

Prosthetics and Orthotics

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Prosthetics and Orthotics: National and international landscape

- Over 1 million hip and knee replacements per annum worldwide
- Most very successful (<5% revision at 10 years)
- Success informs popularity/confidence in procedure
- “Operation of the Century” Lancet, 2007 on hip replacement
- Fitted in younger patients, who are living longer (ageing population) and are more obese
- Therefore current joint replacements are challenged
- Revision operations are expensive/less successful than primary
- Other joint replacements lack success/numbers of hips/knees
- Two main challenges – wear and infection
- Established global market in both Prosthetics and Orthotics, with established international research societies

Prosthetics and Orthotics: Current strengths, Newcastle groups

- Orthopaedics: Northern Retrieval Registry, based at Freeman Hospital
- Collaboration between hospitals in NE and MSE, Newcastle University
- Understand why replacement joints fail
- Mainly hips and knees
- Also spinal implants (**MAG**netic **E**xpansion **C**ontrol) rods for children
- MSE - work on bioceramic implants for bone and osteochondral defects
- Orthotics – 3D printing, based at MSE, with Peacocks Medical Group
- SLS Foot and Ankle lab based at Freeman
- Dr Kia Nazapour “restore function to individuals with sensorimotor deficit”, artificial limbs
- Infection, biofilms, Dr Vicky Chen, MSE
- Strong links – engineering, medical school, regional hospitals

Prosthetics and Orthotics: Future Research Opportunities

- For joint replacements: reduce wear and infection, therefore reduce overall health costs
- Analysis of failed implants – hence Northern Retrieval Registry
- For all implants – cost reduction
- Innovations more likely in finger, toe, ankle, wrist, elbow etc implants
- Devices which address unmet clinical need
- Seamless integration between medical imaging sources from MRI/CTs/Ultrasound and CAD design software via smart segmentation algorithms
- Design tools for adding tailored porosity to specific implant areas
- EPSRC Healthcare Technologies

NEWCASTLE SURGICAL TRAINING CENTRE



Healthcare at its very best - with a personal touch

ATOS Triple Scan System

- Optical measuring system
- Custom made Ti shells
- Thin TiO₂ coating applied to shell
- Shell internal surface measured prior to and post implantation
- Accuracy of the order of 5-10 μm



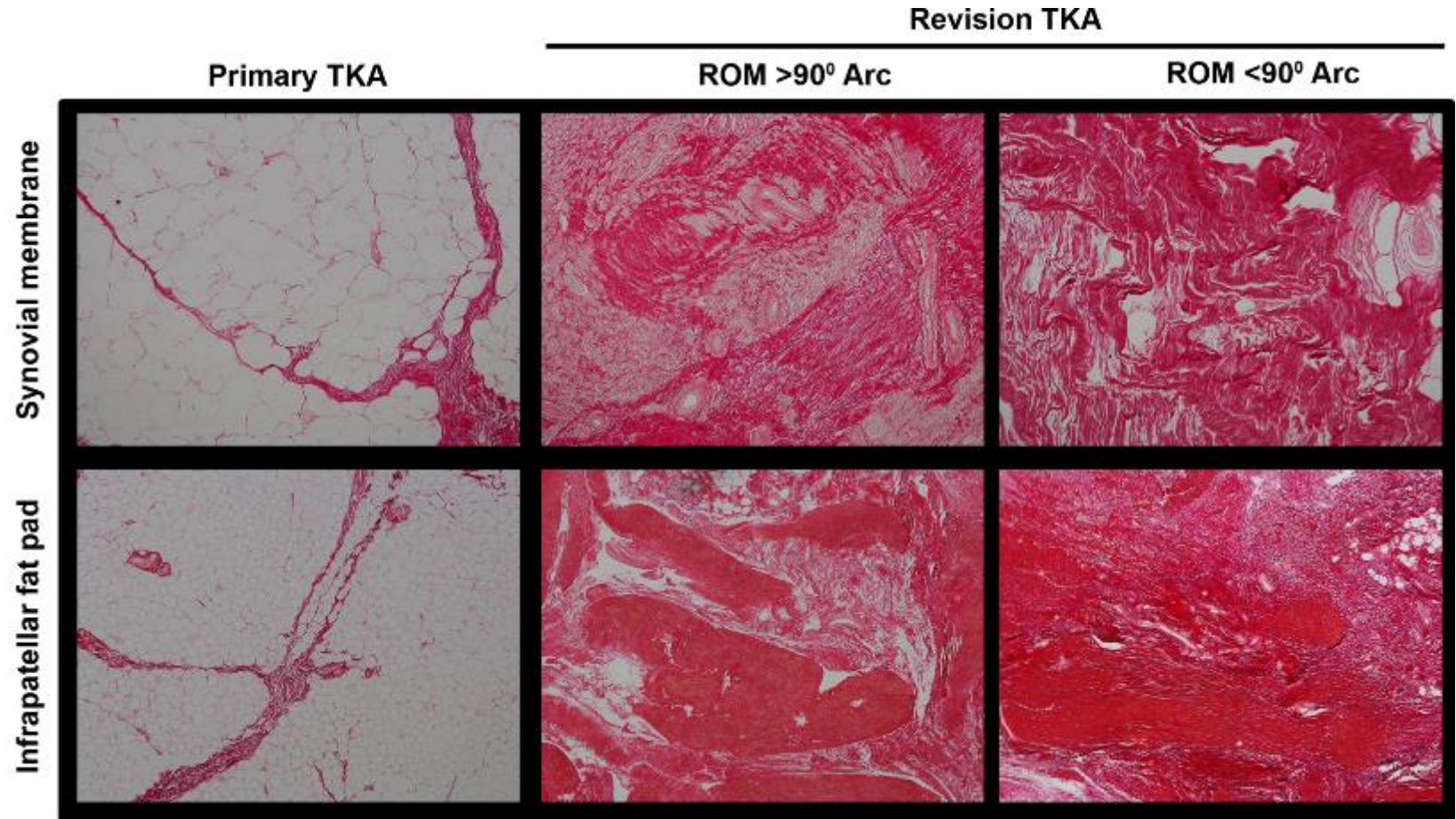


Immunobiology of cobalt

Helen Lawrence, David Deehan, John Kirby, Alison Tyson-Capper
Freeman Hospital & Newcastle University, UK

6th Advanced Hip Resurfacing Course
Ghent, Belgium
30th May 2014

What does scar tissue look like?



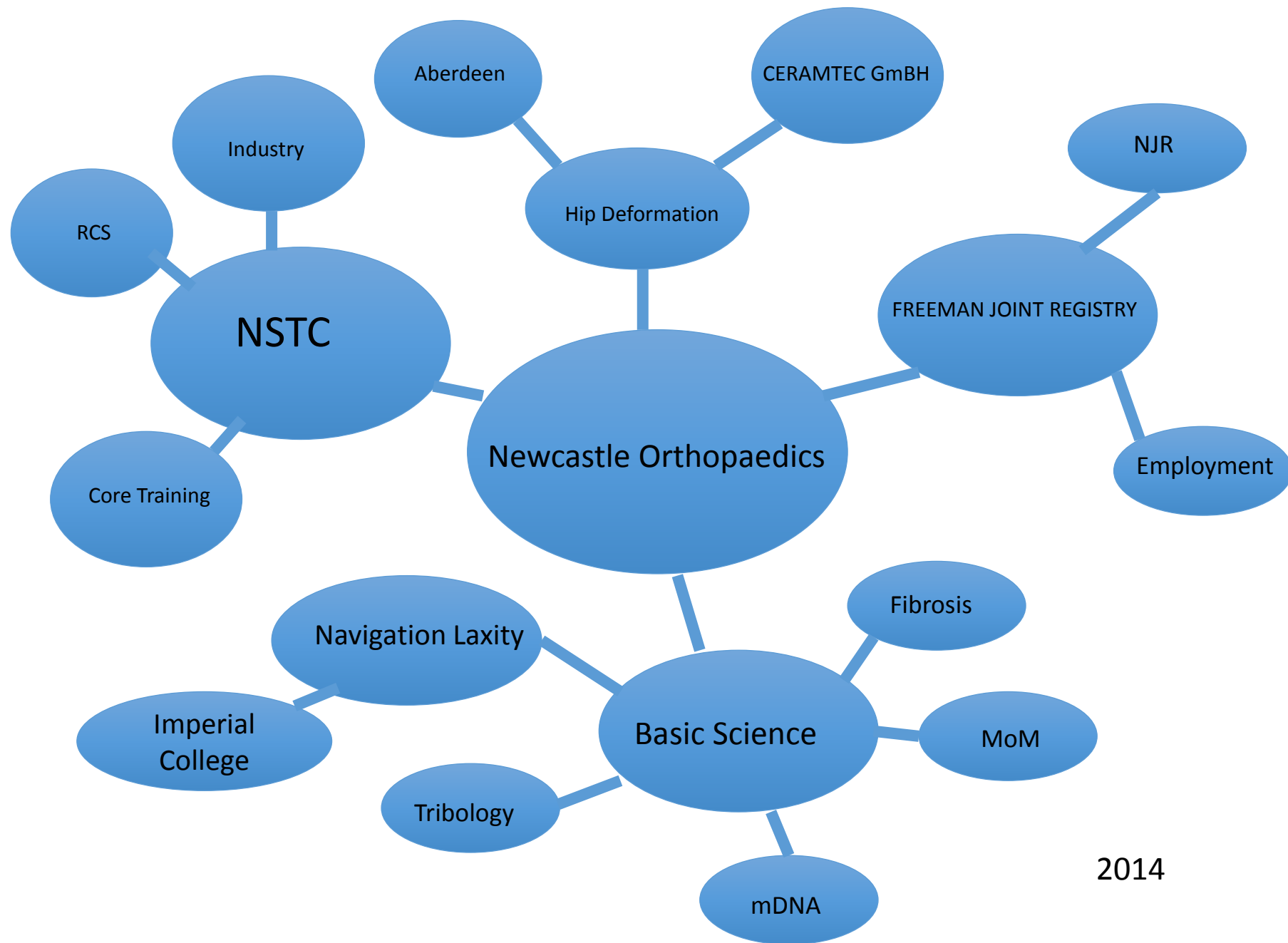
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Data collection and analysis

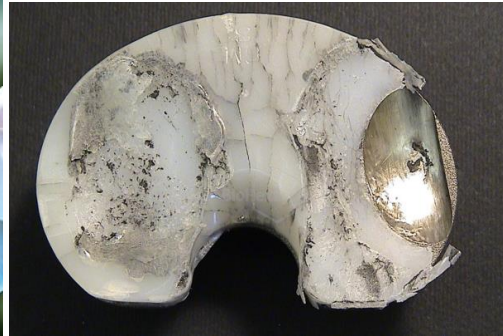


(Stryker eNdrac ASM Knee Navigation System, Michigan USA)

- **Dynamic data collection:** from an optical tracking system used for computer navigated surgery.
- **Laxity was quantified:** as the range of motion of the tibia in relation to the fixed femur – for varus/valgus, anterior drawer, internal/external rotation.
- **Statistics:** Mixed effect modelling was used to quantify the effects of each “intervention” (PS-TKA implantation and popliteus resection) and flexion as well as inter knee variation on laxity.
- **Data representation:** mean \pm SD for 8 knees (n=8).



2014



The immunobiology of cobalt

demonstration of a potential aetiology for inflammatory pseudotumours after metal-on-metal replacement of the hip

H. Lawrence, D. Deehan, J. Holland, J. Kirby, A. Tyson-Capper
DOI: 10.1302/0301-620X.96B9.33476 Published 2 September 2014



Testing & Validation