Modular Neck Extraction

The Neck Implant is removed with the use of the ABG II Modular Neck Extractor (4845-5-541 (Sizes 1-2), 4845-5-540 (Sizes 3-8)). The Neck Implant is extracted by placing the Neck Extractor under either the medial or lateral side of the base of the Neck and levering out the Neck. Neck Trial Forceps are recommended to capture the neck during extraction.

Tip

Tap end of Neck Extractor with a mallet to remove neck in a controlled manner.

Stem Extraction

There are instruments to manage the extraction of a modular stem in both intraoperative and revision situations.

The Modular Stem Extractor (4845-5-530) uses a connection pin, which engages the stem insertion feature and a locking arm that engages the Modular Stem taper. The arm is secured in place by tightening the threaded locking knob. Use the stem impactor to push the stem back out of the femur or hit the plate to extract the stem.
Indications

The indication for use of total hip replacement prostheses include:

1. noninflammatory degenerative joint disease including osteoarthritis and avascular necrosis;
2. rheumatoid arthritis
3. correction of functional deformity;
4. revision procedures where other treatments or devices have failed; and,
5. treatment of nonunion, femoral neck and trochanteric fractures of the proximal femur with head involvement that are unmanageable using other techniques.

Contraindications

1. overt infection;
2. distant foci of infections (which may cause hematogenous spread to the implant site);
3. rapid disease progression as manifested by joint destruction or bone resorption apparent on roentgenogram;
4. skeletally immature patients; and
5. cases where there is a loss of abductor musculature, poor bone stock, or poor skin coverage around the hip joint which would make the procedure unjustifiable.