# obeliscPRO<sup>TM</sup> Lateral Endplates





## obeliscPRO<sup>TM</sup>LE - Topics

- Lateral Endplate idea
- Indications
- System
- Features & Benefits



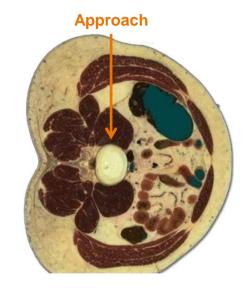


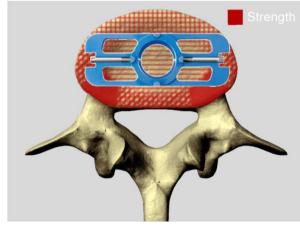
## obeliscPROTMLE - Idea

One system – many variations.

 Optimal placement implant via lateral (MIS) approach

 Less subsidence by using the corticalis as support surface

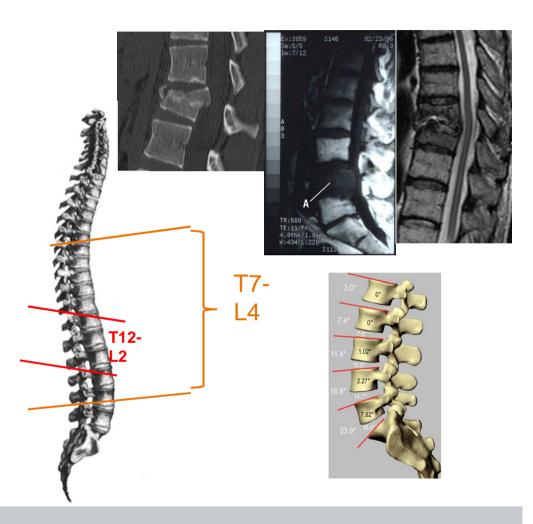






## obeliscPROTMLE - Indications

- Corpectomies:
  - Fractures
  - Tumor
  - Infections
- T7 L4
- Majority T12 L2







## obeliscPROTMLE - Literature

- "A rectangular footplate design is more resistant to subsidence than a circular footplate design in an ex vivo biomechanical model. The new design had higher load to failure even in the presence of a central defect. These findings suggest that rectangular footplates may provide better subsidence resistance when used to reconstruct defects after thoracolumbar corpectomy."
  - Pekmezci M, McDonald E, Kennedy A, Dedini R, Ames C, McClellan RT, Deviren V. Can a novel rectangular footplate provide higher resistance to subsidence when compared to circular footplates? An ex vivo biomechanical study. Spine 2012;27(19):E1177-E1181
- "The mini-open anterolateral approach to the thoracolumbar spine is an appealing alternative to the traditional open approaches. This technique, however, is technically demanding and requires proficiency in the use of minimally invasive spinal surgery instruments and retractors."
  - Baaj AA, Dakwar E, Le TV, Smith DA, Ramos E, Smith WD, Uribe JS. Complications of the mini-open anterolateral approach to the thoracolumbar spine. J Clin Neurosci. 2012 Sep;19(9):1265-7.
- "The mini-open lateral approach for thoracic and lumbar corpectomy was shown to be safe and effective in this series while avoiding many of the associated morbidities of thoracotomies for anterior column reconstruction and open posterior approaches."
  - Smith WD, Dakwar E, Le TV, Christian G, Serrano S, Uribe JS. Minimally invasive surgery for traumatic spinal pathologies: A mini-open, lateral approach in the thoracic and lumbar spine. Spine (Phila Pa 1976). 2010 Dec 15;35(26 Suppl):S338-46.

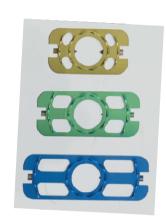


## obeliscPROTMLE - System

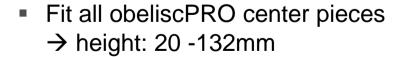
One system – many variations.

#### **Endplate options**

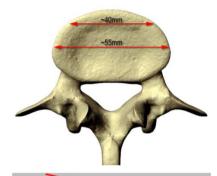
3 endplate footprints – color-coded 35x20mm (yellow) 45x20mm (green) 55x20mm (blue)

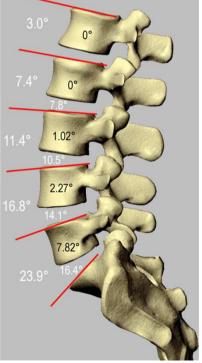


- 4 angulations per footprint 0°, 5°, 10°, 15°
- 1 set screw each side











## obeliscPROTMLE - System

One system – many variations.

#### **Extension Set**

- Stand alone tray
- Simple design and easy to use
- Color coding for fast identification
- Color coded lollipop trial instruments
- Complements existing obeliscPRO sets
   → Simply add to your obeliscPRO sets!!!





## obeliscPRO<sup>TM</sup>LE - Synergies

One system – many variations.

golden gate & obeliscPRO LE = Ideal solution for lateral approach corpectomies!









## obeliscPRO<sup>TM</sup>LE – Features & Benefits

Advantage obeliscPRO LE	Benefit
Selection of Lateral end plate options	<ul> <li>Improved support of lateral and minimally- invasive approaches</li> <li>Ideal anatomical fit</li> </ul>
Exact height adjustment	<ul><li>Distraction and compression in-situ</li><li>Unlimited height adjustment options</li></ul>
Large rectangular end plates	Lower risk of subsidence
End plate assembly and color coding	Easy to use and to assemble
Golden Standard vertebral body replacement system, which allows all approaches = 360°	<ul><li>Reliable</li><li>Versatile</li><li>Simple</li><li>Fast</li></ul>



## obeliscPRO<sup>TM</sup>LE

One system – many variations.



# Thank you for your attention!



