



Peer-reviewed Published Evidence

Extra-Osseous TaloTarsal Stabilization using HyProCure®: Preliminary Clinical Outcomes of a Prospective Case Series

Journal of Foot and Ankle Surgery, Volume 52, Issue 2, Pages 195-202, March 2013

Multi-centered prospective study with subjective outcomes measured with the Maryland Foot Score assessment. Results included 36.97% reduction in foot pain, 14.39% increase in foot functional activities and 29.49% improvement in foot. Implant removal rate was 4.35%.

Extra-Osseous TaloTarsal Stabilization using HyProCure® in Adults: A 5-Year Retrospective Follow-up

Journal of Foot and Ankle Surgery, Volume 51, Issue 1, Pages 23-29, January 2012

A review of 83 adult patients representing 117 feet who underwent EOTTS as a stand-alone procedure. The average follow-up was 51 months. The average Maryland Foot Score was 88/100. The study showed a permanent removal rate of HyProCure® of less than 6%. No significant, long lasting complications were reported.

Surgical Treatment of Hyperpronation Using an Extra-Osseous TaloTarsal Stabilization Device: Radiographic Outcomes in Adult Patients

Journal of Foot and Ankle Surgery, Volume 51, Issue 5, Pages 548-555, September 2012

HyProCure® placement resulted in normalization of pathologic T2M and TD angles. Angles that were normal pre-operative remained normal. EOTTS with HyProCure® was effective in controlling motion in the desired planes without causing overcorrection or blocking in other planes.



The Effect of HyProCure® on Tarsal Tunnel Compartment Pressures in Hyperpronating Feet

Journal of Foot and Ankle Surgery, Volume 50, Issue 1, Pages 44-49, January 2011

Cadaveric based study showing a 34% reduction in Tarsal Tunnel and a 38% reduction in porta pedis pressures following EOTTS with HyProCure®.

Effect of Extra-Osseous TaloTarsal Stabilization on Posterior Tibial Tendon Strain in Hyperpronating Feet

Journal of Foot and Ankle Surgery, Volume 50, Issue 6, Pages 676-681, November 2011

Cadaveric based study showing 51% decreased strain on the posterior tibial tendon following EOTTS with HyProCure®.



For study abstracts, product information, interactive online training and more, visit

www.GraMedica.com

© 2013 GraMedica® HYP PP/REV02.21.13



Peer-reviewed Published Evidence

Evaluating Plantar Fascia Strain in Hyperpronating Cadaveric Feet Following an Extra-Osseous TaloTarsal Stabilization Procedure

Journal of Foot and Ankle Surgery, Volume 50, Issue 6, Pages 682-686, November 2011

Cadaveric based study showing **33%** decreased strain on the plantar fascia following EOTTS with *HyProCure*[®].

Stabilization of Joint Forces of the Subtalar Complex via *HyProCure*[®]

Journal of the American Podiatric Medical Association, Volume 101, No. 5, 390-399, Sept/Oct 2011

Mathematical proof that *HyProCure*[®] decreases forces acting on the middle/anterior talocalcaneal facets and stabilizes those forces on the posterior talocalcaneal joint.

Radiographic Evaluation of Navicular Position in the Sagittal Plane – Correction Following an Extra-Osseous TaloTarsal Stabilization Procedure

Journal of Foot and Ankle Surgery, Volume 50, Issue 5, Pages 551-557, September 2011

Retrospective analysis showing restoration of navicular height by **26%** following EOTTS with *HyProCure*[®].

Effect of Extra-Osseous TaloTarsal Stabilization on Posterior Tibial Nerve Strain in Hyperpronating Feet: A Cadaveric Evaluation

Journal of Foot and Ankle Surgery, Volume 50, Issue 6, Pages 672-675, November 2011

Cadaveric based study showing **43%** decreased strain on the tibialis posterior nerve following EOTTS with *HyProCure*[®].

Extra-Osseous Stabilization Devices: A New Classification System

Journal of Foot and Ankle Surgery, Volume 51, Issue 5, Pages 613-619, September 2012

Stabilization at the cruciate pivot point of triplanar talotarsal motion is the ideal way to stabilize the TTM. Type I (subtalar arthroereisis) devices function by blocking/limiting talar motion. Type II devices are anatomically designed to restore the normal amount of triplane talotarsal motion. This key difference is what contributes to the improved success of Type II devices.

Extra-Osseous TaloTarsal Stabilization with *HyProCure*[®] – Radiographic Outcomes in Adult Patients

Journal of Foot and Ankle Surgery, Volume 51, Issue 5, Pages 548-555, September 2012

Retrospective analysis showing normalization of the talar second metatarsal angle on an AP view proving transverse plane correction. Also, there was normalization of the talar declination angle on the lateral radiograph proving sagittal plane correction. Since talotarsal motion is triplane this shows the ability of triplane correction following EOTTS with *HyProCure*[®].



For study abstracts, product information, interactive online training and more, visit

www.GraMedica.com

© 2013 GraMedica® HYP PP/REV02.21.13