

Why FGOIC [™] interbody fusion device?

To achieve successful fusion fast and stable bony bridging, accurately fitting implant while restoring sagittal alignment, preventing long term subsidence are the key points.

In order to find the best solution for the patient surgeons have to make an complex and delicate choice not only between implant shapes and sizes, but betweenmaterials, stiffness of the implant and risk of subsidence, hydrophilic and hydrophobic nature of materials and surfaces adressing the risk of non-union when implants are embedded in connective tissue lacking bone formation, the choice between limited imaging and artefact-free observation of the fusion process while sitting in front of a specificic unique patient situation.

Decision making is a often a painful trade off between risk and benefit, but easier if you can have more benefits and minimizing the risks. Orthobion has done a big effort in research and development over the last years to combine the best characteristics of PEEK and Titanium in order to create an unique, outperforming and proven solution for spinal interbody fusion treatment.

Achievements

- o Increased micro and nano surface area on entire implant for faster direct bone ongrowth and new formed bone volume compared to PEEK1
- o Significant faster and higher fusion rate compared to
- o Significant Lower risk of flaking and debris during impaction ⁶

Why PEEK body?

- o Excellent long-term biocompatibility 7
- o Radiolucent⁸
- o Modulus of elasticity similar to cortical bone 9,10,11
- o Lower risk of subsidence 4,5,12

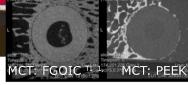
Why Titanium nano topology?

- o Nano topology is radiolucent and has no stiffening 8,10,11,13
- o Reseachers have noted PEEK cage non-unions when embedded in connective tissue lacking bone formation 14,15
- o Strong biological affinity 15,16,
- o Ideal hydrophilic environment for bone formation 16,18
- o Direct bone to implant anchorage 1,2,18













- 1 Meers et al (2015), Fine grained osseointegrative coating improves biocompatibility of PEEK in heterotopic sheep model, International Journal of Spine Surgery,
- 2 Meers et al (2018), Randomized controlled trial comparing the efficacy and safety 3 types of PEEK cages for posterior lumbar interbody fusion, to be published
- 3 Chou et al (2008), Efficacy of anterior cervical fusion: comparison of titanium cages, polyetheretherketone (PEEK) cages and autogenous bone grafts. J. Clin Neurosci,
- cages, Spinal Disord Tech, 2010;23(5):310-316
- 5 Čabraja et al (2012), Anterior cervical discectomy and fusion: Comparison of titanium and polyetheretherketone cages, http://www.biomedcentral.com/1471-2474/13/172
- 6 Kienle et al (2018), Resistance of coated polyetheretherketone lumbar interbody fusion cages against abrasion under simulated impaction into the disc space, to be publ. 7 Rao et al. (2014). Spine interbody implants: material selection and modification, functionalization and bioactivation of surfaces to improve osseointegration, Orthop Surg 2014;6:81-9
- 8 Internal tesing on file: Imaging of FGOIC^{TI} 9 Invibio, PO-ENG-SUR-01 09/07.01



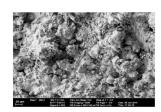




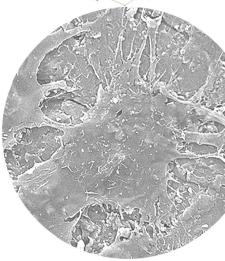


What is FGOIC[™] nano topology?

- o Sub-micron Titanium topology applied to micro roughened PEEK body
- o Nano Ti topology covers entire implant maintaining mechanical properties of PEEK - no stiffening
- o Nono topology is radiolucent no imaging artefacts
- o Increased micro and nano surface area on entire implant for faster direct bone ongrowth compared to PEEK
- o No flaking, no sharp debris, plastic deformation of implant fails to dislodge FGOIC layer







Design rationale

Fine-Grained-Osseointegrativ-Coating Titanium (FGOIC[™]) is a pure titanium nano surface through a high energy, low temperature coating process. The combination of the best of two worlds results in surface benefits of the excellent osteointegrative characteristics of titanium and the uncompromised mechanical and imaging properties of PEEK body. Orthobion's TSC interbody fusion devices are made of Invibio PEEK coated with a Titanium nano-topology covering the entire implant enabeling fast and stable longterm osteointegration for direct bone to implant anchorage. Small Titanium markers are placed to minimize x-ray and MRI imaging artefacts.













Internal testing: plastic deformation of implant fails to dislodge FGOIC TI - no flaking and no sharp debris

- 10 Internal testing on file: Stiffening effect of FGOIC Terrors Plasma spray coated PEEK
 11 Vogel at al (2017), Characterization of thick titanium plasma spray coatings on PEEK materials used for medical implants and the influence on the mechanical properties.
 Journal of the Mechanical Behavior of Biomedical Materials 2017: online first
 12 Chen et al, (2013), Comparison of titanium and polyetheretherketone (PEEK) cages in the surgical treatment of multilevel cervical spondyloticmyelopathy: a prospective, randomized control stuywith over 7-year follow-up, Eur Spine J DOI 10.1007/s00586-013-2772

- 13 Heary et al, Elastic modulus in the selection of interbody implants, Journal of Spine Surgery 2017; 3(2): 162-167
 14 Trouillier et al (2003), Report on two failed posterior lumbar interbody fusions (2003) International Orthopaedics SICOT Online Report E034
 15 Sugino et al, (2008), Surface Topography Designed to Provide Osteoconductivity to Titanium after Thermal Oxidation, MATERIALS TRANSACTIONS 49 (2008) 3
- 16 Zhao et al, (2005), High surface energy enhances cell response to titanium substrate microstructure. J Biomed Mater Res A. 2005 Jul 1;74(1):49-58 17 Internal testing on file: Wettability of FGOIC Tompared to PEEK
- 18 Albrektsson et al, (1981), Osseointegrated titanium implants. Requirements for ensuring a long-lasting, direct bone-to-implant anchorage in man,cta Orthop Scand. 1981;

domed

SMAL	L TSC domed ACIF	Length [L] [mm]	Width [B] [mm]	Hight [H] [mm]	Lordosis [W] [°]
03.500	TSC domed ACIF	13	14.5	4	domed
03.501	TSC domed ACIF	13	14.5	5	domed
03.502	TSC domed ACIF	13	14.5	6	domed
03.503	TSC domed ACIF	13	14.5	7	domed
03.504	TSC domed ACIF	13	14.5	8	domed
03.505	TSC domed ACIF	13	14.5	9	domed
03.506	TSC domed ACIF	13	14.5	10	domed

MEDIU	IM TSC domed ACIF	Length [L] [mm]	Width [B] [mm]	Hight [H] [mm]	Lordosis [W] [°]
03.507	TSC domed ACIF	15	17	4	domed
03.508	TSC domed ACIF	15	17	5	domed
03.509	TSC domed ACIF	15	17	6	domed
03.510	TSC domed ACIF	15	17	7.	domed
03.511	TSC domed ACIF	15	17	8	domed
03.512	TSC domed ACIF	15	17	9	domed
03.513	TSC domed ACIF	15	17	10	domed

LARG	E TSC domed ACIF	Length [L] [mm]	Width [B] [mm]	Hight [H] [mm]	Lordosis [W] [°]
03.519	TSC domed ACIF	15	19	5	domed
03.514	TSC domed ACIF	15	19	6	domed
03.515	TSC domed ACIF	15	19	7	domed
03.516	TSC domed ACIF	15	19	8	domed
03.517	TSC domed ACIF	15	19	9	domed
03.518	TSC domed ACIF	15	19	10	domed

Orthobion PERFORMANCE IN ORTHOPEDICS

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