



Idys™-TLIF

Designed for the spine



 **CLARIANCE**
innovation for spine surgery

Contents

Introduction	3
Features & benefits	4
Surgical technique	6
Product catalogue	14

Introduction

The Idys™-TLIF cage has been designed by a team with extensive experience in the development of spinal instrumentation. Made of PEEK, the Idys™-TLIF cage is specially designed for lumbar and lumbo-sacral interbody fusion via the transforaminal approach.

The design team focused on creating a TLIF cage suited to the anterior vertebral anatomy that would maintain disc height, restore lumbar lordosis and stabilize the treated segment. Thus, Idys™-TLIF creates the most favorable conditions to optimize bone fusion.

Its complete and ergonomic instrumentation meets the spine surgeon's need for reliability, safety and ease of use during surgical practice.

Indications:

Lumbar degenerative discopathies and instabilities

Grade I or II spondylolisthesis, with or without stenosis

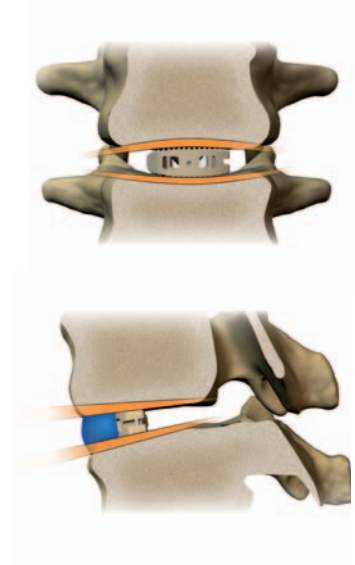
Pseudarthrosis or fusion failure

Caution : The use of the Idys™-TLIF cage must be systematically associated with a posterior fixation device (Erisma™-LP). For greater convenience, the pedicle screws can be inserted before or after the Idys™-TLIF is implanted.

Features & Benefits

Anatomical shape

› The shape of the Idys™-TLIF cage is perfectly adapted to the anterior anatomy of the vertebral endplates. This shape allows restoration of the chosen disc height as well as lumbar lordosis of the treated segment. Close contact with the vertebral endplates provides effective integration and excellent stability of the implant within the intervertebral space.



Grafting space maximized

› The size of the two fusion chambers is optimized to offer maximal contact between vertebral endplates and grafts. Bone fusion is thereby promoted and fusion spaces are larger. The anterior and posterior side holes enable good graft vascularization.



Self-distracting tip

› The self-distracting tip of the Idys™-TLIF cage allows progressive distraction of the vertebral endplates in order to facilitate insertion and offer excellent penetration of the cage in the intervertebral space.



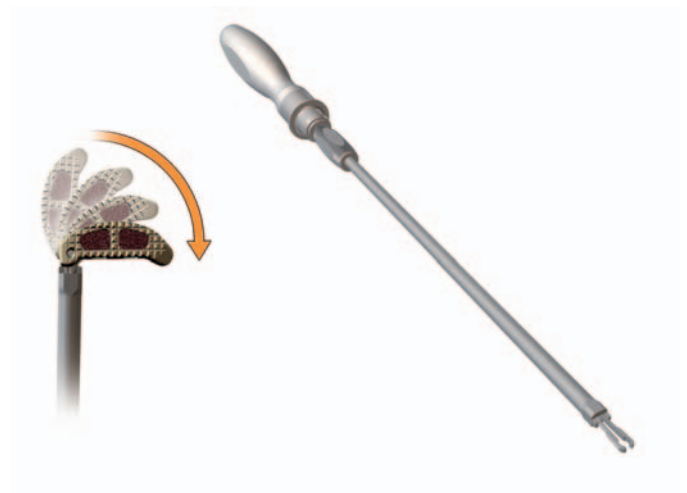
X-ray markers (Tantalum)

› X-ray markers allow verification of the cage position during surgery and postoperative clinical follow-up. Fusion can be assessed and controlled during clinical follow-up thanks to the radiolucency of the PEEK material.



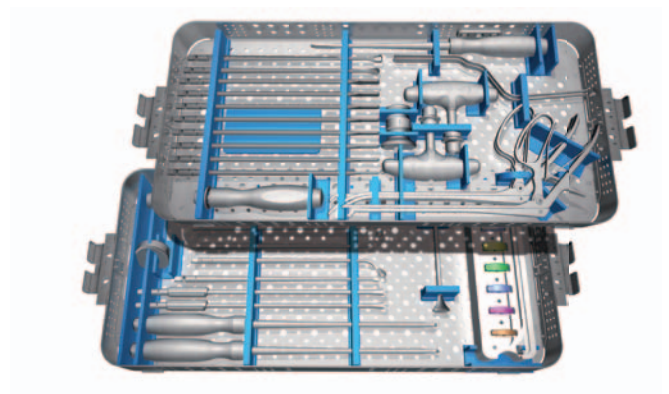
Specific cage inserter

› The cage inserter allows the cage to be inserted straight into the intervertebral space and then guides the cage in rotation for efficient and precise final positioning.



Ergonomic instrumentation

› The simple, intuitive and ergonomic instrumentation of the Idys™-TLIF cage guarantees accurate, quick and safe maneuvers to surgeons.



Surgical Technique

- 1 Disc exposure
- 2 Distraction
- 3 Discectomy
- 4 Endplate preparation
- 5 Implant sizing
- 6 Implant preparation
- 7 Implant insertion
- 8 Final positioning
- 9 Supplementary posterior fixation

In line with all necessary safety protocols, the patient is positioned on the operating table in the prone position. The final positioning of the patient and surgical approach are based on known techniques, routinely used by surgeons.

Disc exposure

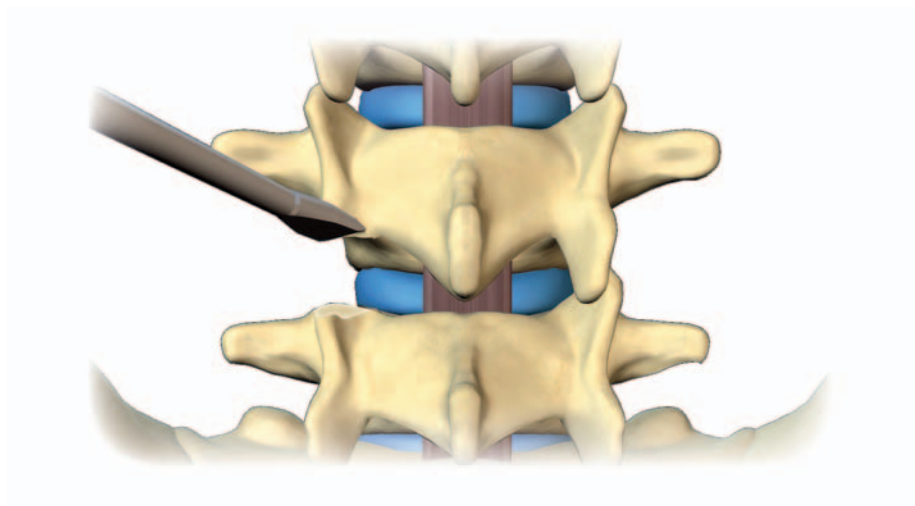
1

Transforaminal access to the disc space is obtained by performing a unilateral facetectomy on the cage insertion side, using the **osteotome**.

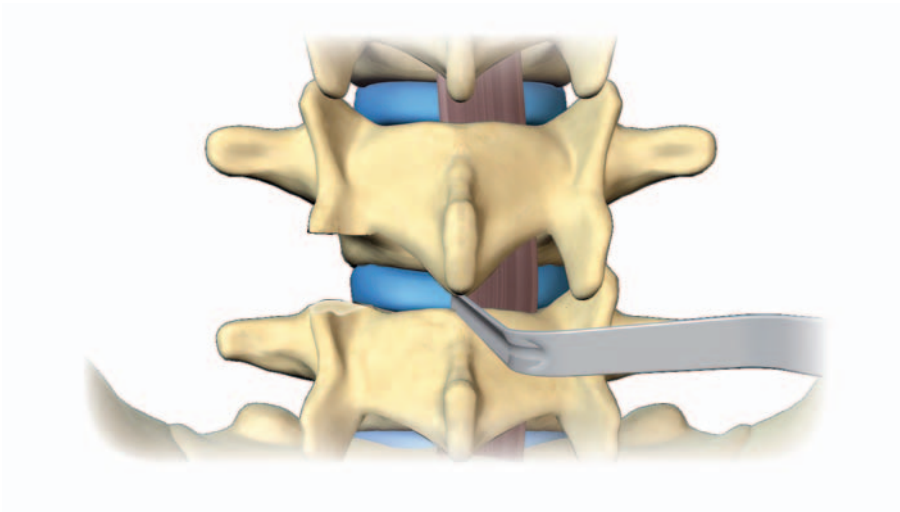
Resection must be sufficient to allow access of the instruments and insertion of the cage into the disc space.



04705010 OSTEOTOME



The **nerve root retractor** is used to protect the surrounding nerve structures throughout the surgical procedure.



04781006
NERVE ROOT RETRACTOR

Distraction

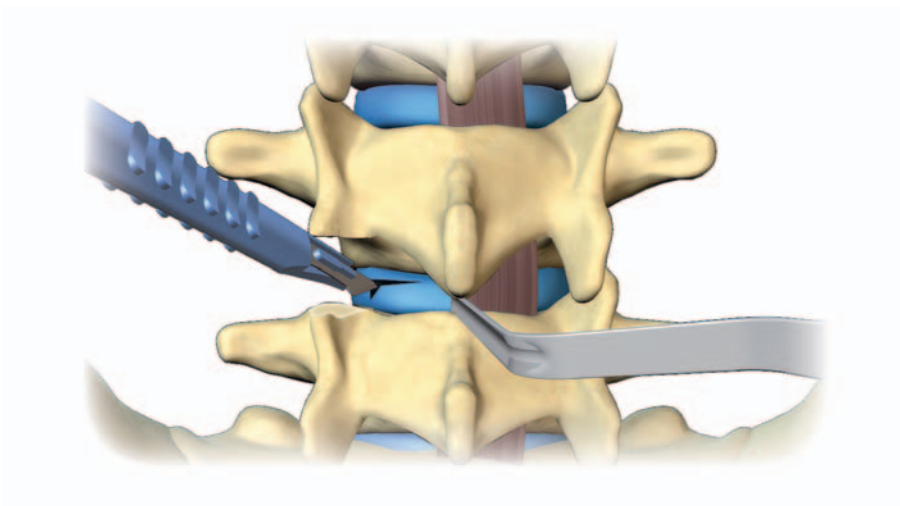
2

Progressive distraction tension is applied in accordance with the surgeon's habits and preferences. This maneuver temporarily opens the posterior disc space and promotes increased exposure for discectomy, decompression and delivery of the implant.

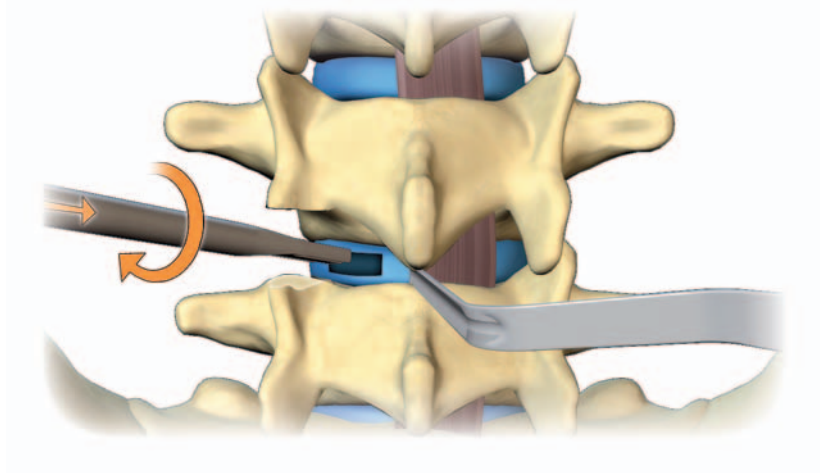
Discectomy

3

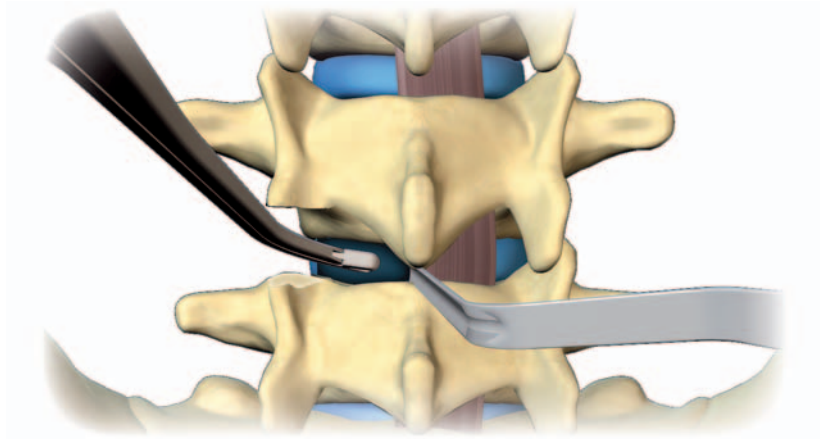
A window is created in the intervertebral disc using a scalpel.



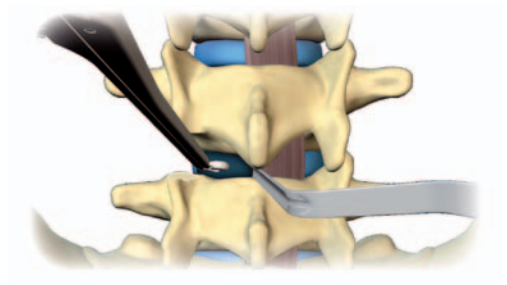
Shavers are used in rotation to start the discectomy and gradually restore the disc height. Shavers come in sequential heights from 6mm to 14mm, increasing in 1 mm increments.



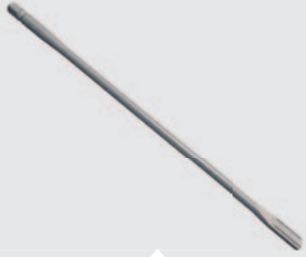
The disc material is removed using the **disc rongeur 45°**. The **curved disc rongeur** is used to extend the discectomy on opposite side of the disc.



i *When possible, the anterior and lateral walls of the annulus are preserved in order to provide additional stability for the Idys™-TLIF cage.*



HANDLES



047070XX SHAVER



06708002
CURVED DISC RONGEUR

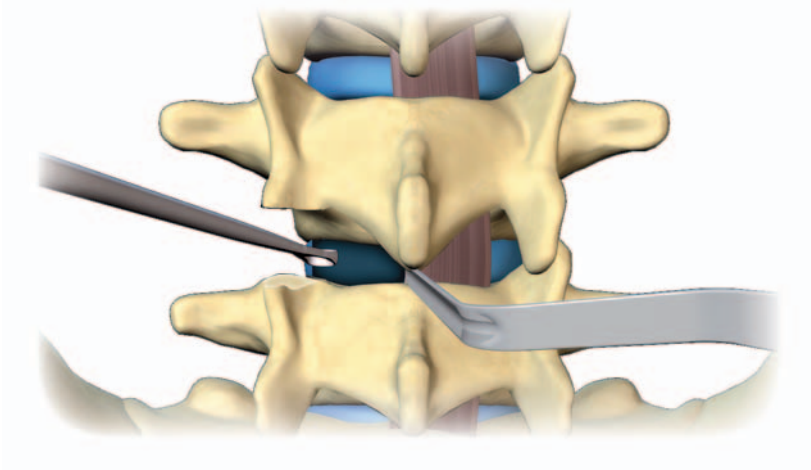


06708003 DISC RONGEUR 45°

Endplate preparation

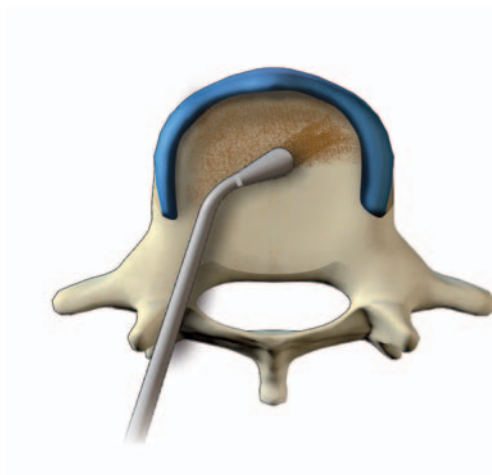
4

The endplates are prepared using the **curette** and the **cup curette** to remove the remaining layers of the entire cartilaginous endplates and expose bleeding bone. The **curved curette**, the **right cup curette** and the **left cup curette** are used to facilitate removal of material in the distant lateral disc area.

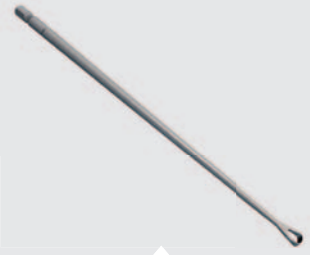


Optimizing endplate preparation

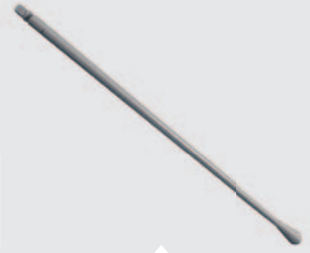
To promote fusion of the intervertebral space, careful scraping of the vertebral endplate is crucial. Specific straight and curved curettes contribute to making this step as efficient as possible.



Thorough cleaning of the endplates is important for the vascular supply of the bone graft. The structural integrity of the endplates must be preserved to allow for structural support of the cage.



04704015 CURETTE



04704005 CUP CURETTE



06704015 CURVED CURETTE



06704105
RIGHT CUP CURETTE



06704205
LEFT CUP CURETTE

Implant sizing

5



The height of the final implant is determined by selecting the trial that restores the desired disc height and lumbar lordosis of the treated segment.

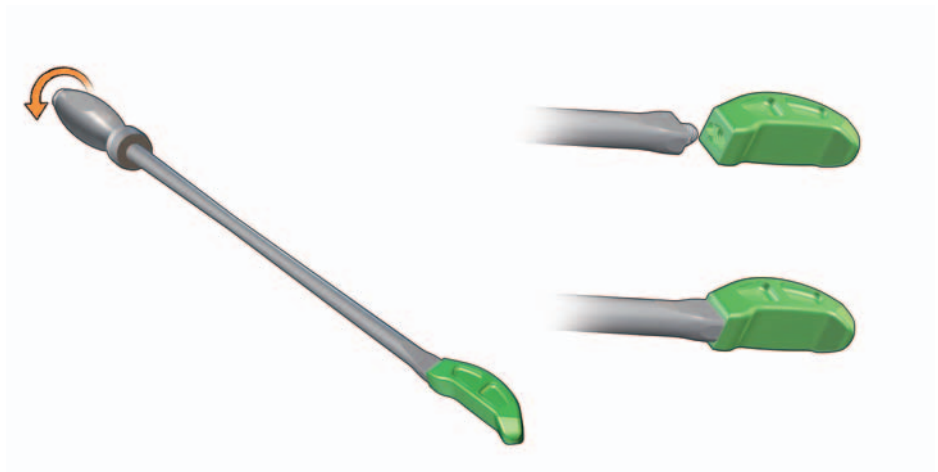
The **trial** is connected and secured to the **TLIF trial inserter** by turning the locking knob clockwise.



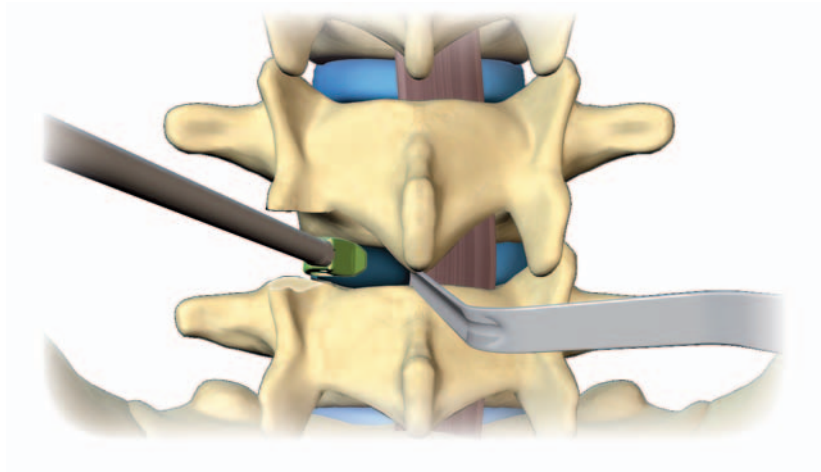
067144XX TLIF TRIAL



06715003 TLIF TRIAL INSERTER




The trial is then inserted in the intervertebral space, and placed as close as possible to the final position. The trial is not dissociated from the TLIF trial inserter.



Distraction is momentarily released and an X-ray check is performed to verify the trial position and validate the height of the final implant.
Distraction is re-established and the trial is removed using the **slap hammer**.

Implant preparation

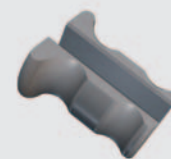
6

 *It is important to completely fill both implant cavities in order to ensure optimal contact between the graft material and the vertebral endplates.*

The selected cage is connected to the **TLIF cage holder** and placed into the **TLIF filling block**.



The **TLIF graft impactor** is used to firmly pack the graft into the implant cavities.



04762000 SLAP HAMMER



06715002 TLIF CAGE INSERTER



06717002
TLIF FILLING BLOCK



06761001
TLIF GRAFT IMPACTOR

Implant insertion

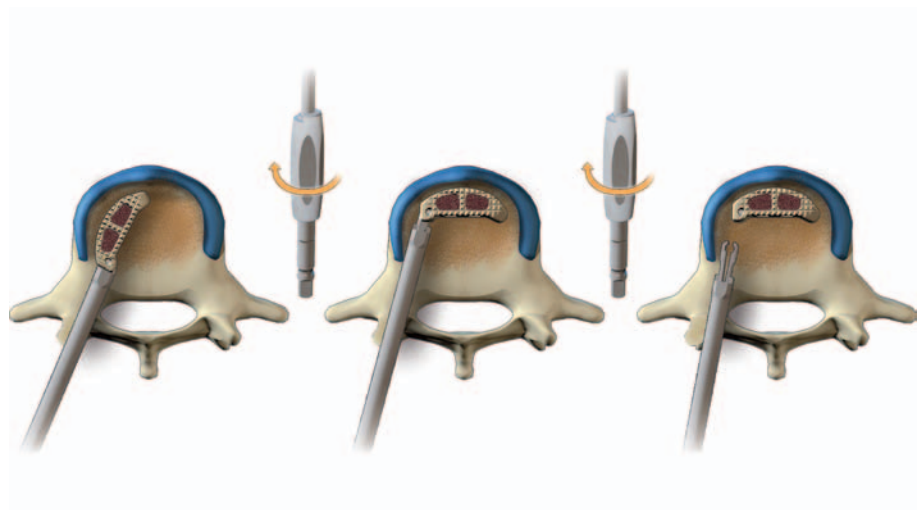
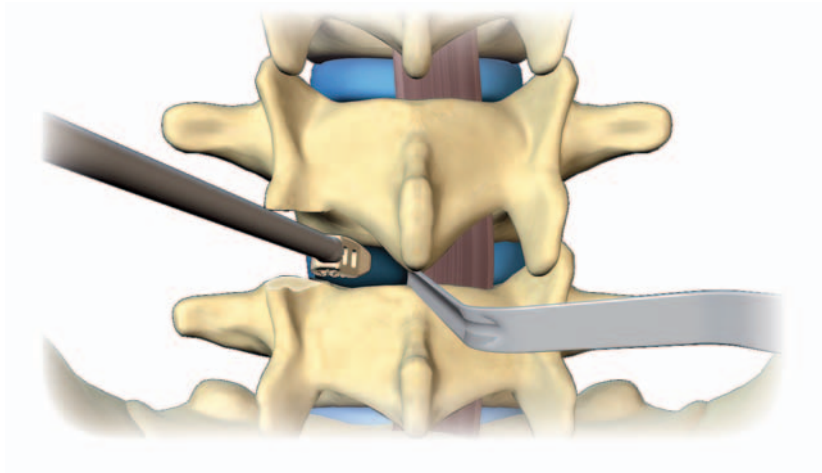
7

The cage is first inserted straight into the intervertebral space. Then, the locking knob located on the **TLIF cage inserter** is turned anticlockwise to release the cage in rotation. Light impactions allow oblique orientation of the cage. The cage can also be pushed sideways to be centered.

An X-ray check is performed and the cage is disconnected.



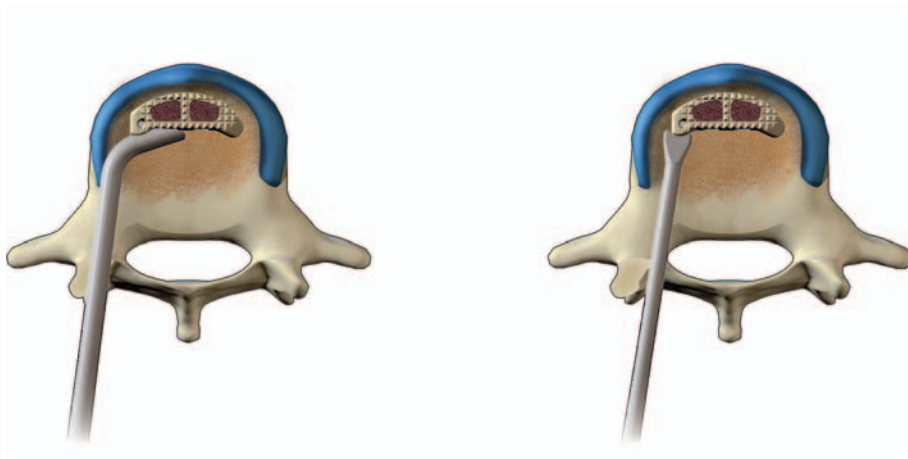
06715002 TLIF CAGE INSERTER



Final positioning

8

The cage can be pushed into its final position using the **straight TLIF cage pusher** and the **curved TLIF cage pusher**.



Additional graft can be inserted at the back of the cage.
Distraction is released and a final X-ray check is performed.



06716003
CURVED TLIF CAGE PUSHER

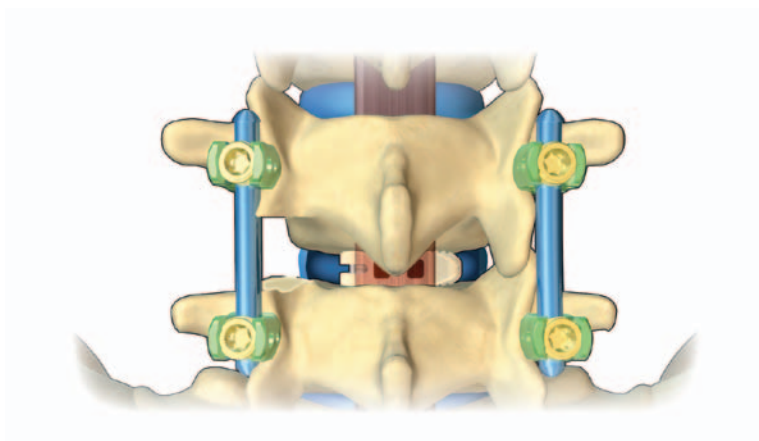


06716002
STRAIGHT TLIF CAGE PUSHER

Supplementary posterior fixation

9

Posterior fixation (Erisma™-LP) is required to place the treated segment under compression and to enhance the stability of the Idys™-TLIF cage.



Product Catalogue



OSTEOTOME

04705010



NERVE ROOT RETRACTOR

04781006



SHAVER

Ø 6mm	04707006
Ø 8mm	04707008
Ø 9mm	04707009
Ø 10mm	04707010
Ø 11mm	04707011
Ø 12mm	04707012
Ø 13mm	04707013
Ø 14mm	04707014



CURVED DISC RONGEUR

06708002



DISC RONGEUR 45° CUT

06708003



CURETTE

04704015



CUP CURETTE

04704005



CURVED CURETTE

06704015



RIGHT CUP CURETTE

06704105



LEFT CUP CURETTE 06704205



TLIF TRIAL INSERTER 06715003



TLIF CAGE INSERTER 06715002



SLAP HAMMER 04762000



TLIF FILLING BLOCK 06717002



TLIF GRAFT IMPACTOR 06761001



TLIF CAGE PUSHER
Straight 06716002
Curved 06716003

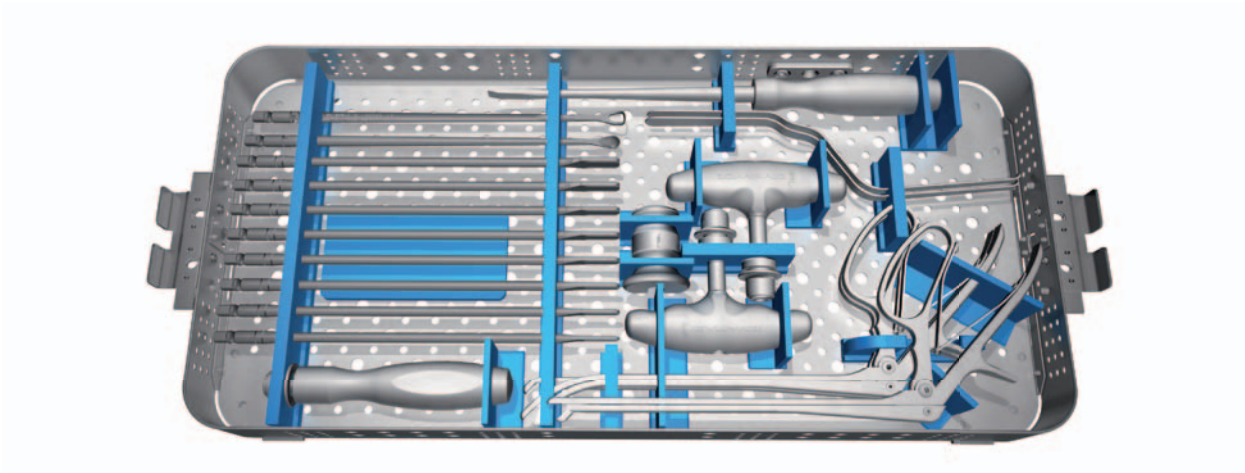


FIXED CYLINDRICAL HANDLE 99782003

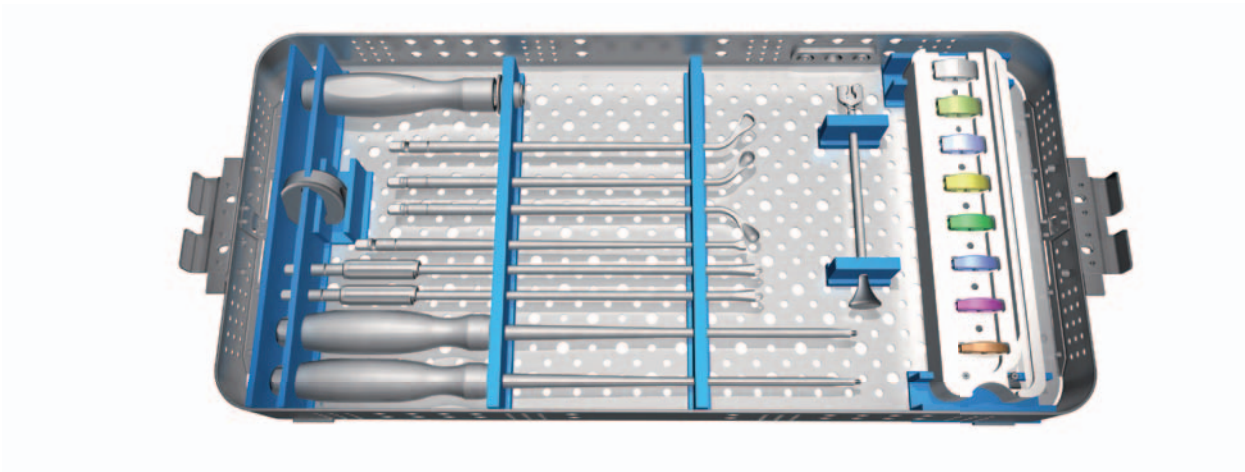


FIXED T-HANDLE 99781001

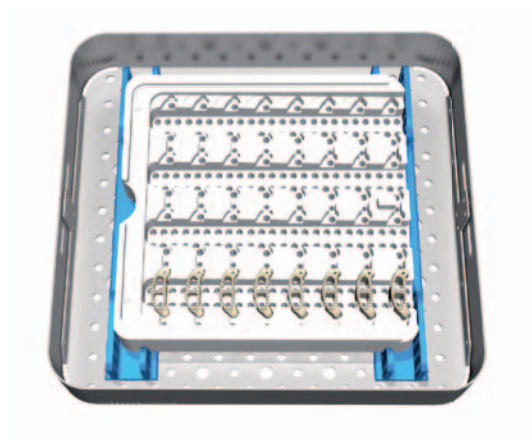
Product Catalogue



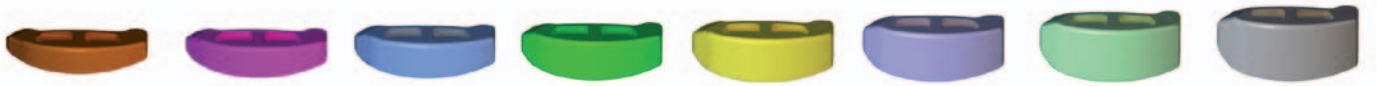
SHARED TLIF, PLIF, PTLIF INSTRUMENTS TRAY 04990010



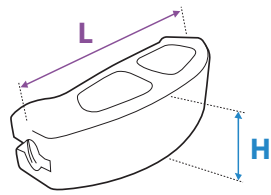
TLIF INSTRUMENTS TRAY 04990012



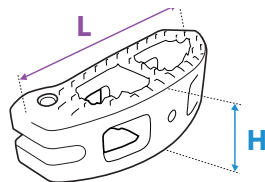
PLIF IMPLANTS TRAY 04990022



TRIALS	L 29 MM
H 07 mm	06714407
H 08 mm	06714408
H 09 mm	06714409
H 10 mm	06714410
H 11 mm	06714411
H 12 mm	06714412
H 13 mm	06714413
H 14 mm	06714414



TLIF CAGE	L 29 MM
H 07 mm	06532907
H 08 mm	06532908
H 09 mm	06532909
H 10 mm	06532910
H 11 mm	06532911
H 12 mm	06532912
H 13 mm	06532913
H 14 mm	06532914



The surgical technique shown is for illustrative purposes only. The technique actually employed in each case will always depend upon the medical judgment of the surgeon exercised before and during surgery as to the best mode of treatment for each patient. It is recommended to see the package insert for the complete list of indications, warnings, precautions, and other medical information.

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