

# DESIGN RATIONALE

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The Latitude® Hemi Elbow is the first 3rd generation elbow hemiarthroplasty prosthesis. It features a true **anatomical** reconstruction of the joint, **modular** components, and is **adaptable** to a wide range of indications.

The Latitude® Hemi Elbow is designed to reproduce the patient's anatomy; thus to restore the natural kinematics of the elbow. Its unique instrumentation facilitates a step by step procedure that now makes **elbow hemiarthroplasty accurate, precise and reproducible.**

### DESIGN GOALS

- Distinctive right and left anatomical components.
- Precision instrumentation.
- Accurate implant positioning referenced on the flexion/extension axis.
- Ease of assembly.
- Optimal bone preservation.

### CLINICAL OBJECTIVES

- Latitude for use in a wide range of indications.
- Latitude to reproduce patient flexion/extension axis.
- Latitude to reconstruct the radio-humeral joint.

### INDICATIONS FOR USE

- Primary or secondary osteoarthritis and rheumatoid arthritis
- Correction of functional deformities
- Revision procedures where other treatments or devices have failed
- Treatment or fractures that are unmanageable using other techniques
- Same indications for Latitude Anatomic (Hemi Elbow Prosthesis)
- The prosthesis is for cemented use only

### CONTRAINDICATIONS

Refer to the instruction for use delivered with the implant.



# ELBOW PROSTHESIS

## LATITUDE ANATOMIC HEMIARTHROPLASTY

### Anatomic Humeral Stem

Ref.	Component information
DKY181	Anatomic humeral stem small right
DKY182	Anatomic humeral stem medium right
DKY183	Anatomic humeral stem large right

DKY184	Anatomic humeral stem small left
DKY185	Anatomic humeral stem medium left
DKY186	Anatomic humeral stem large left



### Humeral screw

Ref.	Component information
DKY191	Humeral screw small, small +
DKY192	Humeral screw medium, medium +
DKY193	Humeral screw large, large +



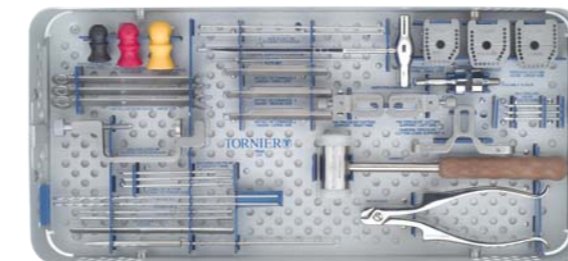
### Anatomic Spool

Ref.	Component information
DKY161	Anatomic spool, small, right
DKY162	Anatomic spool, small +, right
DKY163	Anatomic spool, medium, right
DKY164	Anatomic spool, medium +, right
DKY165	Anatomic spool, large, right
DKY166	Anatomic spool, large +, right



DKY171	Anatomic spool, small, left
DKY172	Anatomic spool, small +, left
DKY173	Anatomic spool, medium, left
DKY174	Anatomic spool, medium +, left
DKY175	Anatomic spool, large, left
DKY176	Anatomic spool, large +, left

### YKAD032 box 1 - upper tray



### YKAD049



### YKAD032 box 1 - lower tray



# Surgical Technique

Hemi Elbow Prosthesis

Latitude® Anatomic



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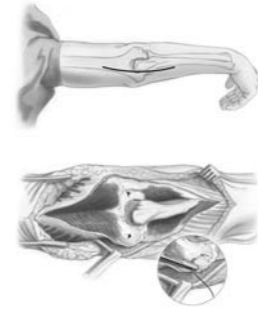
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161, rue Lavoisier. Montbonnot. 38334 Saint-Ismier Cedex. France. Tel. : 33 (0)4 76 61 35 00. Fax : 33 (0)4 76 61 35 33. [www.tornier.com](http://www.tornier.com)

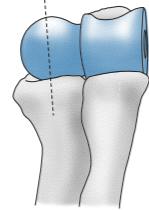
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# LATITUDE® HEMI ELBOW PROSTHESIS - SURGICAL TECHNIQUE

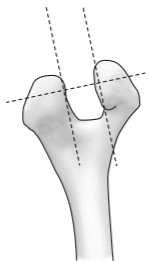
**1.** Make a straight incision centered just lateral to the medial epicondyle and just medial to the tip of the olecranon. Elevate full thickness fasciocutaneous flaps and transpose the ulnar nerve anteriorly. You need exposure to see the ulna medially and laterally and to see both condyles of the distal humerus. Tag the collateral ligaments' origins.



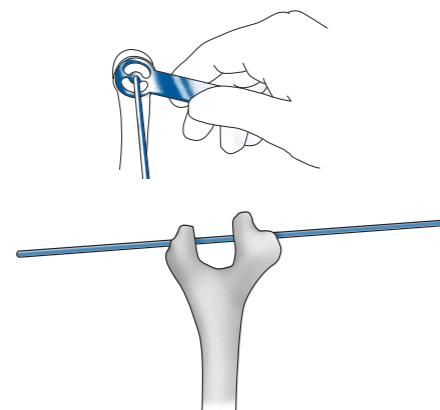
**2.** Compare the spools with the distal humerus and place the templated spool size in the dislocated ulna. The center of the capitellum should be directly in the center of the radial head. (If it is between sizes- downsize.) The size of spool determined will be used for the humeral stem component.



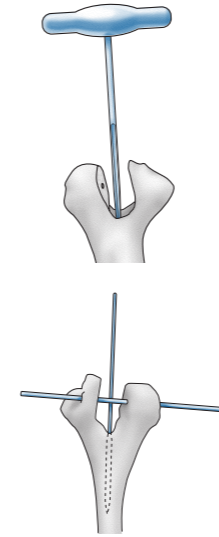
**3.** Remove the central portion of the distal humerus. (This enables you to visualize both entry points in the condyles.)



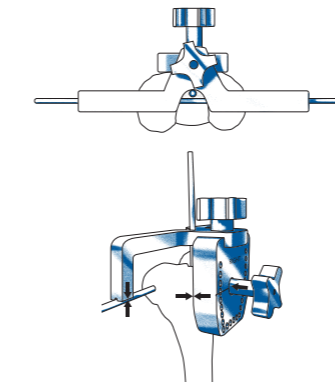
**4.** Mark the center of the capitellum using the appropriate size circular capitellum guide. (This is the most important part of the case!) While drilling, be aware of the entry points into the condyles to ensure you are not placing the pin in varus or valgus.



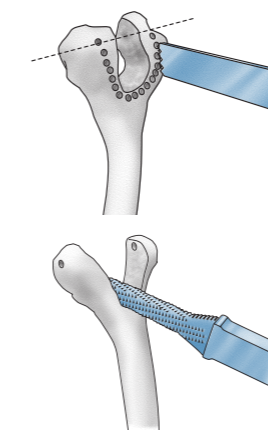
**5.** Use a burr to start the entrance into the humeral canal and follow with the reamer. (Make sure the canal is large enough to get the intramedullary guide in without too much force.)



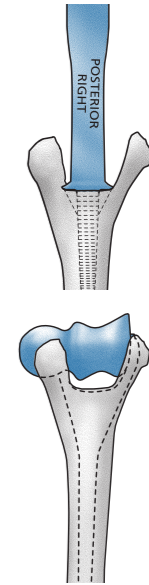
**6.** Place the trochlear cutting guide using the axis pin and intramedullary guide. Seat the cutting block flush with the humerus. Stabilize the cutting block with pins. Remove the cutting support, the flexion/extension axis pin and the intramedullary alignment rod. Drill with the 3 mm drill bit through remaining holes on the cutting block.



**7.** Remove that portion of bone using an osteotome or saw. Lean more to the outer edges of the holes to allow the capitellum guide to sit flush. (You may need to use a humeral rasp to file the edges smooth.)



**8.** Align the humeral rasps parallel to the trochlear cut. Rasp to the appropriate size and insert the humeral trial.



**9.** X-Ray



**10.** Repair the collateral ligaments using the hole in the axis of the humeral component.



For more information, refer to Latitude Surgical Technique UDLT08.2.