

Nailing Stability during Tibia Fracture Early Healing Process: A Biomechanical Study

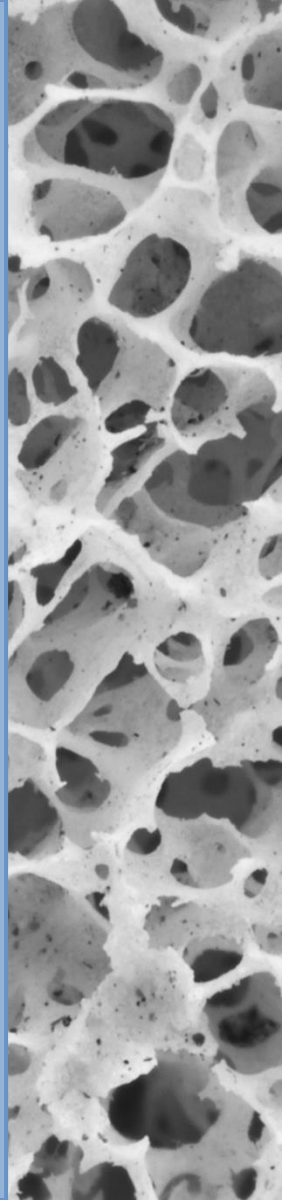
Natacha Rosa, Fernão D. Magalhães, Ricardo Simões and António Torres Marques



International Conference and Expo on

**Biomechanics and Implant
Design**

July 27-29, 2015 Florida, USA

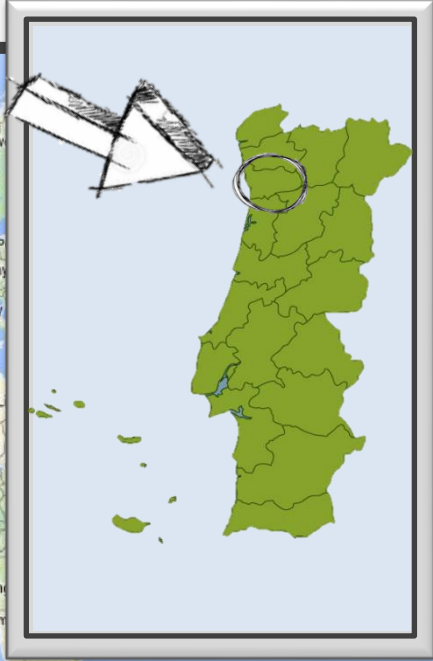


Enhanced Bone Healing in intramedullary nailing through Mechanical Stimulation

Natacha Rosa

3rd Year Mechanical Engineering PhD
Student





www.maps.google.com

Fixation stability and healing

Stabilization technique:

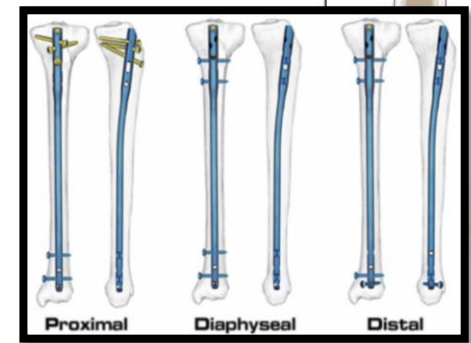
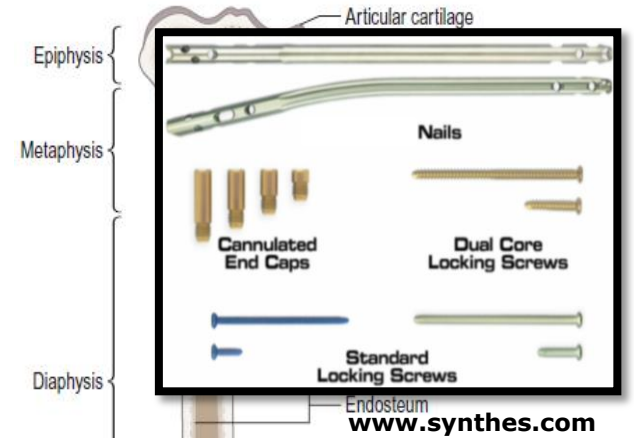
External Fixation
Tibia diaphysis fractures is which healing is most of

Plating

Intramedullary nailing



which



www.synthes.com

Fixation stability and healing

**Improvement of
intramedullary nailing system**



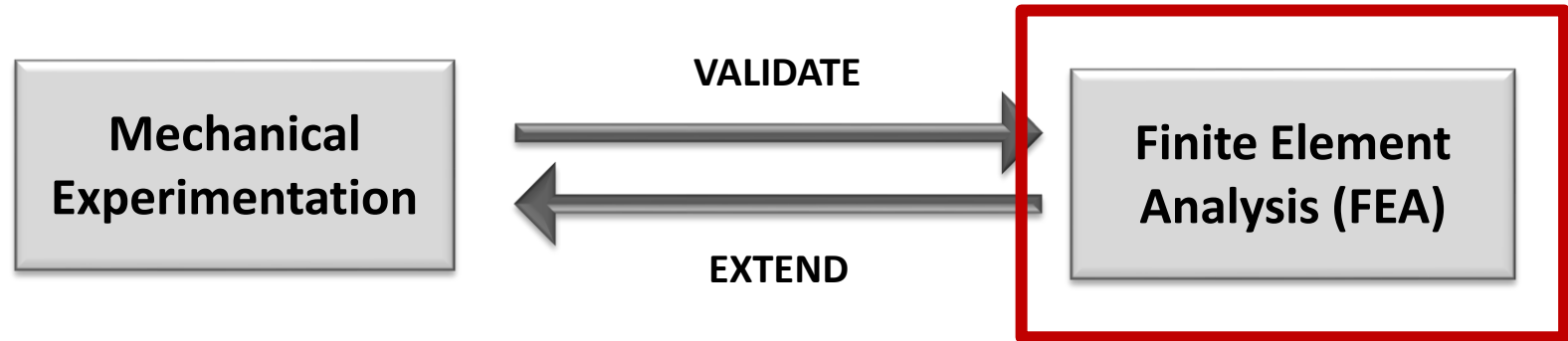
**Understanding of bone-nail fixation system
mechanics**

- How the implant guarantees fracture stability and bone alignment;
- How it is conducive to bone regeneration



Biomechanical stability of the **whole
bone**

Methodology



❖ Whole bone stiffness

VS

Bone-intramedullary nail Stiffness

❖ Interfragmentary movements

Methodology



- External surface
- Surface preparation;
- Solid model construction;
- Cortical and trabecular bone structures boundary definition;

Methodology: Whole bone system

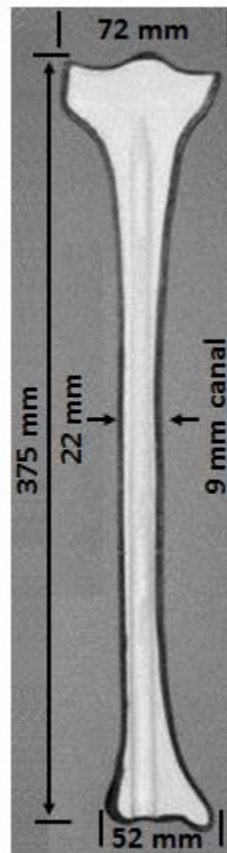
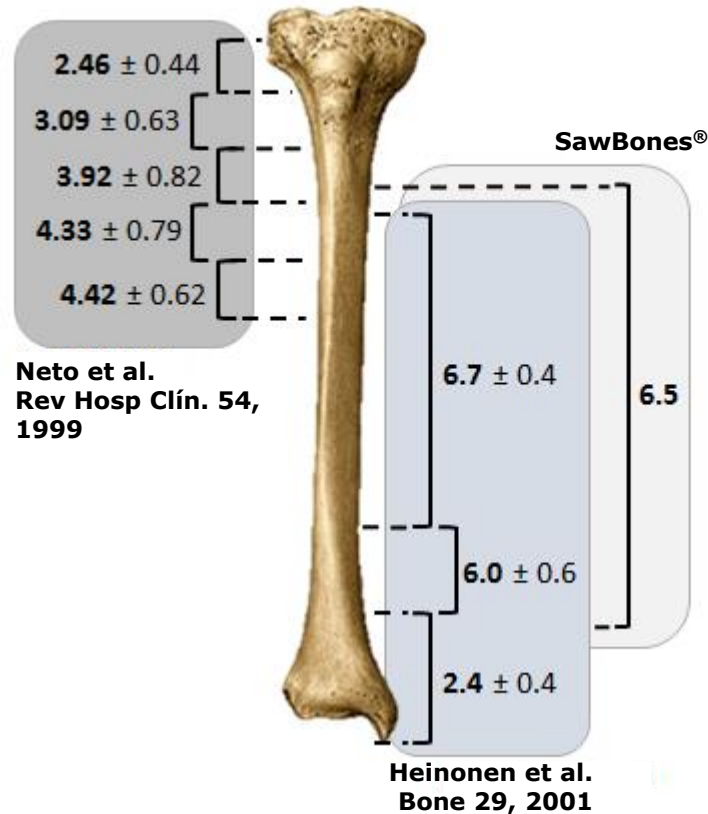
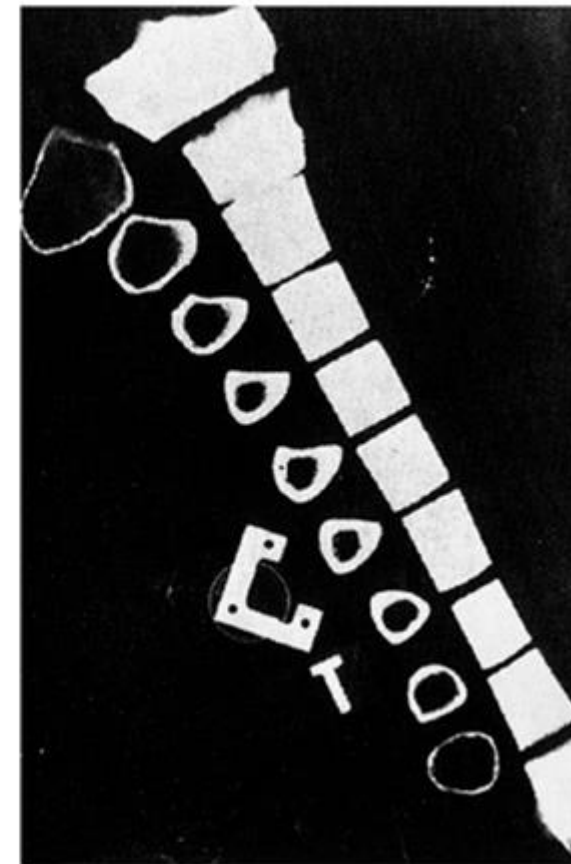


Image obtained from: Heiner et al. J Biomech 34, 2001 and adapted with data from SawBones®



Tencer A. Biomechanics of Fixation and Fractures (Book chapter), 2006

Methodology: Whole bone system

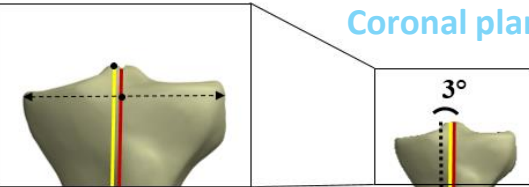
	Expected cortical wall thickness (mm)	Measured cortical wall thickness		Cross-section obtained
		Number of measurements	Average (\pm std) (mm)	
6	2	-	2	
	----- 80%			
5	3	414	2.6 (\pm 1.1)	
	----- 60%			
4	6.5	345	5.7 (\pm 3.0)	
	----- 40%			
3	6	539	4.1 (\pm 1.5)	
	----- 20%			
2	2.5	-	2.5	
	----- 10%			
1	2	-	2	

Methodology



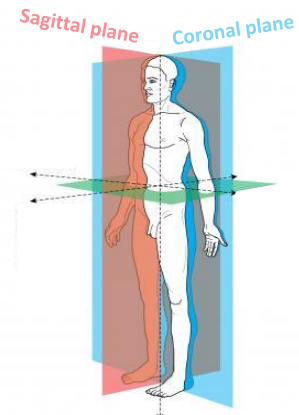
- External surface
- Surface preparation;
- Solid model construction;
- Cortical and trabecular bone structures boundary definition;
- Grips design

Methodology: Containers/grips



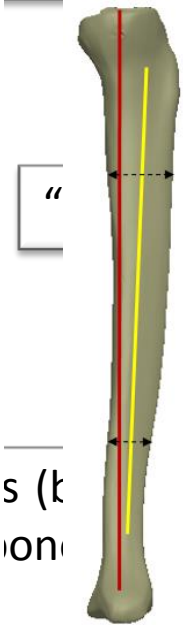
Coronal plane

- Vertical axis
- Anatomical axis
- Mechanical axis



Pickering et al. J Bone Joint Surg, 2012

specimen is aligned parallel to the vertical axis



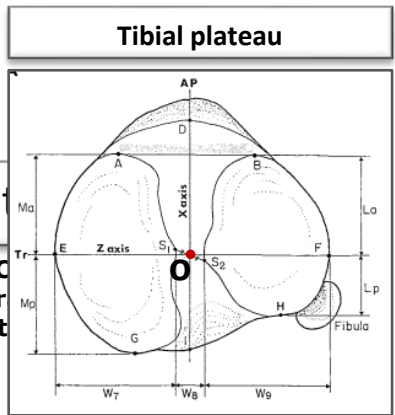
specimen is oriented vertically

Heiner et al. J Biom
Heiner et al. J Biom

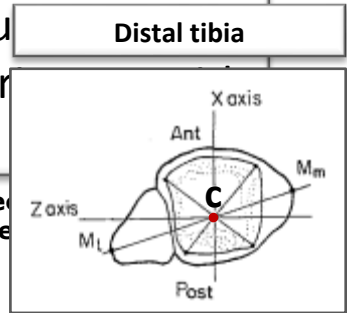
specimen is oriented vertically in the coordinate system of the experiments



Tibial mechanical axis



Yoshioka et al. J Orthop Res 7, 1989

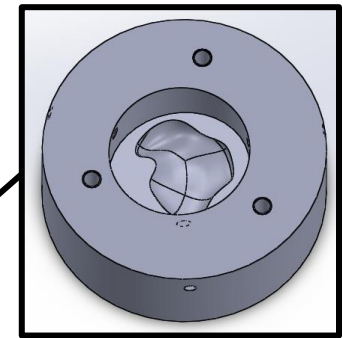
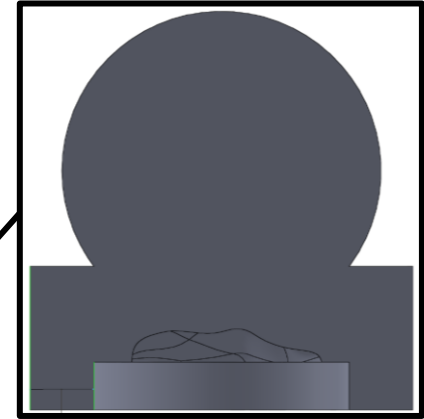
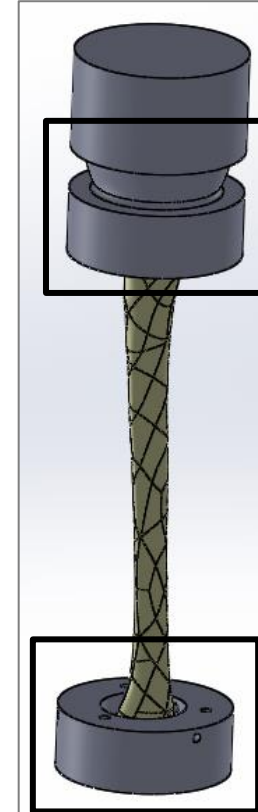
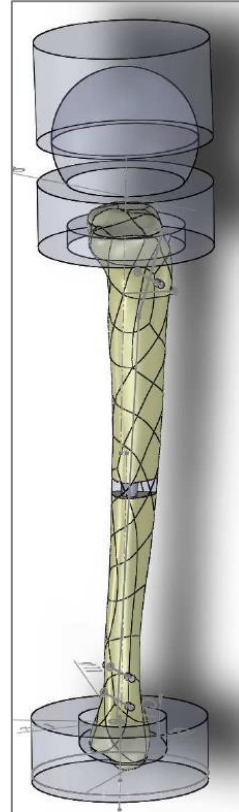


Yoshioka et al. J Orthop Res 7, 1989

Adapted from: Han et al. Proc Inst Mech Engrs Part B, 2008
Gray et al. J Biomech, 1989

Methodology: Containers/grips

- All loading modes;
- The same tibia alignment guaranteed in both simulation and mechanical experimentation;
- Avoid potting bone specimens in cement;
- Misalignment of bone;



Methodology



- External surface
- Surface preparation;
- Solid model construction;
- Cortical and trabecular bone structures boundary definition;
- Grips design
- Intramedullary nail structure drawing
- Intramedullary nail implantation in the bone

Bone-implant complex (BIC) - Nail



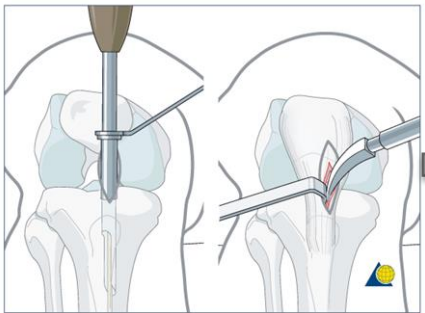
Validation through free-free boundary condition

Harmonic	Experimental (Hz)	Simulation - Ansys® (Hz)	Error (%)
1st	384	388.11	7.6
2nd	432	427.3	5.5
3rd	1057	1047.1	6.4

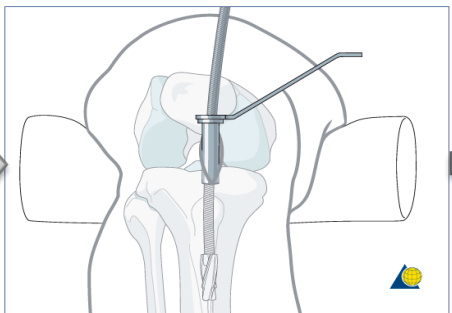
- L.A. Medical M596222 AB0366 T
- $\varnothing 9 \times 345\text{mm}$ nail ($\varnothing 0.35 \times 13.58$ inches)
- Circular ring cross section (inner diameter 5 mm/
0.197 inches)
- Stainless steel - *AISI 316L ASTM F318*

Bone-implant complex (BIC) – Nail implantation

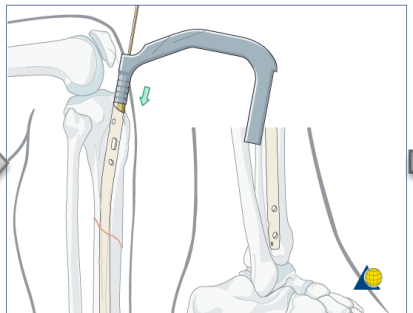
www.aofoundation.org



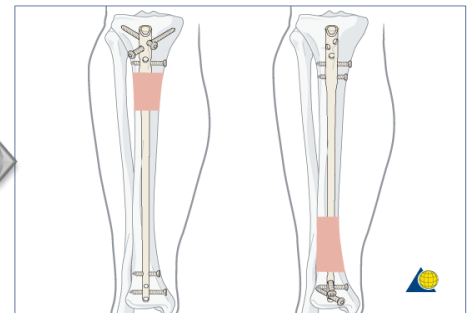
Creation of the nail entry site



Reaming

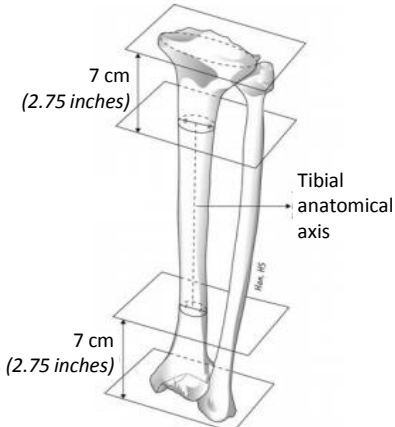


Nail inserted



Nail locking

Ø 11 mm reaming (0.43 inches)



- Diameter: 12.7 mm (0.5 inches)
- Length: 60 mm (2.36 inches)

To accommodate the larger proximal portion in the nail

The correct position of the nail was validated by an experienced orthopedic surgeon

- Proximally: 2 screws
- Distally: 2 screws
- Locking mode
- No play between the screw and the bone

Methodology



- External surface

- Surface preparation;
- Solid model construction;
- Cortical and trabecular bone structures boundary definition;
- Grips design
- Intramedullary nail structure drawing
- Intramedullary nail implantation in the bone

- Finite element analysis

Concept

Nature has optimized this process and it would be difficult to intervene in order to improve fracture healing

There is never been determined a quantifiable relationship between the rate of healing and mechanical

Comiskey et al. J Biomech 43, 2010

High bone-implant stability and instability are detrimental for bone healing

Beneficial effects of early loading and adverse effects of delayed loading on bone healing

Bailón-Plaza et al. J Biomech 36, 2003

There is a tendency to modify the locking option for better stability

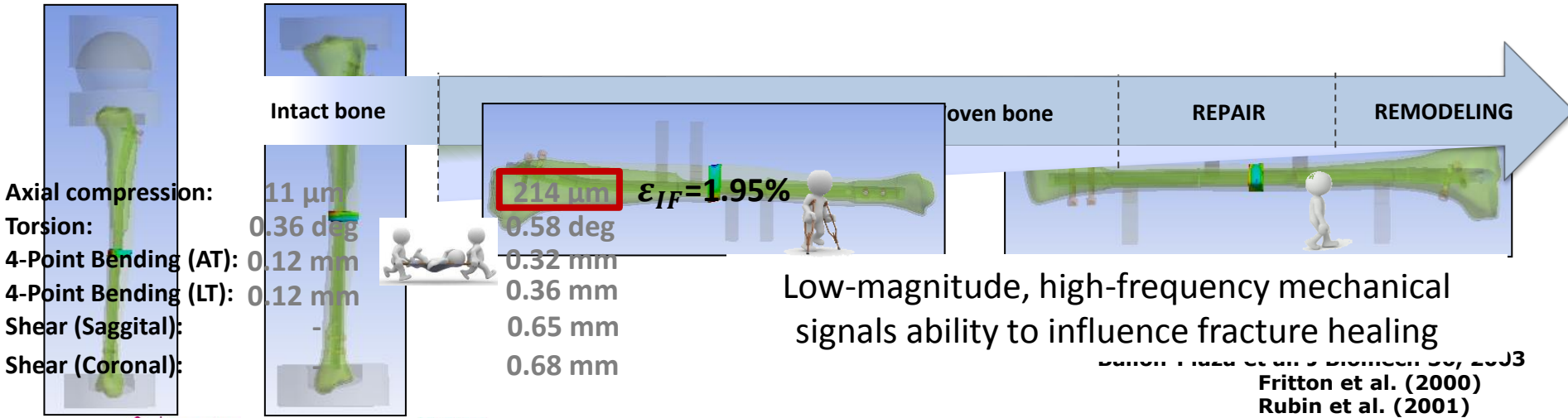
Horn et al. Injury Int J Care Injured 40, 2009

Improve treatment method for bone fracture repair by reducing the patient healing time

Results

Regression line:
 Load/moment vs. Displacement curve
 Fracture location: Central
 Load: 100 N
 Nail diameter: 9 mm
 Fracture gap width: 8 mm
 Conventional nails
 et al. J Biomech 41, 2008

Load	Whole bone	BIC		
		FE	<i>Penzkofer et al. (2009)</i>	<i>Horn et al. (2009)</i>
Axial compression in $N/\mu m$	13400	1250	723 ± 421	620 ± 240 (CL) 1420 ± 421 (ASL)
Torsion (IR) in Nm/deg	8.9	4.5	0.8 ± 0.1	
4-Point Bending (AT) in Nm^2	146.2	51.2	37 ± 8	
4-Point Bending (LT) in Nm^2	87.08	57.6	37 ± 9	
Shear (Saggital) in N/mm	-	294.1	131 ± 30	
Shear (Coronal) in N/mm	-	309.6	164 ± 89	



Conclusions

Validation of the finite element model through mechanical experimentation is essential

Difficult to compare studies due to non-standard experimental set-up

High-frequency low-amplitude interfragmentary micromotion regime applied during early healing recovery phase may be an interesting strategy to enhance the rate and quality of bone repair without risking the disruption of the healing process

An ideal implant stiffness design **demands** an **extensively understanding** of the complex relation between the mechanical stimulus (type, magnitude, rate, duration and timing of initiation of loading) and the bone healing process

We would like to thank

Portuguese Foundation for Science and Technology (FCT)
Luso-American Development Foundation (FLAD)

and also

International Conference and Expo on Biomechanics and Implant Design for giving the opportunity to present the work developed

Thank you for your attention!

I welcome your questions,
suggestions and comments!

