Hip Labral Repair

Utilizing SPEEDLOCK HIP Knotless Suture Anchor

A hip technique guide







SPEEDLOCK[◊] HIP Knotless Suture Anchor

The SPEEDLOCK HIP labral refixation system from Smith+Nephew is designed to enable surgeons to perform a secure¹, streamlined, knotless repair with both rapid suture and anchor deployment. Designed for an arthroscopic approach, the SPEEDLOCK HIP and SPEEDSTITCH suturing systems help simplify challenging hip arthroscopy procedures.

The following technique is for informational and educational purposes only. It is not intended to serve as medical advice. It is the responsibility of treating physicians to determine and utilize the appropriate products and techniques according to their own clinical judgment for each of their patients. For more information on the SPEEDLOCK HIP Knotless Suture Anchor, including its indications for use, contraindications, and product safety information, please refer to the product's label and the instructions for use packaged with the product.

SPEEDLOCK HIP PEEK Knotless implant

The SPEEDLOCK HIP implant gives surgeons maximum control of their acetabular labrum repairs. With the combination of independent bone lock, suture lock and incremental reversible tissue tensioning, the knotless anchor system offers a stable construct with a unique, secure¹ and streamlined¹ technique.



SPEEDSTITCH Suture Passer

The SPEEDSTITCH device has an integrated grasper and suture passer design that allows the surgeon to simultaneously stabilize tissue and place a stitch arthroscopically.^{2,3} The unique design of the SPEEDSTITCH device allows for easy access while enabling a fast and consistent² repair through one portal.



Capsulotomy:

Perform a standard interportal capsulotomy utilizing CAP-FIX° Capsulotomy Blades.



Labral preparation

Prepare for your labral repair by utilizing the S+N AMBIENT° HIPVAC° 50 COBLATION° Wand or COBLATION FLOW 50° Wand to resect soft tissue as needed.





Figure 1



Figure 2



Figure 3

Pass stitch preparation

After preparing the labrum, pass a stitch (#2 MAGNUMWIRE° suture) using the SPEEDSTITCH suture passer or the ACCU-PASS° DIRECT CRESECENT XL. The free ends of the suture should emerge from the portal. Through the same portal, insert the SPEEDLOCK° HIP drill guide with SPEEDLOCK HIP conical obturator and place the distal tip at the desired site of the bone hole. Remove obturator. (Figure 1)

Prepare acetabulum

1. Insert the SPEEDLOCK HIP drill. Drill until the laser mark on the distal end of the drill is under the bone surface (visible in the arthroscopic view) or until the positive stop on the drill engages with the drill guide. (Figure 2)

NOTE:

- Ensure drill is chucked properly
- If sutures are present, it is important to hold the sutures taut and out of the drill guide to prevent tangling
- Properly and thoroughly drill holes prior to inserting implant
- The articular surface of the acetabulum is often observed during drilling to ensure that the drill does not penetrate the acetabular wall
- 2. Remove the drill and insert the PATHFINDER device into the hole to maintain alignment while the SPEEDLOCK HIP implant is prepared for insertion. (**Figure 3**)

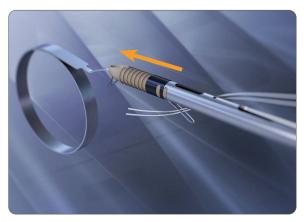


Figure 4



Figure 5



Figure 6

Preparing the implant

- 1. Pass both ends of the suture through the snare wire loop. Pull the snare ring in a straight line away from the implant. (**Figure 4**)
- 2. Adjust both suture lengths to approximately 2.5 inches (~6cm) past the distal end of the implant eyelet. (**Figure 5**)
- 3. Reduce excess suture by rotating the suture ratchet knobs with both hands in the direction of the arrows until suture is visible on the suture reel. (**Figure 6**)

NOTE: Ensure that the suture is not under tension



Figure 7

Deploying the implant

1. If using the PATHFINDER device, remove prior to inserting the SPEEDLOCK° Hip implant. Advance the implant through the portal with the black knobs oriented away from the center of the acetabulum. Take care not to split the sutures or wrap sutures around the inserter shaft. If inserting through the drill guide, ensure that the slit on the drill guide is aligned to face the stitch in the tissue. (Figure 7)

Tension suture slack by turning the suture ratchet knobs in the direction of the arrow on the inserter handle.

If suture is overtensioned, press the black release button located under the suture wheel and reverse the ratchet knobs. Realign sutures and re-tension.

NOTE: Ensure that the implant is oriented so that the suture emerges from the short slot on the inserter shaft towards the stitch in the labrum. Check that the entire length of the suture is visible from the labrum to the implant to ensure there are no tissue bridges.



Figure 8



Figure 9



Figure 10

NOTE: Ensure that the SPEEDLOCK⁶ Hip implant and inserter handle are aligned with the bone hole to avoid bending or breaking the implant when inserting. Also, confirm that the slit in the inserter aligns with the tissue.

- 2. While holding the inserter handle, mallet the end of the deployment handle. Advance the anchor until the entire laser mark on the implant insertion shaft is under the articular surface of the acetabular rim. Do not advance anchor past the proximal PEEK window (visible in the arthroscopic view). (Figure 8)
- 3. Rotate suture ratchet knobs to tension suture and mobilize labrum tissue onto the acetabular rim. Continue rotating with two fingers on each ratchet knob until desired tension is achieved. If suture tension needs to be released, push the ratchet release button on the inserter handle. (Figure 9)
- 4. When desired tension is achieved, detach the inserter handle by turning the deployment handle clockwise in the direction of the arrow approximately one and a half complete revolutions until it stops. Mallet inserter handle out to remove from bone hole. (Figure 10)



Figure 11

Deploying the implant

5. Trim the sutures using the arthroscopic MAGNUMWIRE suture cutter.

The above sequence is repeated until the desired number of implants have been placed to complete the labrum repair.

NOTE: If placing more than one implant, ensure that drilled holes are at least 5mm apart. (**Figure 11**)

Closing the capsule

6. Utilizing the SPEEDSTITCH Device or the ACCU-PASS^o Direct, close the capsule using your preferred method.

Ordering information

SPEEDLOCK® HIP Knotless Anchor	
Reference #	Description
23-2001 SPEEDLOCK HIP	Knotless Suture Anchor, 3mm x 12mm (1 each)
23-2009 SPEEDLOCK HIP	Inline reusable drill
23-2010 SPEEDLOCK HIP	Drill, 3mm x 16.6mm (for offset drill guide)
23-2013 SPEEDLOCK HIP	Inline reusable obturator
23-2014 SPEEDLOCK HIP	Inline reusable drill guide
23-2015 SPEEDLOCK HIP	Reusable drill guide, offset handle
23-2016 SPEEDLOCK HIP	PATHFINDER
23-2017 SPEEDLOCK HIP	Conical obturator
CAP-FIX [◊] Blades	
Reference #	Description
72205316	CAP-FIX Blade, straight
72205317	CAP-FIX Blade, curved
72205318	CAP-FIX Blade, straight, with hip pac
72205319	CAP-FIX Blade, curved, with hip pac
ACCU-PASS ^o DIRECT Crescent XL Suture Passer	
Reference #	Description
23-2005	ACCU-PASS DIRECT Crescent XL Suture Passer
AMBIENT [®] HIPVAC [®] 50 Wa	nd
Reference #	Description
72290004	AMBIENT HIPVAC 50 Wand
COBLATION° FLOW 50° W	and
Reference #	Description
72290037	WEREWOLF [◊] COBLATION FLOW 50 Wand

Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your Smith+Nephew representative or distributor if you have questions about the availability of Smith+Nephew products in your area.

Additional instruction

To order the instruments used in this technique, call +1 800 343 5717 in the U.S. or contact an authorized Smith+Nephew representative. Prior to performing this technique, consult the Instructions for Use documentation provided with individual components - including indications, contraindications, warnings, cautions and instructions.

Caution: U.S. Federal law restricts this device to sale by or on the order of a physician.

Learn more at **smith-nephew.com**



Manufactured by: ArthroCare Corporation T +978 749 1000 7000 West William Cannon Drive Austin, TX 78735, USA

www.smith-nephew.com US Customer Service: +1 800 343 5717

Distributred by: Smith & Nephew, Inc. 150 Minuteman Road Andover, MA 01810 USA

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References