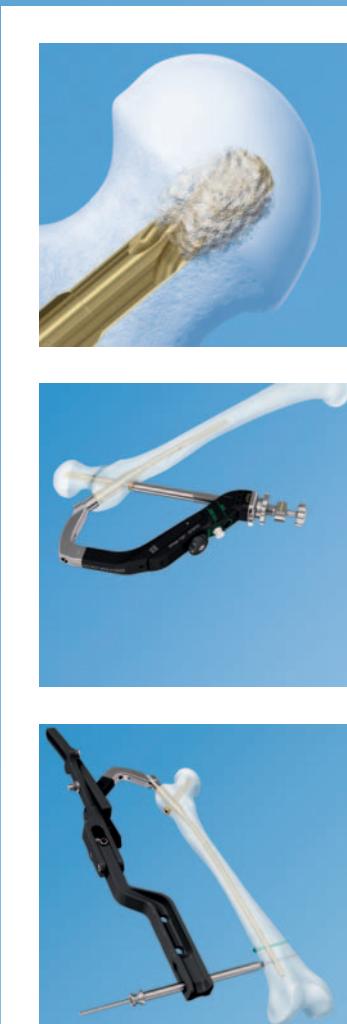


PFNA. With Augmentation Option.

Superior anchor
in osteoporotic
bone

Simple and repro-
ducible procedure
through standard-
ized technique

Intraoperative
decision for
augmentation

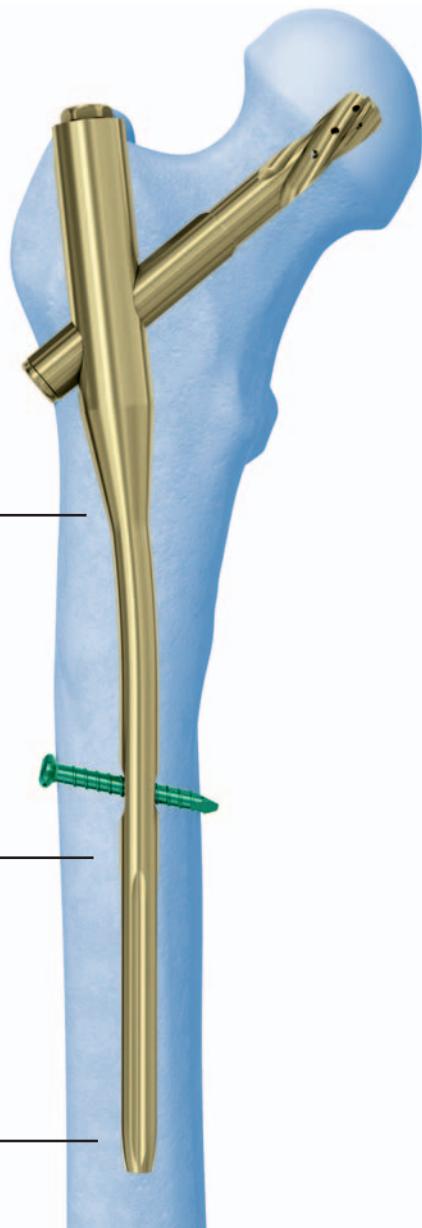


SYNTHES® Instruments and implants
approved by the AO Foundation

PFNA. Proximal Femoral Nail Antirotation.

PFNA Nail **Optimal fit**

The anatomical design guarantees an optimal fit in the femur. The nail design has been well proven in over 450,000 cases performed with the PFN and PFNA.



The PFNA has a medial-lateral angle of 6°

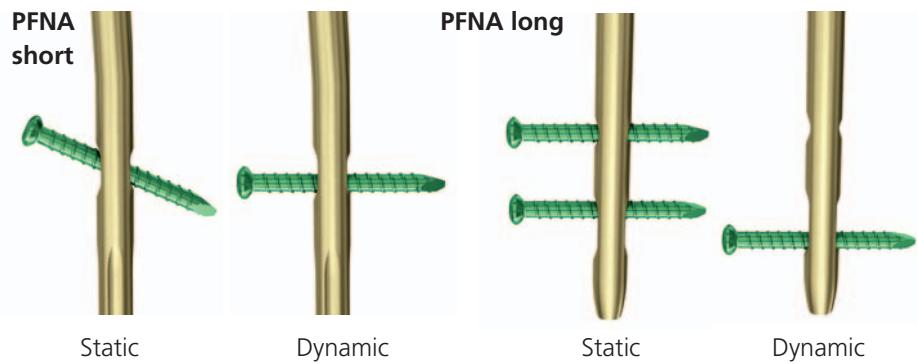
This allows insertion at the tip of the greater trochanter.

Optimal stress distribution

The flexible PFNA tip eases insertion and reduces stress on the bone at the tip of the PFNA.

Several distal locking options

Static or dynamic locking can be performed via the aiming arm with PFNA standard, small and xs. The PFNA long additionally allows for secondary dynamization.



PFNA Nail Product range

The PFNA is available in 4 sizes

PFNA xs, length 170 mm



PFNA small, length 200 mm



PFNA, length 240 mm



PFNA long, length 300–420 mm,
with 20 mm increments, bending
radius 1.5 m



PFNA. Proximal Femoral Nail

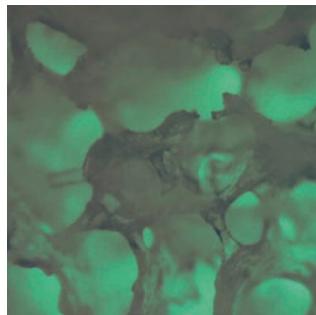
Antirotation.

PFNA Blade

Rotational and angular stability achieved with one single element

Compaction of cancellous bone

Inserting the PFNA blade compacts the cancellous bone providing additional anchoring, which is especially important in osteoporotic bone.



Bone structure before insertion of the PFNA blade.



Bone structure after PFNA blade insertion – cancellous bone is compacted providing additional anchoring to the PFNA blade.

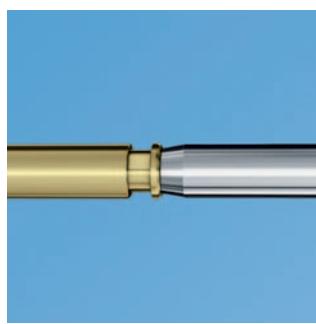
Large surface and increasing core diameter guarantee maximum compaction and optimal hold in bone

Increased stability caused by bone compaction around the PFNA blade has been biomechanically proven to retard rotation and varus collapse. Biomechanical tests have demonstrated that the PFNA blade had a significantly higher cut-out resistance in comparison with commonly-used screw systems.

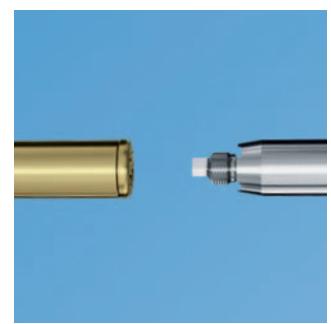


Lateral locking – fast and reliable insertion of the PFNA blade

- All surgical steps required to insert the PFNA blade are performed through lateral incision
- The PFNA blade is automatically locked to prevent rotation of the blade and femoral head



PFNA blade unlocked



PFNA blade locked

PFNA. Instrumentation.

Easier guide wire positioning and insertion

Correct positioning of the guide wire and finally the PFNA blade in the femoral head is crucial. The guide wire aiming device allows for AP orientation, which permits correction of the nail's insertion depth prior to guide wire insertion.

In the lateral view, rotation of the nail can be adjusted with the two orientation lines in the radiolucent insertion handle for PFNA.



Intraoperative compression

In good bone quality the new PFNA blades (OX.027.010S – OX.027.021S and OX.027.030S – OX.027.041S) together with the compression instrument allow for intraoperative compression. The compression instrument can be attached to the blade and intraoperative compression is obtained over the buttress nut and the protection sleeve.



SureLock for proximal femoral nails

SureLock is a C-arm guided distal targeting device for all Synthes long proximal femoral nails (PFN, PFNA/PFNA-II and TFN). This system is used as an alternative to the freehand technique to facilitate distal locking of long nails. Distal locking with SureLock provides simple and precise targeting, reduced exposure to radiation¹ and increased working space.



¹S. Boraiah, Arch Orthop Trauma Surg (2009), 129(9):1177–82

PFNA. Augmentation.

Fractures of the hip are the most common operatively treated fractures of the elderly (over the age of 70). The number of osteoporotic fractures is growing dramatically causing treatment to become an increasingly challenging issue.

The PFNA Augmentation offers a unique system of controlled cement augmentation directly through the implant:

- Higher number of cycles to cut-out and increased rotational stability in biomechanical testing
- Simple and reproducible procedure through standardized surgical technique
- Compatible with PFNA instrumentation and implants
- Intraoperative decision for augmentation possible

Ready-to-use viscosity

Traumacem V+ Cement requires no waiting time before injectable cement viscosity is reached. The application time of the ready-to-use-after-mixing cement is approximately 27 minutes at room temperature and offers physicians the freedom to use cement without any time constraints.



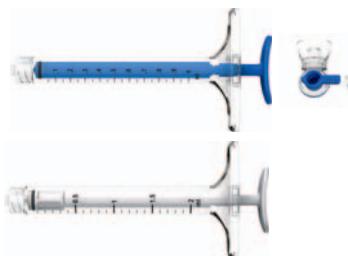
Trauma Needle Kit

Side-opening cannula and plunger for controlled cement injection through the standard PFNA instrumentation.



Cement placement

Controlled placement of cement around the implant, through the perforated blade with the side-opening cannula.



Traumacem V+ Syringe Kit

Traumacem V+ Syringes have wide integrated wings and strong syringe pistons to guarantee excellent force transfer, combined with good tactile feedback.

Traumacem V+ Syringe Kit includes a one-way stop-cock for simple, clean and quick filling of the 2 and 1 ml syringes.



Traumacem V+ Cement Kit

For the best possible visual control during cement application, the Traumacem V+ cement contains 40% zirconium dioxide. A further addition of 15% hydroxyapatite means that the Traumacem V+ cement contains 55% ceramic components and only 45% PMMA.

PFNA. With Augmentation Option.

Product information

For ordering information for all implants and instruments associated with the PFNA system (and augmentation option), please refer to the "PFNA. With Augmentation Option" Technique Guide 036.001.143, or the Synthes eCatalog at catalog.synthes.com.

