

GB Instructions for use/Technical description
Arcadius^{SP} L

USA Instructions for use/Technical description
Arcadius^{SP} L

Note for U.S. users

This Instructions for Use is NOT intended for United States users. Please discard. The Instructions for Use for United States users can be obtained by visiting our website at www.aesculapImplantsystems.com and clicking the "Products" menu. If you wish to obtain a paper copy of the Instructions for Use, you may request one by contacting your local Aesculap representative or Aesculap's customer service at 1-866-229-3002. A paper copy will be provided to you upon request at no additional cost.

D Gebrauchsanweisung/Technische Beschreibung
Arcadius^{SP} L

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Arcadius^{SP} L

E Instrucciones de manejo/Descripción técnica
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NL Gebruiksaanwijzing/Technische beschrijving
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S Bruksanvisning/Teknisk beskrivning
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RUS Инструкция по применению/Техническое описание
Arcadius^{SP} L

CZ Návod k použití/Technický popis
Arcadius^{SP} L

PL Instrukcja użytkowania/Opis techniczny
Arcadius^{SP} L

SK Návod na použitie/Technický opis
Arcadius^{SP} L

TR Kullanım Kılavuzu/Teknik açıklama
Arcadius^{SP} L

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SHARING EXPERTISE

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Intended use

The Arcadius^{XP} L Interbody Fusion System is a stand alone device intended to be used with four bone screws if no supplement fixation is used to stabilize the lumbar spine through an anterior approach.

The system contains:

- Cages in different heights, angles and footprints
- Bone screws in different lengths

Materials

The materials used in the implant are listed on the packaging:

- The Arcadius^{XP} L cages are made of PEEK-OPTIMA® and coated with a titanium layer and a vacuum plasma spray coating (PLASMAPORE^{XP}). They contain marker pins made of tantalum to ensure radiological visibility for checking the implant position.
- PLASMAPORE^{XP} surface coating, pure titanium according to ISO 5832-2
- The SIBD bone screws are made of ISOTAN®; titanium forged alloy Ti6Al4V according to ISO 5832-3

The titanium implants are anodized with a colored oxide layer. Slight changes in coloration may occur, but do not affect the implant quality.

PLASMAPORE^{XP} and ISOTAN® are registered trademarks of Aesculap AG, 78532 Tuttlingen / Germany. PEEK-OPTIMA® is a registered trademark of Invibio, Ltd Lancashire FY5 4QD / UK.

Indications

Surgically installed implants serve to support the normal healing processes. They are not intended for use either as replacements for natural body parts or to bear loads over the long term if healing does not occur.

Use for:

- Degenerative disc disease (DDD) and instability
- Spondylolisthesis up to Grade 1
- Post-discectomy syndrome
- Post-traumatic instability

Levels of anterior lumbar interbody fusion for these indications are from L2-S1.

Contraindications

Do not use in the presence of:

- Fever
- Acute or chronic infections or severe defects of the osseous structures of the vertebral bodies, which need to be sound for the stable implantation of the Arcadius^{XP} L implants
- Pregnancy
- Severe osteoporosis or osteopenia
- Medical or surgical conditions that could negatively affect the outcome of the implantation
- Mental illness
- Dependency on pharmaceutical drugs, drug abuse, or alcoholism
- Generally poor condition of the patient
- Adiposity
- Neuromuscular disorders or illnesses
- Bone tumors in the region of implant fixation
- Wound healing disorders
- Unwillingness or inability of the patient to follow the instructions for postoperative treatment
- Foreign body sensitivity to the implant materials
- Prior fusion at the level(s) to be treated
- Skeletal immaturity
- Any time implant utilization would interfere with anatomical structures
- Signs of local inflammation
- Cases not listed under indications

Side effects and interactions

The surgical intervention involves the following potential risks:

- Neurological complications caused by overdistraction, or trauma of the nerve roots or dura
- Loss of intervertebral disk height due to removal of healthy bone material

Complications that can generally occur in conjunction with intervertebral surgery:

- Pseudarthrosis
- Incorrect implant position
- Spondylolisthesis
- Loss of fixation; dislocation or migration
- Implant failure due to excessive load
- Failed or delayed fusion
- Infection
- Fractured vertebral body or bodies
- Tissue reaction to implant materials
- Hematomas and wound healing disorders
- Vascular and neural complications such as arterial injury or mechanical compromise, spinal cord contusion and damage, peripheral nerve compromise and damage, including but not limited to peripheral paralysis, weakness, sexual dysfunction, foot drop, numbness, chronic reflex sympathetic dystrophy and/or dysesthesia, sensory disorders, vascular disorders, loss or disturbance of bladder and bowel functions
- Back or leg pain requiring narcotics or epidural injections for resolution beyond 90 days post-surgery
- Lymphatic vessel damage and/or exudation
- Blood vessel erosion and/or occlusion
- Dural tears requiring further surgery for dural repair
- CSF leakage requiring intervention
- Meningitis
- Injuries to organs
- Changes of the normal spine lordosis
- May increase biomechanical stress on adjacent levels
- Impairment of the gastrointestinal, urological and/or reproductive systems
- Pain or indisposition
- Discomfort, or abnormal sensations due to the presence of the device
- Bursitis
- Decreased bone density due to load avoidance
- Bone atrophy/fracture above or below the spine section provided for
- Limited performance
- Persistence of symptoms that were to be treated by the implantation
- Death

Safety notes



The implant has not been evaluated for safety and compatibility in the MR environment. It has not been tested for heating, migration or image artifact in the MR environment. Scanning a patient who has this implant may result in patient injury.

- It is the operating surgeon's responsibility to ensure that the surgical procedure is performed properly.
- General risk factors associated with surgical procedures are not described in the present instructions for use.
- The operating surgeon must have a thorough command of both the hands-on and conceptual aspects of the established operating techniques.
- The operating surgeon must be fully conversant with bone anatomy, including the pathways of nerves, blood vessels, muscles, and tendons.
- It is the operating surgeon's responsibility to ensure the correct combination of implant components and their implantation.
- Aesculap is not responsible for any complications arising from wrong indication, wrong choice of implant, incorrect combination of implant components and operating technique, the limitations of the treatment method, or inadequate asepsis.
- The instructions for use for individual Aesculap implant components must be followed.
- The implant components were tested and approved in combination with Aesculap components. If other combinations are used, the responsibility for such action lies with the operating surgeon.
- Do not, under any circumstances, combine implant components from different manufacturers.
- Do not, under any circumstances, use damaged or surgically removed components.
- Implants that have been used before must not be reused.
- Do not use instruments belonging to another system or made by another manufacturer.
- The implants can come loose or break under increased load. Factors such as the patient's body weight, their level of activity and their compliance with instructions concerning their bearing of weight or loads can influence the durability of the implant.
- Delayed healing can cause implant breakage due to material fatigue.
- The attending physician shall make any decision with regard to the removal of implant components that have been used, taking into account the potential risk of another surgery and the difficulties involved in the removal of an implant.
- Damage to the load-bearing structures of the implant can lead to loosening of components, dislocation, migration, and other severe complications.
- The implant components applied, along with their article numbers, the name of the implant, as well as the batch number and serial number (if available) must be documented in all patient records.
- Postoperatively, individual patient information, as well as mobility and muscle training, is of particular importance.
- In order to promote the earliest possible detection of any problems or complications, the operation results must be followed up at regular intervals with the aid of appropriate examination procedures. A precise diagnosis requires x-rays taken in the directions anterior-posterior and medial-lateral.
- The Arcadius^{XP} L Spinal System has not been evaluated for safety and compatibility in the MR environment.
- The Arcadius^{XP} L Spinal System has not been tested for heating or migration in the MR environment.

Sterility

Arcadius^{XP} L cages

- The Arcadius^{XP} L cages come individually packed in protective packaging that is labeled according to its contents.
- The Arcadius^{XP} L cages are gamma-sterilized.
- ▶ Store implant components in their original packaging. Remove them from their original protective packaging only just prior to application.
- ▶ Prior to use, check the product expiry date and verify the integrity of the sterile packaging.
- ▶ Do not use implant components that are past their expiration date or whose packaging is damaged.



Damage to implants caused by processing and reesterilization!

- ▶ Do not reprocess or reesterilize the implants.

Bone screws

- The SIBD bone screws are supplied in an unsterile condition.
- The SIBD bone screws are packaged individually.
- ▶ Store the implant components in their original packaging and only remove them from their original and protective packaging immediately prior to processing.
- ▶ Use the implant system storage devices for processing, sterilization and sterile setup.
- ▶ Use a suitable tray for cleaning/disinfection.
- ▶ Use the system storage device only for sterilization and sterile provision.
- ▶ Ensure that the implant components in their implant system storage devices do not come into contact with each other or with instruments.
- ▶ Ensure that the implant components are not damaged in any way.

Prior to initial sterilization and subsequent reesterilization, the bone screws must be cleaned using the following validated reprocessing procedure:

Note

Adhere to national statutory regulations, national and international standards and directives, and local, clinical hygiene instructions for sterile processing.

Note

For patients with Creutzfeldt-Jakob disease (CJD), suspected CJD or possible variants of CJD, observe the relevant national regulations concerning the reprocessing of products.

Note

Successful processing of this medical device can only be ensured if the processing method is first validated. The operator/sterile processing technician is responsible for this.

The recommended chemistry was used for validation.

Note

If there is no final sterilization, then a virucidal disinfectant must be used.

Note

For the latest information on reprocessing and material compatibility see also the Aesculap extranet at <https://extranet.bbraun.com>

The validated steam sterilization procedure was carried out in the Aesculap sterile container system.

Validated reprocessing procedure

Mechanical alkaline cleaning and thermal disinfection

- ▶ Process the implant in its system storage device.
 - ▶ Place the implants on a tray that is suitable for cleaning (avoiding rinsing blind spots).
- Machine type: single-chamber cleaning/disinfection device without ultrasound

Phase	Step	T [°C/°F]	t [min]	Water quality	Chemical/Note
I	Prerinse	<25/77	3	D-W	-
II	Cleaning	55/131	10	FD-W	<ul style="list-style-type: none"> ■ Concentrate, alkaline: <ul style="list-style-type: none"> - pH = 13 - < 5 % anionic surfactant ■ 0.5 % working solution <ul style="list-style-type: none"> - pH = 11*
III	Intermediate rinse	>10/50	1	FD-W	-
IV	Thermal disinfection	90/194	5	FD-W	-
V	Drying	-	-	-	According to the program for cleaning and disinfection device

D-W: Drinking water

FD-W: Fully desalinated water (demineralized, low microbiological contamination: drinking water quality at least)

*Recommended: B Braun Helimatic Cleaner alkaline

For bone screws that are to be resterilized:



WARNING

Intraoperative contamination with blood, secretions, and other fluids may render the affected component unsuitable for resterilization!

- ▶ Handle the implants with new gloves only.
- ▶ Keep the implant system storage devices covered or closed.
- ▶ Process implant system storage devices separately from instrument trays.
- ▶ Clean implants must not be processed together with contaminated implants.
- ▶ Process the implant components individually and separately if no implant system storage devices are available, ensuring that the implant components are not damaged in the process.
- ▶ Mechanically clean and disinfect the implant components.
- ▶ Do not reuse surgically contaminated implants!



WARNING

Direct or indirect contamination may render implants unsuitable for resterilization!

- ▶ Do not reprocess implants that have been directly or indirectly contaminated with blood.

Inspection, maintenance and checks

- ▶ Allow the product to cool down to room temperature.
- ▶ Inspect the product after each cleaning and disinfecting cycle to be sure it is: clean, functional, and undamaged.
- ▶ Immediately set aside damaged or inoperative products.

Packaging

- ▶ Place the product in its holder or on a suitable tray.
- ▶ Pack trays appropriately for the sterilization process (e.g. in Aesculap sterile containers).
- ▶ Make sure that the packaging will prevent a recontamination of the product during storage.

Sterilization

- ▶ Validated sterilization process
 - Steam sterilization through fractionated vacuum process
 - Steam sterilizer according to DIN EN 285 and validated according to DIN EN ISO 17665
 - Sterilization using fractionated vacuum process at 134 °C/holding time 5 min
- ▶ When sterilizing several products at the same time in a steam sterilizer, ensure that the maximum load capacity of the steam sterilizer specified by the manufacturer is not exceeded.

Storage

- ▶ Store sterile products in germ-proof packaging, protected from dust, in a dry, dark, temperature-controlled area.
- ▶ Care should be used in the handling and storage of the implant components. The implants should not be scratched or otherwise damaged. Implants and instruments should be protected during storage especially from corrosive environments.

Application



WARNING

Risk of injury caused by incorrect operation of the product!

- ▶ Attend appropriate product training before using the product.
- ▶ For information about product training, please contact your national B. Braun/Aesculap agency.

The operating surgeon shall devise an operation plan that specifies and accurately documents the following:

- Selection of the implant components and their dimensions
- Positioning of the implant components in the bone
- Location of intraoperative landmarks

The following conditions must be fulfilled prior to application:

- All requisite implant components are ready to hand.
- Operating conditions are highly aseptic.
- All requisite implantation instruments must be available and in working order, including specialized Aesculap implantation systems.
- The operating surgeon and operating room team are thoroughly familiar with the operating technique and with the available range of implants and instruments; information materials on these subjects must be complete and ready to hand.
- The operating surgeon is fully conversant with the rules governing medical practice, the current state of scientific knowledge, and the contents of relevant scientific articles by medical authors.
- The manufacturer has been consulted if the preoperative situation was unclear and if implants were found in the area operated on.

The surgical procedure and following information has been explained to the patient, and the patient's consent has been documented:

- In the case of delayed or incomplete fusion, the implants can break and loosen due to high loads.
- The life-span of the implant depends on the patient's body weight.
- The implant components must not be overloaded by extreme strains, hard physical labor or sports.
- Corrective surgery may be necessitated by implant loosening, fracture or loss of correction.
- Smokers present an increased risk of bone fusion failure.
- The patient must undergo medical check-ups of the implant components at regular intervals.

Implantation of the Arcadius^{XP} L Spinal System requires the following steps:

- ▶ Only use Arcadius^{XP} L instruments provided by Aesculap.
- ▶ Follow the instructions of use of the Arcadius^{XP} L instruments and the O.R. manual.
- ▶ Select the appropriate Arcadius^{XP} L cage size and shape according to the individual indication, preoperative planning and bone situation found intraoperatively.
- ▶ To prevent internal stresses on, and weakening of the implants: avoid scoring or scratching of the implant components.
- ▶ Apply the preparation and implantation instruments correctly.



WARNING

Risk of migration and subsidence due to overpreparation of the vertebral body endplates!

- ▶ Make certain that the base and cover plates of the adjacent vertebral bodies are not weakened.

- ▶ Check spacer height and/or angle using the trial implants.
- ▶ Before inserting the cage it is recommended to fill it with bone or bone substitute.



WARNING

The coated surfaces of the Arcadius^{XP} L cage may be damaged by improper handling!

- ▶ Avoid direct contact with the coated surfaces, handle implants carefully.

- ▶ Use appropriate care when inserting the implant.



WARNING

Inaccurate marking of the midline may result in incorrect positioning of the implant!

- ▶ Always mark the midline under X-ray visualization.
- ▶ Determine the center of the vertebral disc using the midline marker, under X-ray visualization.



WARNING

If the implant is inserted too deep, the spinal canal and other posterior elements may be compressed!

- ▶ Always use the Arcadius^{XP} L implant inserter/manipulator with a depth stop.

- ▶ Confirm anatomically suitable position and orientation of the Arcadius^{XP} L cage.
- ▶ Select the appropriate length and number of SIBD bone screws.
- ▶ Insert the bone screws under X-ray control, especially the diverging lateral screws.



WARNING

Risk of insufficient stability or implant failure due to using fewer than four screws!

- ▶ Apply all four screws or use an additional supplemental spinal fixation system such as the Aesculap S⁴ Spinal System.



WARNING

Engaging the screwdriver incorrectly when turning the bone screw into the Arcadius^{XP} L cage may result in damage to the bone screws!

- ▶ Fully insert the tip of the screwdriver into the bone screw.



WARNING

Applying too high torque may result in damage to the bone screws and the Arcadius^{XP} L cages!

- ▶ Always use the Arcadius^{XP} L screwdrivers with torque limiting handle.

- ▶ Insert the bone screws until they reach the final seated position, ensuring full engagement of the two locking mechanisms.



WARNING

Backing out and loosening of the bone screw occurs when the screw is not fully inserted into the cage!

- ▶ Insert the bone screw until it gets fully engaged.

Note

If a fully seated bone screw is removed from the implant, a small piece of PEEK debris from the locking rim in the locking mechanism may be present.

Further information on Aesculap implant systems is always available from B. Braun/Aesculap or the appropriate B. Braun/Aesculap office.

Disposal

- ▶ Adhere to national regulations when disposing of or recycling the product, its components and its packaging.

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