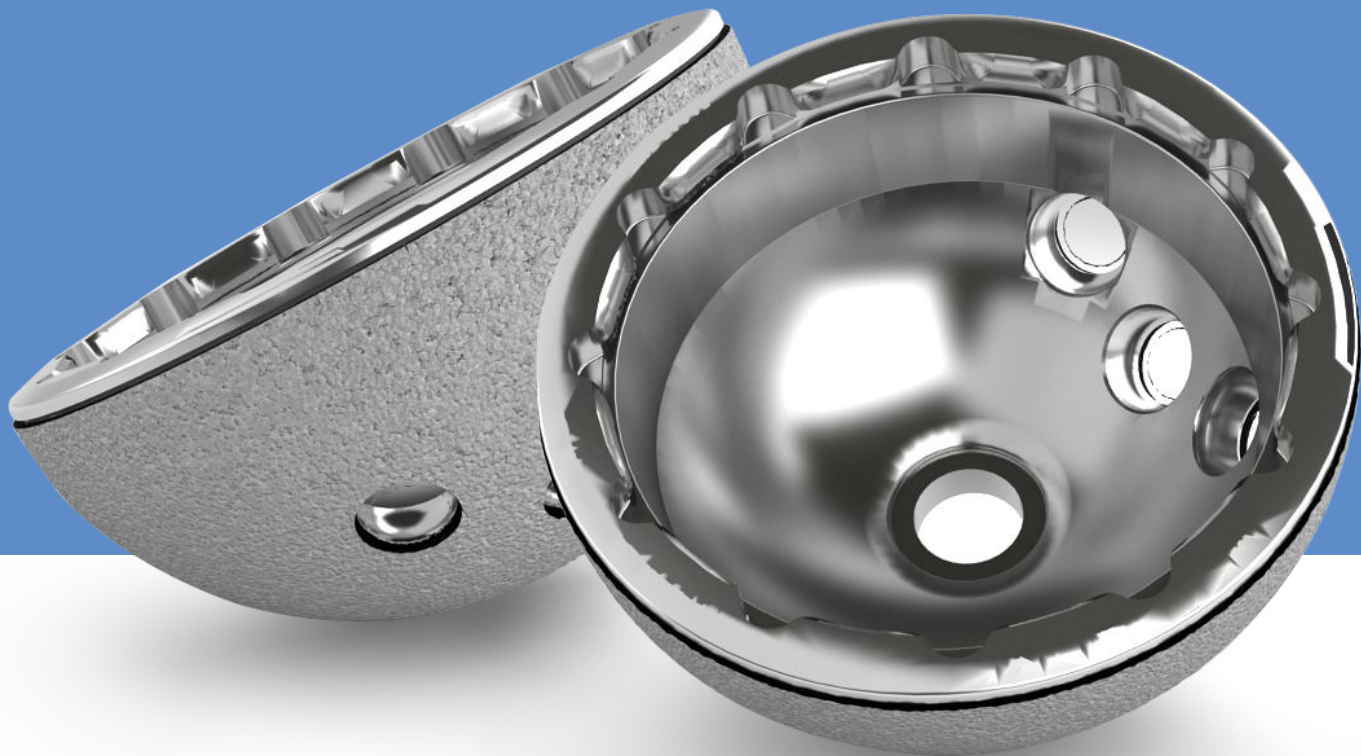
Hip Compatibility Table

| SHELL SIZES	LINER SIZE	HEAD				
40	35	22	28			
42	37	22	28			
44	37	22	28			
46	40		28	32		
48	40		28	32		
50	44		28	32	36	
52	44		28	32	36	
54	44		28	32	36	
56	48		28	32	36	40
58	48		28	32	36	40
60	52			32	36	40
62	52			32	36	40
64	52			32	36	40
66	52			32	36	40
68	52			32	36	40
70	52			32	36	40

Uncemented Stems

The design philosophy for Cement less femoral stem of latitud™ total hip replacement system is adopted from well proven and successful corail stem design. Cement less femoral stem is provided in two different angles to meet with patient's anatomy and developed into two versions: standard and increased offsets. The surface of cement less femoral stem is coated with hydroxyapatite with plasma spraying method for osteo-integration purpose and to be used without cement. The Dual Taper Trapezoidal Design with vertical and horizontal grooves to promote stability and resist rotational and axial displacement.

The low modulus of elasticity of titanium reduces the mismatch with the cortical bone and reduces thigh pain

Features

- The Uncemented femoral stem is made from Ti-6Al-4V ELI alloy as per ASTM F136 Standard Specification   for Wrought Titanium-6Aluminum-4Vanadium ELI (Extra Low Interstitial) Alloy for Surgical Implant Applications.
- Stem is coated with Osprovit® Hydroxyapatite by plasma spraying method in compliance with ISO-13779-2/ BS ISO 13779-4 below the resection line.
- Porosity of coating is maximum 10% and surface roughness value for HA coated surface of uncemented femoral stem is above 30 μm with adhesion strength above 15 MPa.
- The Uncemented femoral stem is straight and tapered with a lateral chamfer to aid insertion.
- It has both vertical and horizontal grooves to resist axial and torsional loading.
- Uncemented femoral Stem neck is having a 12/14 taper trunnion for connection with femoral head.
- It is available in 11 different sizes with Provision of 135o standard, 135° lateral, 125° Standard (coxavera) neck angle and polished distal section
- Low profile polished neck increases the head-neck ratio, reducing impingement and increasing the range of motion for the patient
- Low profile shoulder is bone conversing in the greater trochanteric region and allows for ease of us in smaller incision surgery
- Metaphyseal flare ensures maximum fixation and load transfer into the proximal femur
- Horizontal grovees in the proximal stem, supported by dense cancellous bone, provide axial stability preventing subsidence
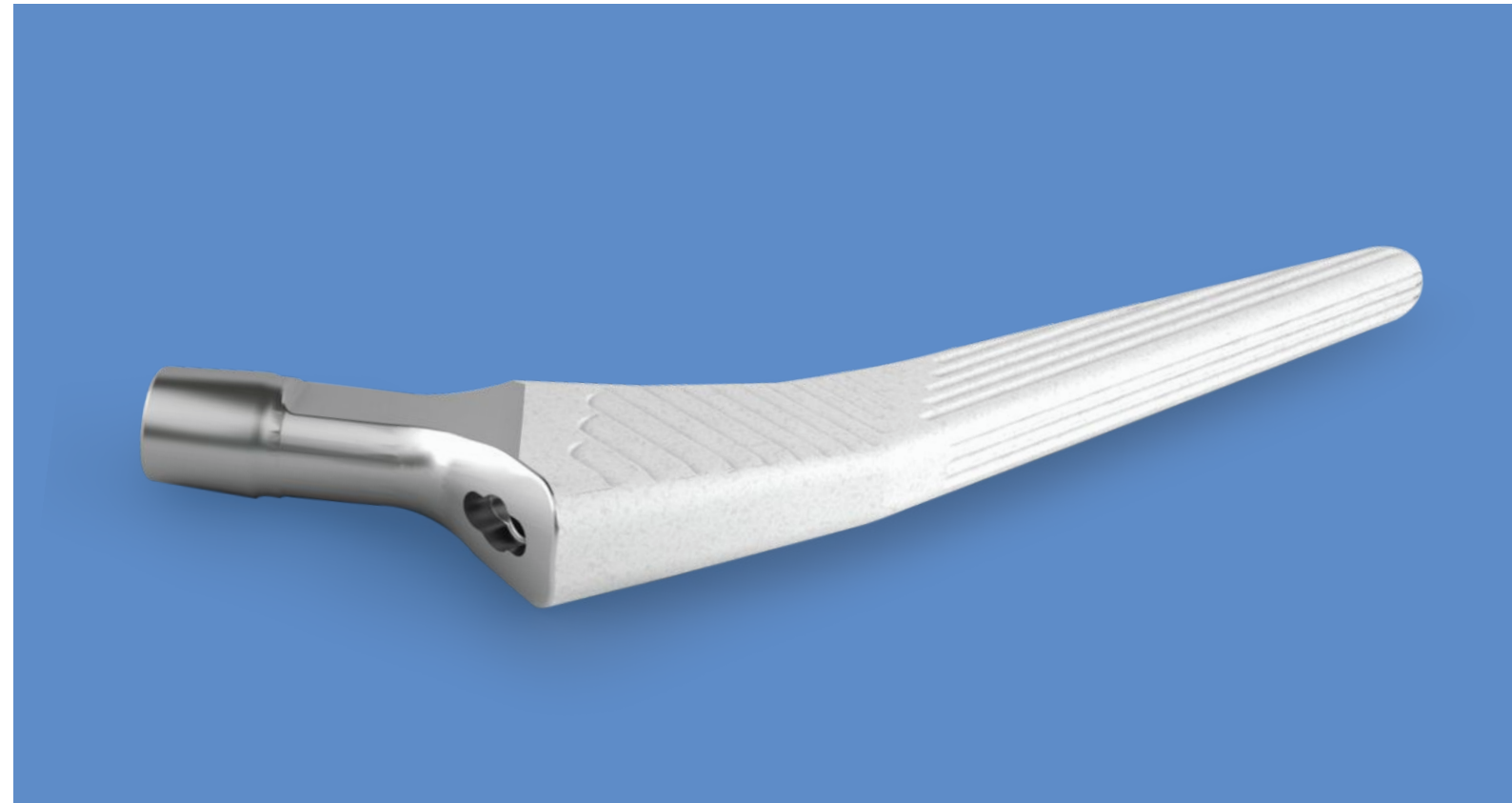
Sizes

- Comes in 135° neck angle, (0 size to 10 size)
- High offset 135° neck angle – Used for lateralization and extreme morphologies, (0 size to 10 size)
- Coxa vara 125° neck angle – Used for Coxa vara indications and lateralisation defects, (0 size to 10 size)

Surgical Steps

1 The proximal femur is opened using the box chisel which is positioned laterally and posteriorly so that entry is in line with the femoral intramedullary canal.

2 The smallest(4-8mm tapered) intramedullary reamer, which has sharp tip, is mounted on the T-Handle, and used to open up the femoral canal. Care should be taken with this first reamer and if the bone quality is poor then the 8mm intramedullary reamer should be used first in its place, as it has a more rounded tip.

3 Next the 9mm intramedullary reamer is used.
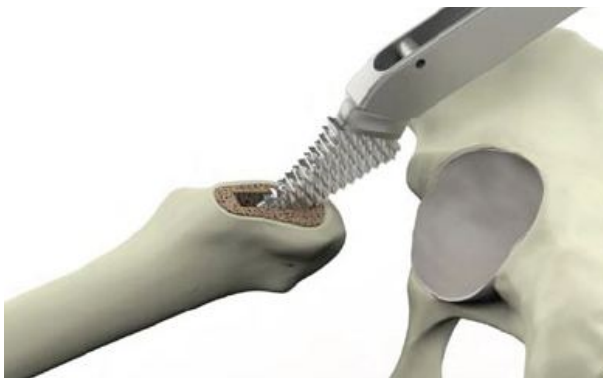
4 The smallest rasp(Size 9) is used first to prepare the proximal femur. The small tommy bar is used to control version.

5 If the fit os this first rasp is unstable then the next size of intramedullary reamer is used follwed by the corresponding size rasp. This ream/rasp technique is continued until the fit of the rasp is stable.

6 With the correct rasp in placeremove the rasp handle and if required trim the neck using the calcar cutter fitted onto th T-handle.
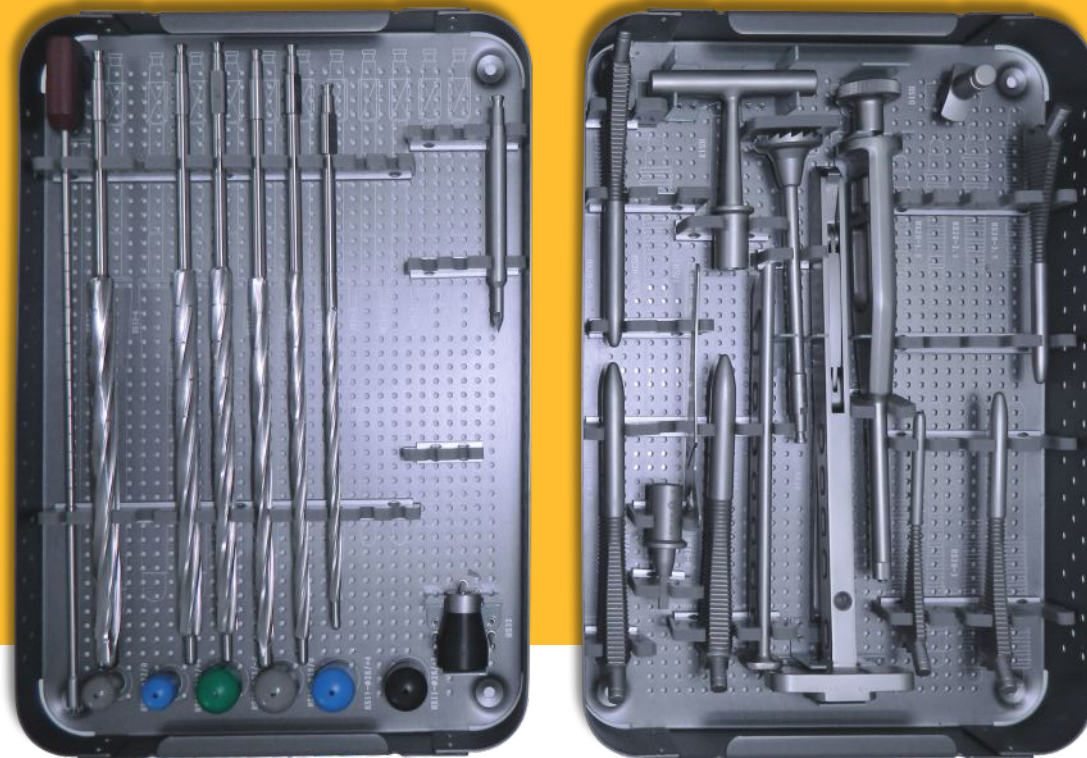
7 With the rasp still place, the fin cutter is gently tapped home into the groove int he rasp with the teeth facing the greater trochanter.

Instrument Set

1. Accetabulum Cup System
2. Uncememted Stem