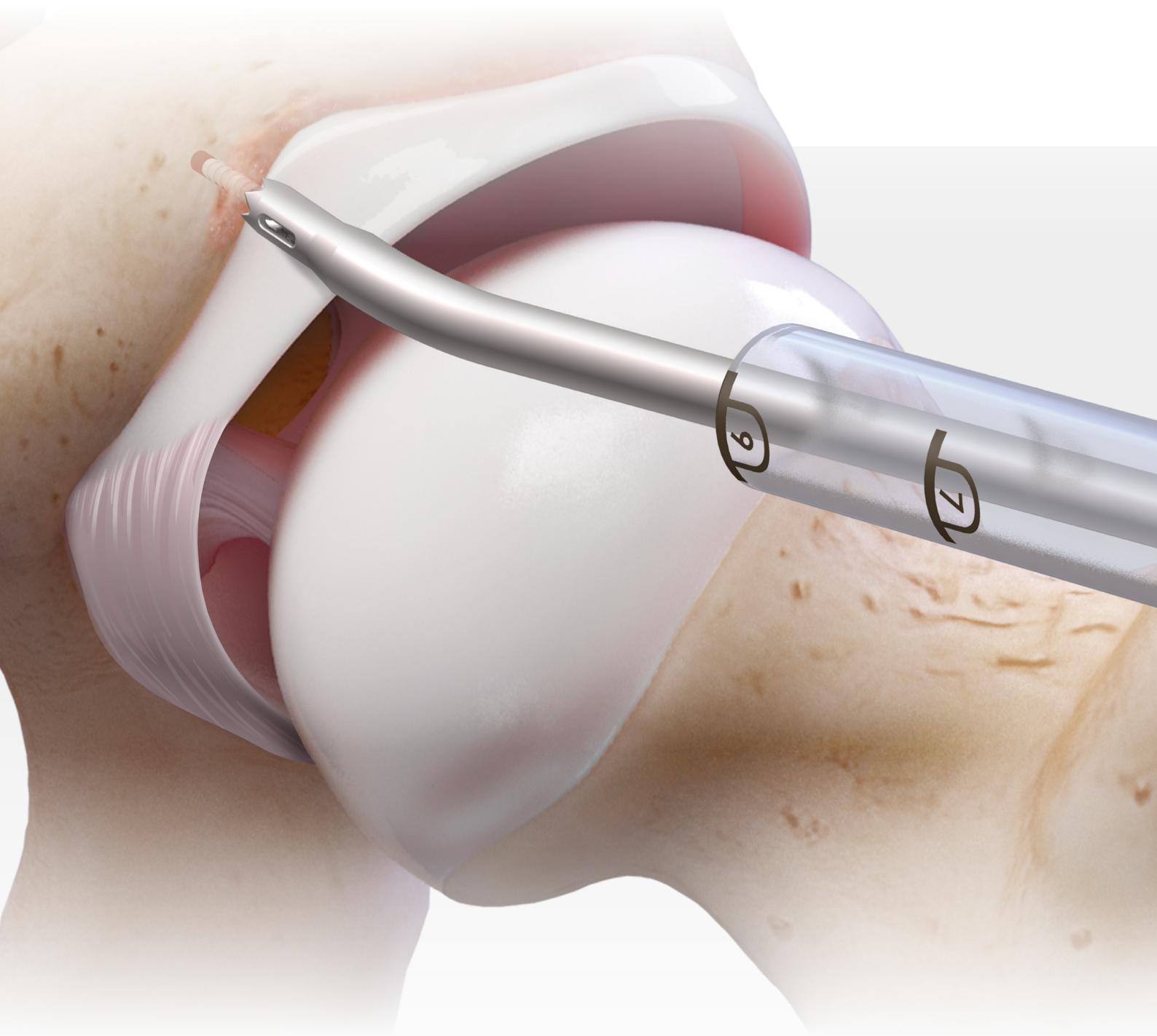


# Hip Labral Repair Using the 2.4 mm Knotless Hip SutureTak® Anchor

Surgical Technique



Arthrex®

## Acetabular Labral Repair Using the Knotless Hip SutureTak® Anchor

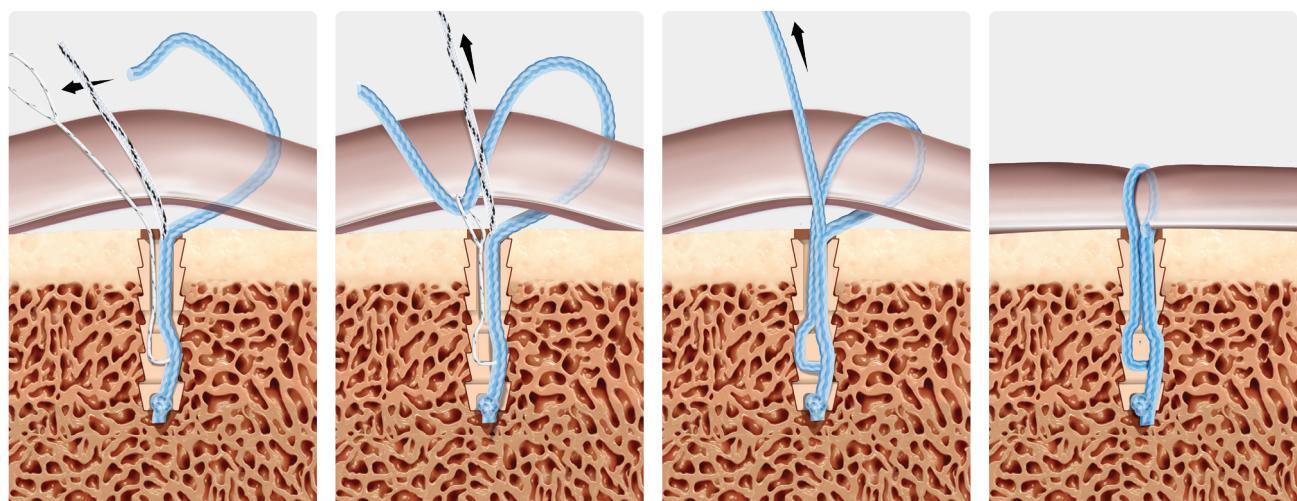
The Knotless SutureTak anchor is a self-locking knotless implant that can be inserted through a drill guide and incrementally tensioned for precise soft-tissue control. Pass the repair suture through soft tissue and load it into a locking mechanism inside the anchor for adjustable tensioning to avoid labral eversion away from the femoral head. A simple or labral base suture configuration can be accomplished when using this anchor.

### Anchor Advantages

- Adjustable tensioning to control labrum positioning
- Cannulated design minimizes anchor material volume
- Simple, reproducible percutaneous insertion techniques
- Easily maintain the drill-guide trajectory while drilling and inserting the anchor
- Available in PEEK
- Anchor can deliver through straight or curved drill guides

## A Closer Look at the Self-Locking Technology of the Knotless SutureTak Anchor

**Pass it. Cinch it. Cut it.**



## Patient Positioning

Because acetabular labral repair is performed in the central compartment of the hip joint, appropriate distraction is required to allow adequate space for the operation. Proper distraction in the supine position can be achieved using the Hip Distraction System (HDS).



## Portal Placement

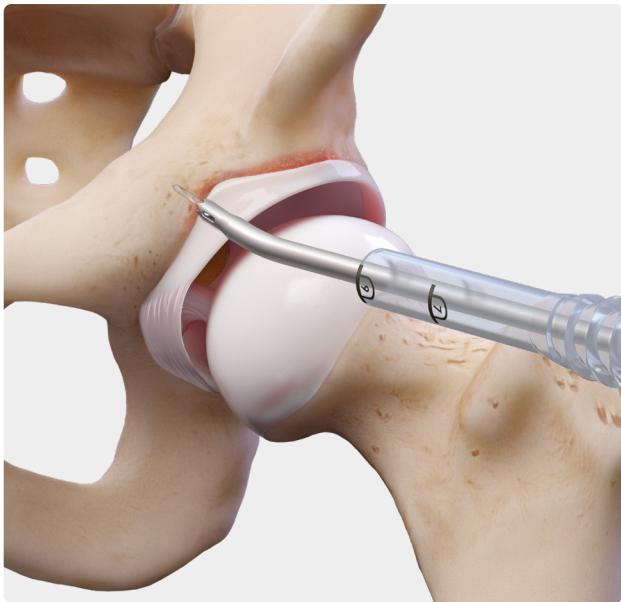
Acetabular labral repair is performed using a variety of arthroscopic portals, including a combination of anterior (A), anterolateral (AL), midanterior (MA), and distal anterolateral accessory (DALA) portals. The flexible TRIM-IT™ custom hip cannulas can be cut to size and used for all working portals to enhance instrument mobility.

- › Atraumatic
- › Flexible
- › Variable lengths
- › Strong proximal threads

Made of a soft polyvinyl chloride plastic, the 8.25 mm TRIM-IT custom hip cannula is designed to provide enhanced flexibility and minimize iatrogenic damage to the articular surfaces. Reinforced proximal threads hold exceptionally well in soft tissue. Additionally, the cannula can be cut to working lengths from 7 cm to 15 cm, making it one of the most versatile cannulas available and helping minimize OR inventory.



## Circumferential Suture Configuration



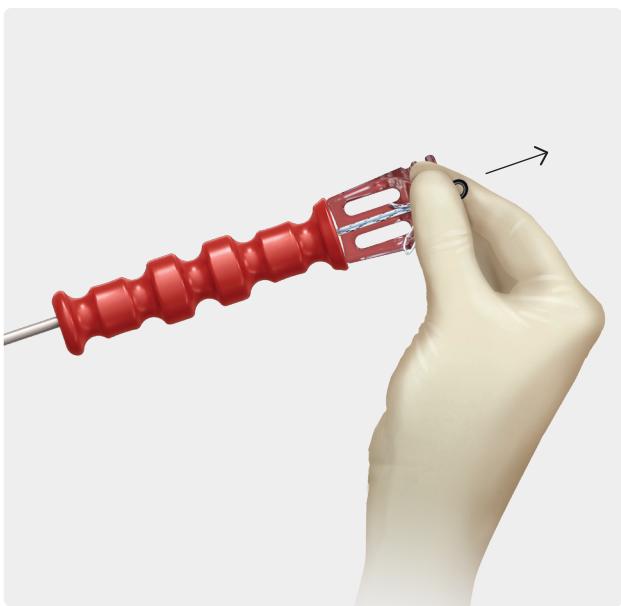
1

Create a bone socket by sliding the appropriate drill guide down the cannula and placing it on the acetabular rim near the articular surface. Advance the drill bit on power through the drill guide until the collar contacts the handle. Cycle the drill bit 2 to 3 times in hard bone to clear bone debris from the prepared socket.



2

Insert the 2.4 mm Knotless Hip SutureTak® anchor through the drill guide and gently push it in by hand until resistance is felt. This should ensure that the tip of the anchor is engaged in the socket. Impact the handle with a mallet until the positive stop.



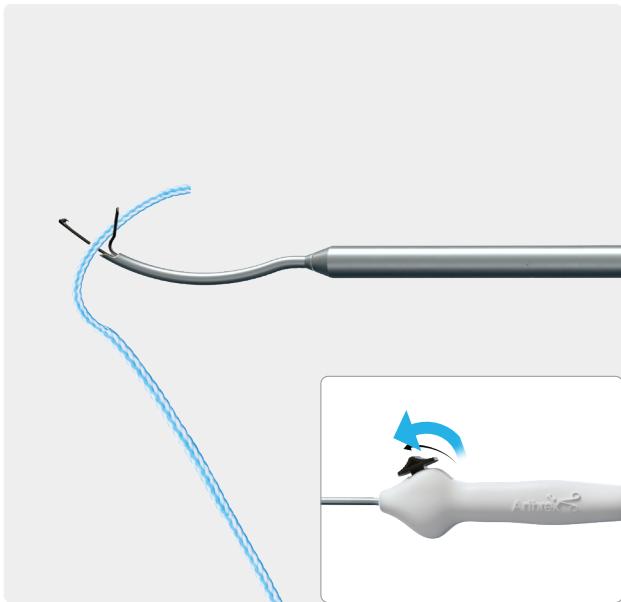
3a

Remove the suture release tab to release the sutures from the handle and remove the inserter and drill guide from the joint.



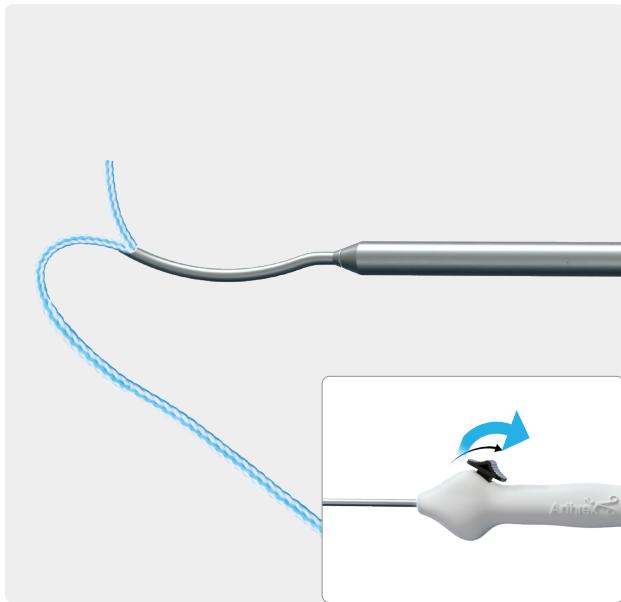
3b

**Note:** Ball and socket configuration of the SutureTak inserter and anchor are designed to reduce edge loading.



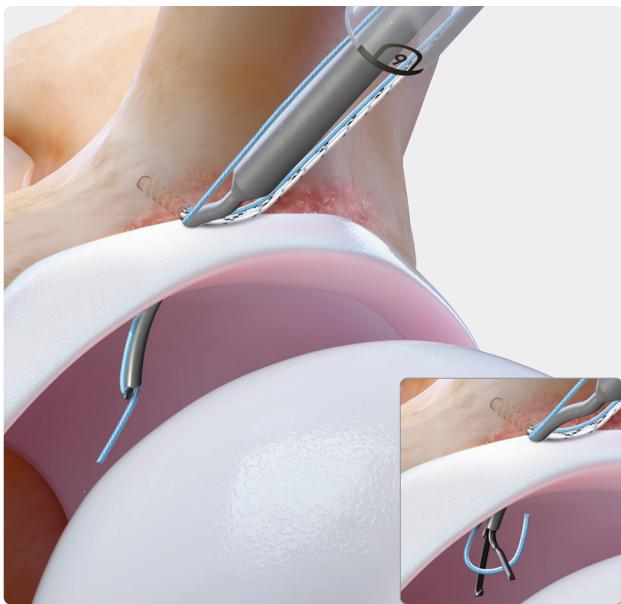
4

Outside the cannula, load approximately 7 mm to 10 mm of the repair suture into the jaws of the SwiftStitch™ suture passer. Press the actuator down and forward to expose the nitinol jaws and then place the suture between them.



5

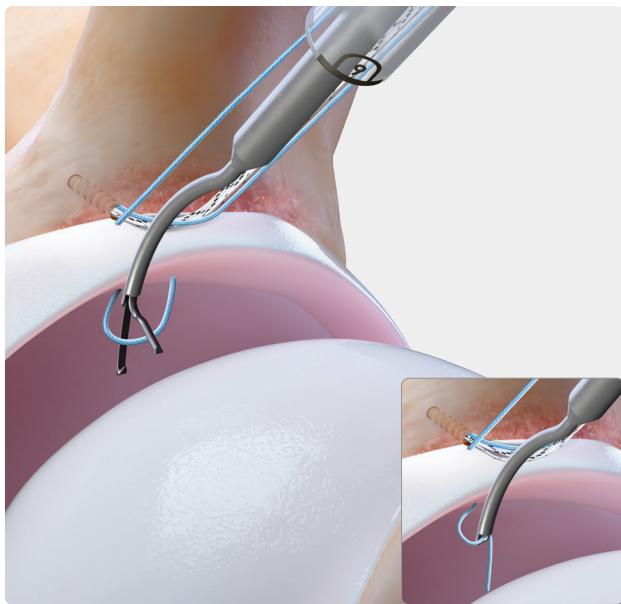
Press the black actuator down and then backward to close the jaws and capture the suture.



6

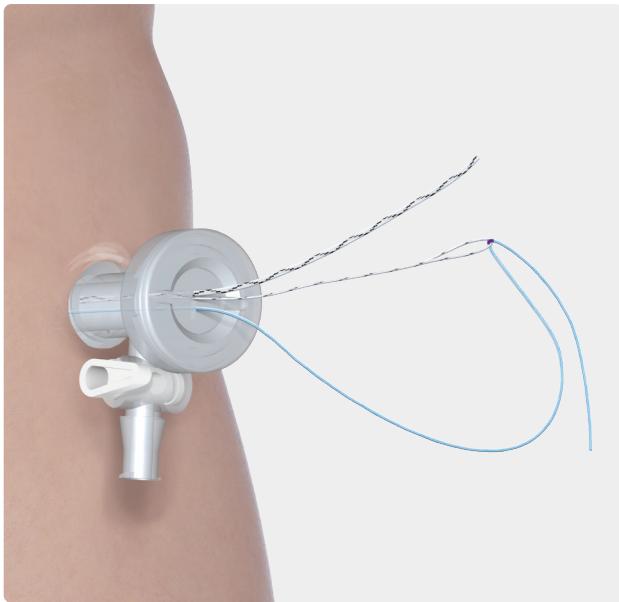
Place the SwiftStitch™ suture passer through the labrum as close to the transitional zone of the chondrolabral junction as possible and release the suture into the joint.

**Note:** To reduce the tension on the suture, push the suture passer past-point before releasing it inside the joint.



7

Capture the suture in the jaws of the SwiftStitch suture passer in the joint space between the labrum and femoral head. Pull the suture passer outside the joint and release the suture from the jaws.



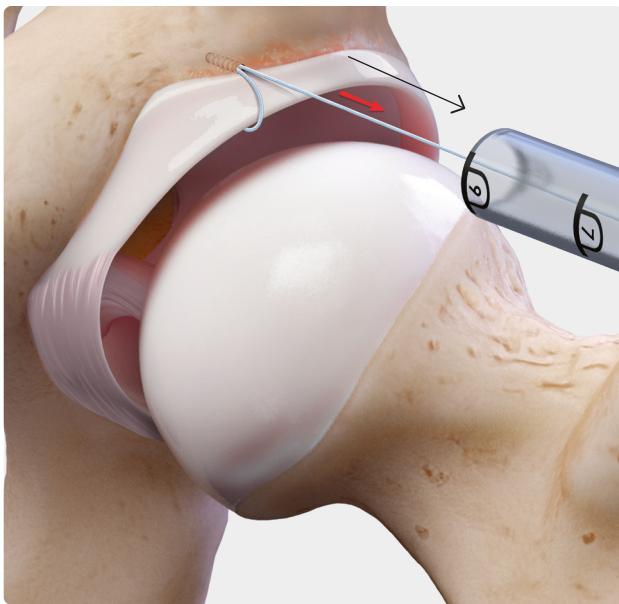
8a

**Note:** For suture management, prior to loading the repair suture into the loop of the TigerLink™ suture, clear the repair suture and looped end of the TigerLink suture with a retriever. This will improve suture management during suture shuttling.



8b

Outside of the cannula, load the repair suture through the looped end of the black/white shuttling suture. Transfer the repair suture by pulling the SutureTape side of the white/black shuttle suture until light resistance is felt. Complete a series of light tugs until the repair suture passes through the knotless anchor mechanism and back out of the cannula.



9

Pull the free end of the repair suture to the appropriate tension. Cut the suture tail once adequate tension is achieved.



10

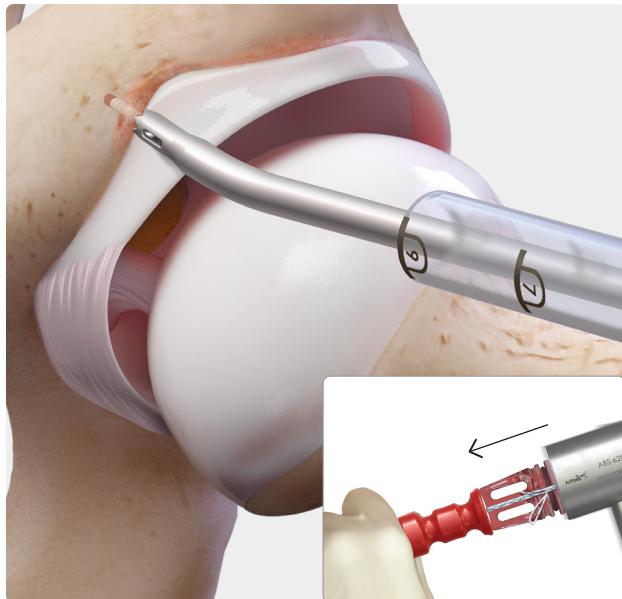
**Final fixation:** Insert subsequent anchors until the repair construct is complete.

## Labral Base Mattress Stitch Configuration



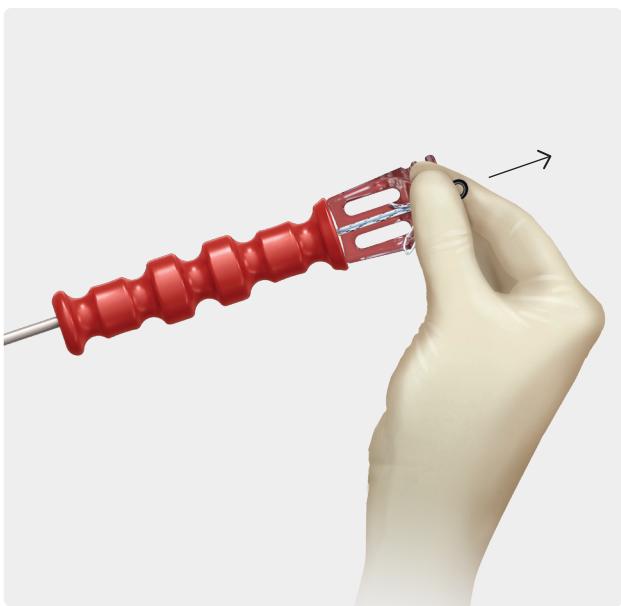
1

Create a bone socket by sliding the appropriate drill guide down the cannula and placing it on the acetabular rim near the articular surface. Advance the drill bit on power through the drill guide until the collar contacts the handle. Cycle the drill bit 2 to 3 times in hard bone to clear bone debris from the prepared socket.



2

Insert the 2.4 mm Knotless Hip SutureTak® anchor through the drill guide and gently push it in by hand until resistance is felt. This should ensure that the tip of the anchor is engaged in the socket. Impact the handle with a mallet until the positive stop.



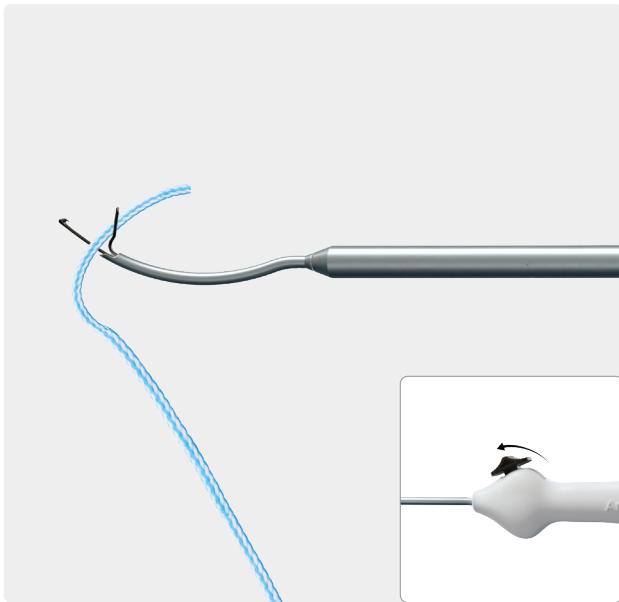
3a

Remove the suture release tab to release the sutures from the handle and remove the inserter and drill guide from the joint.



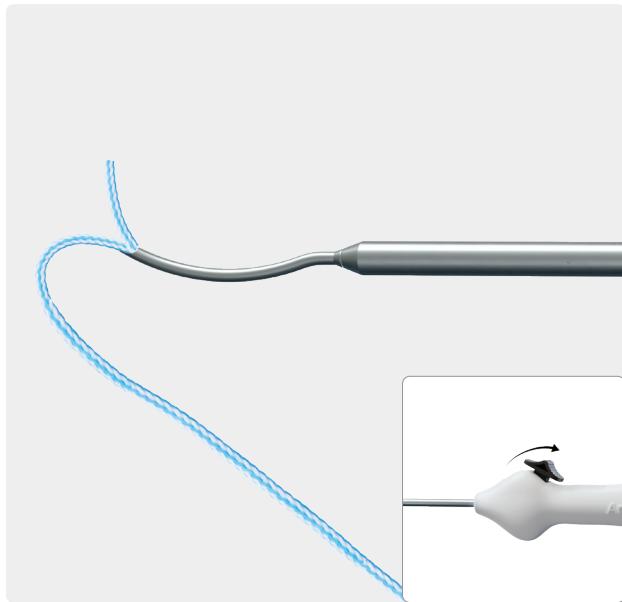
3b

**Note:** Ball and socket configuration of the SutureTak inserter and anchor are designed to reduce edge loading.



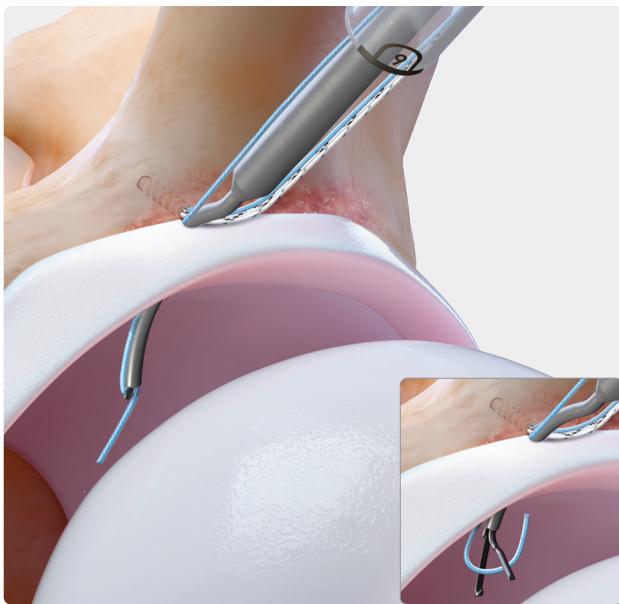
4

Outside the cannula, load approximately 7 mm to 10 mm of the repair suture into the jaws of the SwiftStitch™ suture passer. Press the actuator down and forward to expose the nitinol jaws and then place the suture between them.



5

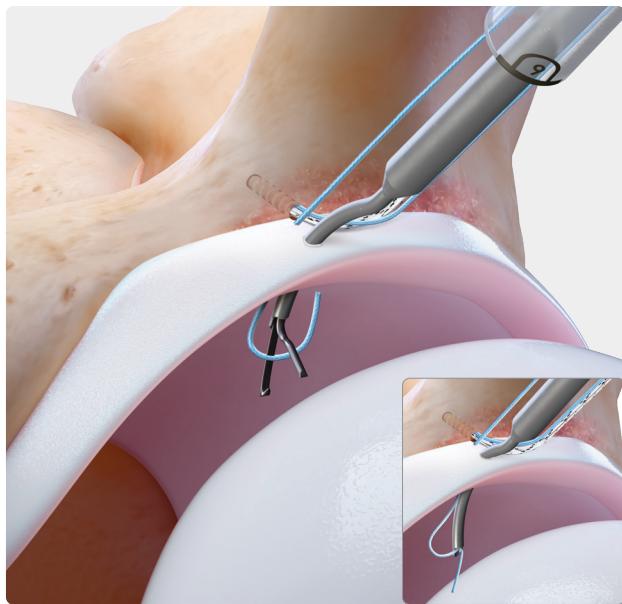
Press the black actuator down and then backward to close the jaws and capture the suture.



6a

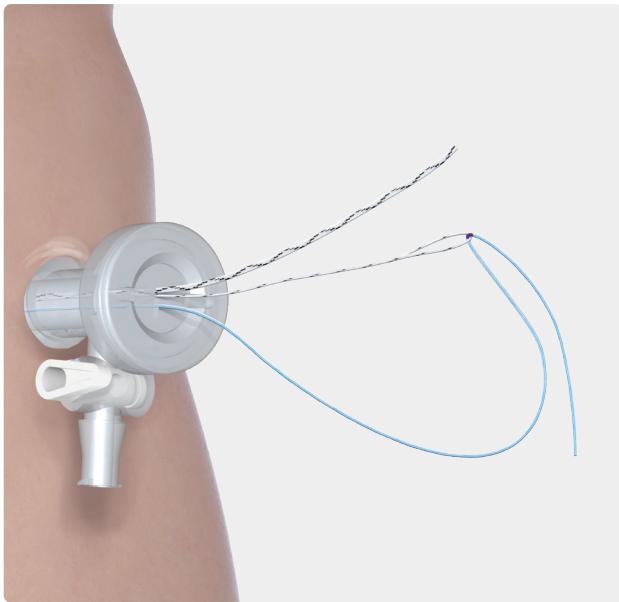
Place the SwiftStitch suture passer through the labrum as close to the transitional zone of the chondrolabral junction as possible and release the suture into the joint.

**Note:** To reduce the tension on the suture, push the suture passer past-point before releasing it inside the joint.



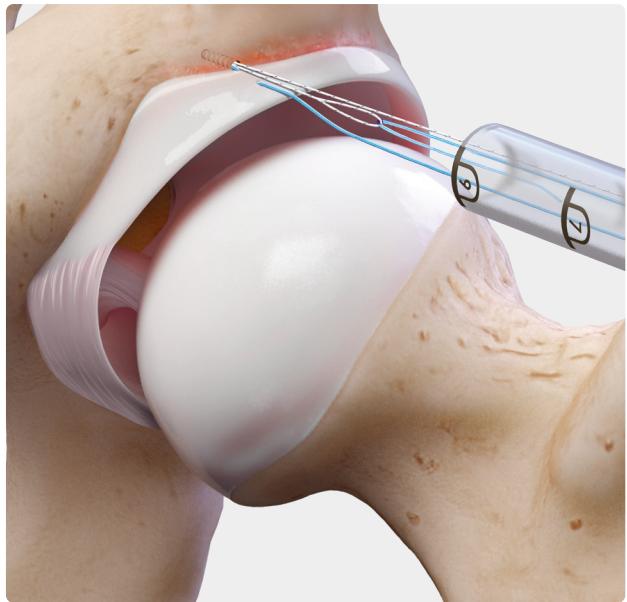
6b

Pierce the midsubstance of the labrum with the SwiftStitch suture passer and retrieve the suture. With the suture captured in the jaws, remove the SwiftStitch suture passer from the cannula.



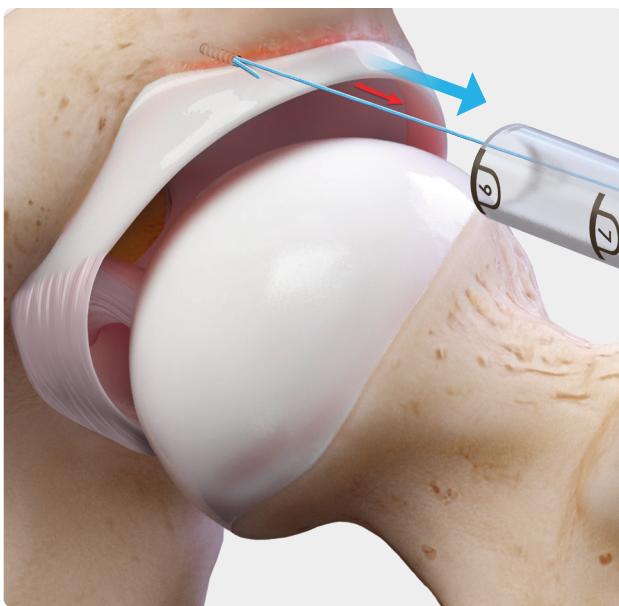
7a

**Note:** For suture management, prior to loading the repair suture into the loop of the TigerLink™ suture, clear the repair suture and looped end of the TigerLink suture with a retriever. This will improve suture management during suture shuttling.



7b

Outside the cannula, load approximately 7 mm to 10 mm of the repair suture into the jaws of the SwiftStitch™ suture passer. Press the actuator down and forward to expose the nitinol jaws and then place the suture between them.



8

Place the SwiftStitch suture passer through the labrum as close to the transitional zone of the chondrolabral junction as possible and release the suture into the joint.

**Note:** To reduce the tension on the suture, push the suture passer past-point before releasing it inside the joint.



9

**Final fixation:** Insert subsequent anchors until the repair construct is complete.

## Ordering Information

### **PEEK 2.4 mm Knotless Hip SutureTak® Anchor (AR-2424PHS)**

#### Disposables

Disposable 2.0 mm fluted flexible drill for Knotless Hip SutureTak anchor	AR-2424DF-20
Disposable 1.9 mm fluted flexible drill for Knotless Hip SutureTak anchor	AR-2424DF-19
Disposables Kit for 2.4 Knotless Hip SutureTak anchor, straight, 2.0 mm drill	AR-2424DHS
Disposables Kit for 2.4 Knotless Hip SutureTak anchor, straight, 1.9 mm drill	AR-2424DHS-1
Disposables Kit for 2.4 Knotless Hip SutureTak anchor, curved, 2.0 mm drill	AR-2424DHC
Disposables Kit for 2.4 Knotless Hip SutureTak anchor, curved, 1.9 mm drill	AR-2424DHC-1

#### Reusables

Reusable 2.0 mm drill for Knotless Hip SutureTak anchor	AR-2424D-20
Reusable 1.9 mm drill for Knotless Hip SutureTak anchor	AR-2424D-19
Reusable drill guide for Hip FiberTak® anchor, crown tip	AR-3600DG
Reusable drill guide for Hip FiberTak anchor, low curve, crown tip	AR-3600DGC-12
Reusable drill guide for Hip FiberTak anchor, medium curve, crown tip	AR-3600DGC-16
Reusable drill guide for Knotless Hip SutureTak anchor, high curve, crown tip	AR-2424DGC-20

Products advertised in this brochure / surgical technique guide may not be available in all countries. For information on availability, please contact Arthrex Customer Service or your local Arthrex representative.



This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's directions for use. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level or outcomes.



Arthrex manufacturer, authorized  
representative, and importer  
information (Arthrex eIFUs)



US patent  
information