InternalBrace™
Ligament Augmentation Repair

Build in Stability, Strength and Protection to Your Brostrom Repairs

Knotless repair with SwiveLock® anchors and FiberTape® suture technology

1,000,000+ FiberTape implanted since 2004

25,000+ InternalBraces performed since 2013

Ultimate Failure (Newtons)*

*reference:
InternalBrace™ Ligament Augmentation Repair
Anterior Talofibular Ligament - Technique Review (Fibula to Talus)

Standard approach to a Brostrom repair to augment the repair of the native ATFL ligament.

Through a standard Brostrom repair incision, place the 2.4 or 3.0 mm SutureTak® anchors for the primary ATFL repair. The InternalBrace is applied, 1.5 cm proximal from the tip of the distal fibula splitting the difference of the SutureTaks. Drill with the 2.7 mm Drill Bit and tap with the 3.5 mm Tap (black handle) to the laser line.

Implant the 3.5 mm SwiveLock® anchor loaded with FiberTape® suture into the fibular hole. Hold the black paddle on the driver stationary while turning the driver clockwise. The black laser line on the driver is buried into the bone.

The talar attachment of the ATFL is distal and anterior to the articular surface of the talus in line with the tip of the fibula. Drill with the 3.4 mm Drill Bit into the nonarticulating surface of the talus in line with the superior ATFL directed 40° with respect to the lateral border of the foot into body of the talus. Tap the tunnel to the laser line on the 4.75 mm Tap (green handle).

With the foot in relaxed plantarflexion and neutral (inversion/eversion) tie the primary ATFL to the fibula. This places the foot so maximum tension will be on ligament repair.

Pass both limbs of the FiberTape through the eyelet of the 4.75 mm SwiveLock. **Tensioning:** Bring the eyelet of the 4.75 mm SwiveLock to the top edge of the talar drill tunnel. Pull the FiberTape to the desired tension and mark the FiberTape at the level of the black laser line on the SwiveLock. Mallet the SwiveLock until screw is against the bone, then hold the green paddle on the driver stationary while turning the driver clockwise. **Surgical Pearl:** When tensioning, place a Small Curved Hemostat or Freer Elevator between the FiberTape and talus prior to inserting the SwiveLock.

After final anchor placement is inserted, cut the remnant FiberTape tails with FiberWire® Scissors. Surgeon can now suture inferior extensor retinaculum to fibula or capsule as desired.

Ordering Information

**InternalBrace Ligament Augmentation Repair Kit (AR-1678-CP) includes:**
- BioComposite SwiveLock w/#2 TigerTape, 3.5 mm
- BioComposite SwiveLock, 4.75 mm
- Guidewire w/Trocar Tip, 1.35 mm
- Drill Bit, cannulated, 2.7 mm
- Drill Bit, 2.7 mm
- Punch/Tap for 3.5 mm SwiveLock
- Drill Bit, 3.4 mm
- Punch/Tap for 4.75 mm SwiveLock
- Drill Guide
- Two Free Needles
- Suture Passing Wire

**InternalBrace Ligament Augmentation Repair Kit w/ Collagen Coated FiberTape (AR-1688-CP) includes:**
- BioComposite SwiveLock w/collagen coated FiberTape, 3.5 mm
- BioComposite SwiveLock, 4.75 mm
- Guidewire w/Trocar Tip, 1.35 mm
- Drill Bit, cannulated, 2.7 mm
- Drill Bit, 2.7 mm
- Punch/Tap for 3.5 mm SwiveLock
- Drill Bit, 3.4 mm
- Punch/Tap for 4.75 mm SwiveLock
- Drill Guide
- Two Free Needles
- Suture Passing Wire

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