



The Next *Wave* in Patello-Femoral Arthroplasty

The Patellofemoral HemiCAP® Arthroplasty System restores the unique articular surface of the Patellofemoral (PF) Joint providing an anatomic approach to post-traumatic Type A and dysplastic or mal-aligned Type B PF degeneration. The Inlay Design allows for careful adjustments in dysplasia treating co-morbidities with concomitant procedures.

The treatments spectrum of PF HemiCAP® Inlay Arthroplasty with inherent advantages targets refractory symptoms in

- ▶ Isolated PF Arthrosis and Arthritis
- ▶ PF Malalignment
- ▶ PF Instability



PF Focal
HemiCAP®

PF Wave
HemiCAP®

What makes the Arthrosurface PF Systems Unique?

Inlay Biomechanics

Avoids overstuffing and maintains soft tissue tension/extensor mechanism.



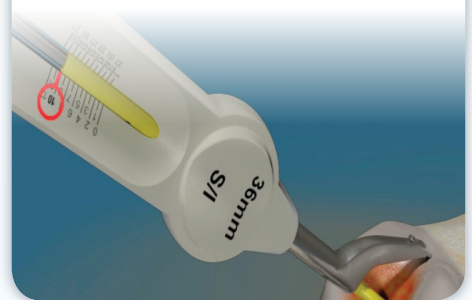
Motion Preservation

Active alternative to onlay arthroplasty and total knee replacement.



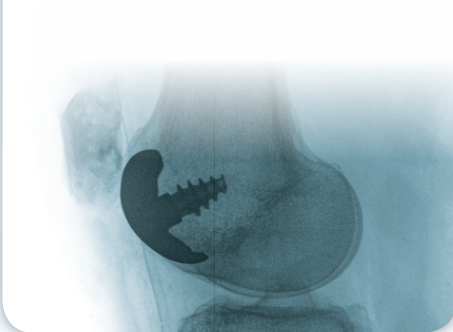
Surface Guidance

Intra-operative mapping to ensure an anatomic, coronal and sagittal fit.



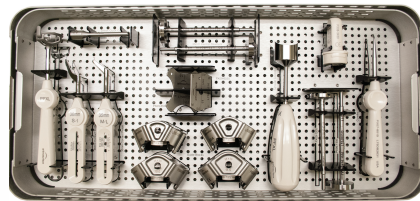
Bone Preservation

Minimal bone removal benefits surgical revision to larger implants.



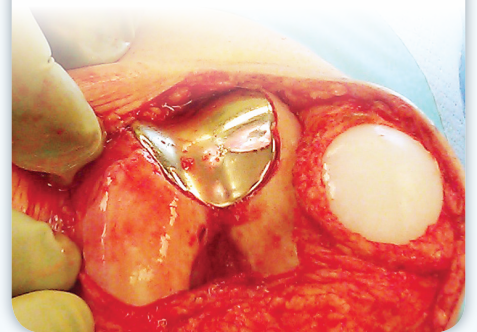
Surgical Technique

Controlled, Reproducible, Fast.



Inlay Placement

Embedded, protected, stable implant. "No bridges burned."



"Patients treated with PFA demonstrated similar results with respect to pain relief, but **showed improved function and return to activity** when compared with patients treated with TKA. Patello-femoral arthroplasty patients also experienced less blood loss, fewer complications, and shorter hospital stay following surgery. Our results indicate that PFA is a less invasive treatment option for patients with isolated PA, yielding early outcomes that compare favorably with TKA."

Diane L. Dahm, MD. Patellofemoral Arthroplasty Versus Total Knee Arthroplasty in Patients with Isolated Patellofemoral Osteoarthritis. The American Journal of Orthopedics, October 2010