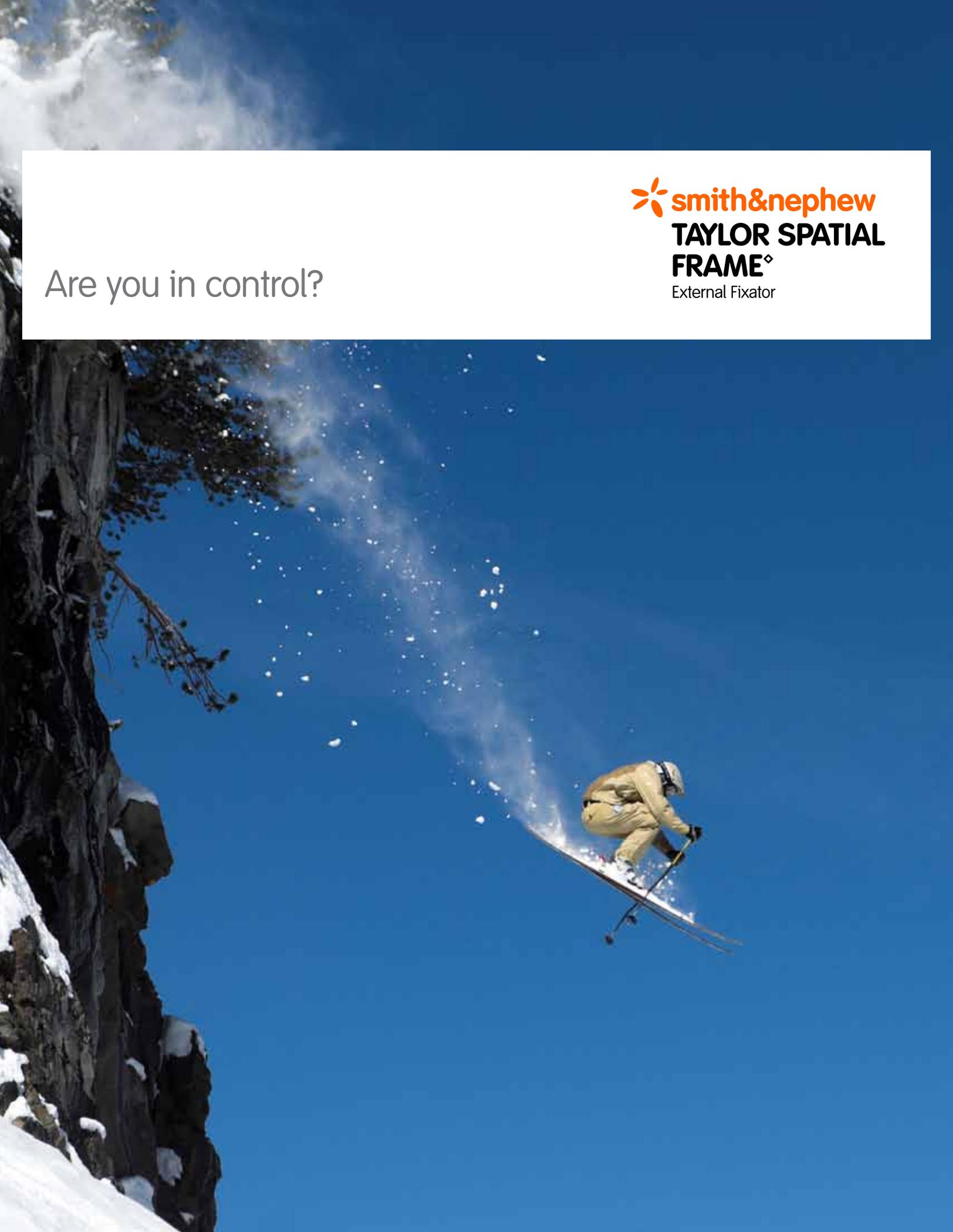


Are you in control?

 **smith&nephew**
TAYLOR SPATIAL
FRAME[◊]
External Fixator



Complicated fractures, like intra-articular fractures, are often made more difficult by edema, severe soft tissue contusions, skin loss or decreased vascularity. These problems make the fractures beneath these injuries even more challenging.



Q When can you take control?

- How do you **control the fracture** when damaged tissue needs to be left alone?
- Can you **avert complications** caused by infections, incisions and internal fixation?
- How can you regain control of malunion **without reoperating**?
- When can you even start talking about **weight bearing**?

A Sooner than you would expect

Complicated fractures can be difficult to treat with ORIF soon after the injury. Soft tissue complications often lead to delayed healing and gradual loss of reduction.¹ When further complications arise, like a contaminated wound, your definitive treatment may be delayed even further.

Circular fixation, which is minimally invasive to soft tissues, has proven to minimize these risks.² **Delayed definitive treatment, or early ORIF intervention, may extend hospital stays, delay return to weight-bearing or prevent a return to a normal active lifestyle.**



Discover control

As the world's most advanced, versatile and clinically proven circular fixator, the TAYLOR SPATIAL FRAME[®] system enables uncompromising stability, flexibility and precision. Or, in a word, *control*.



Soft tissue control

External and internal fixation methods yield similar clinical outcomes in fracture management. However, the severity of a fracture is judged based on both the soft-tissue injury and the fracture itself. *When the soft-tissue is at risk, you may tilt the treatment decision toward the use of circular fixation.*



Circular fixation will allow you to *start your definitive treatment right away*, even in the presence of soft-tissue complications. *By definition, external fixation enables percutaneous reduction, percutaneous fixation and is minimally invasive to soft tissues.* And, with definitive treatment started, it is still possible to safely reduce or treat any soft-tissue complications.^{3,4}



TAYLOR SPATIAL FRAME[◊] External Fixator



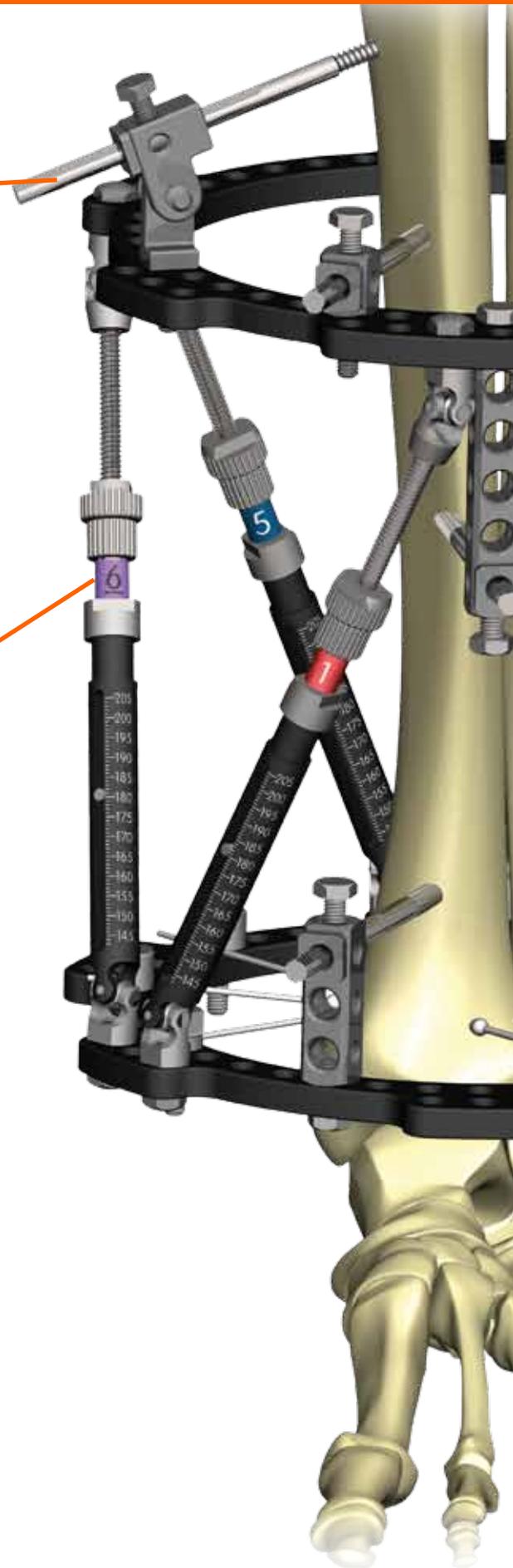
Half Pins

Half pins increase frame rigidity and can be inserted with a simple technique.



FAST FX[◊] Struts

FAST FX Struts allow for infinite reduction and adjustment without returning to the OR.





Circular frame

Circular frame constructs provide stability. A 7-hole Master Tab allows for adjustability of fixation components to customize the frame for each patient's needs.



Wires

Wires are minimally invasive and allow for stable fixation in small fragments. Tensioned interfragmentary fixation minimizes shear force allowing for early weight bearing.



Quality control

Near-immediate weight bearing is possible with a circular fixator, offering accelerated rates of fracture healing and increased bone strength.⁵ With circular fixation you and your patients often feel comfortable enough to weight bear well before your internal fixation patients weight bear.⁶

Fewer, and less invasive procedures are better for the patient and the healthcare system. Circular fixation, when used for complicated intra-articular fractures has been shown to shorten hospital stays and require fewer reoperations.

Parameter	Standard ORIF (N=40)	Circular fixation (N=43)
Mean total operative time (min)	183	170
Mean tourniquet time (min)	96	48
Mean blood loss (ml)	544	213
Hospital stay (days)	23.8 +/- 3.8	9.9 +/- 1.6
Return to pre-injury activity		
6 months	1/36	8/40
1 year	2/35	10/37
2 year	4/33	10/33
Total complications	37	16

J Bone Joint Surg Am.2006;88:2613-2623



Fine, ongoing corrections to the reduction are possible while wearing the fixator. Soft tissue can be treated, reduction tweaked, compression increased, distraction accomplished – whatever you deem best for the patient and the treatment of their entire injury. Infinite adjustment of the reduction is possible without ever heading back to the OR.

Control through experience

Smith & Nephew introduced the ILIZAROV™ External Fixator into the US orthopaedic community in the 1980's. That long-time “gold standard” for circular-frame devices helped establish our world leadership in limb restoration. We have since raised that standard with the development of the TAYLOR SPATIAL FRAME® system.



Control through education

Smith & Nephew has over 20 years of experience and success training surgeons on circular fixation methods. Each year, 150 more will complete our sold-out medical education courses.

Our sales representatives are also thoroughly trained and tested to support your use of the TAYLOR SPATIAL FRAME External Fixator at our state-of-the-art Sales Academy.

To learn more about training opportunities on TAYLOR SPATIAL FRAME go to www.orthomeetings.com.



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think.
again
Discover control.