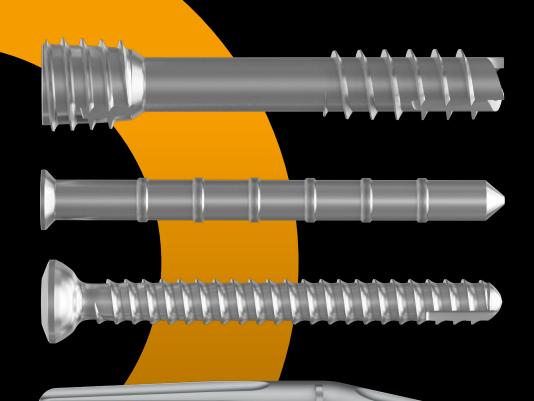


THE NEW STANDARD OF IMPLANTS!

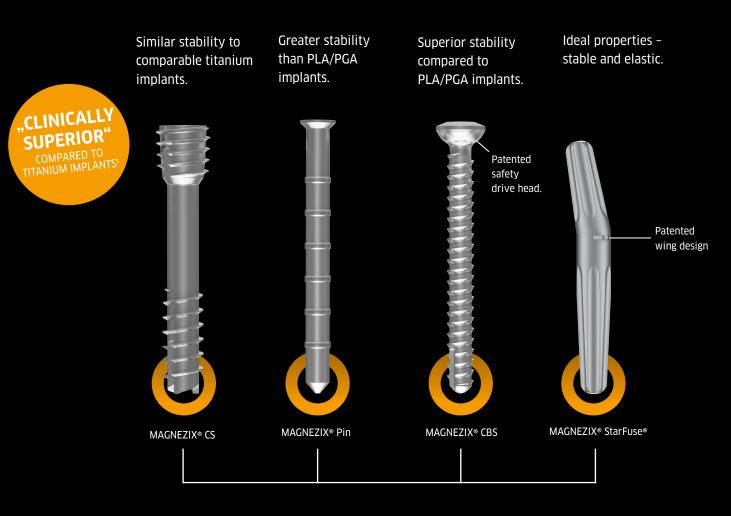
MAGNEZIX® PRODUCT OVERVIEW



Intelligent innovations for a better life. www.syntellix.com



ADVANTAGES AT A GLANCE



Osteoconductive properties. Metallic and transformable. Reduced risk of infection.

No remaining foreign material. Prevents "stress shielding". Suitable for MRI and CT diagnostics. Virtually no radiological artifacts.

Free of nickel, cobalt, chrome, and aluminium. Excellent biocompatibility, no known allergies.



¹ Reference: Klauser H. (2018): Internal fixation of three-dimensional distal metatarsal I osteotomies in the treatment of hallux valgus deformities using biodegradable magnesium screws in comparison to titanium screws; Foot and Ankle Surgery, DOI: 10.1016/j.fas.2018.02.005.



THE NEW STANDARD OF IMPLANTS

METAL THAT TURNS INTO BONE - MAGNEZIX®

Innovation has no end: MAGNEZIX[®], the worldwide unique material and basis for simultaneously stable and transformable magnesium-based metal implants, is becoming increasingly versatile. In addition to the well-proven compression screw CS, the unrivalled Pin and the versatile cortical screw CBS, the MAGNEZIX[®] StarFuse[®] (PIP arthrodesis) and the MAGNEZIX[®] CS^c 4.8 as the largest dimension are now also available.

No compromises: MAGNEZIX[®] implants are metallic and stable, and therefore much more resilient than conventional polymer implants based on PGA or PLA. And unlike conventional metal screws or wires, they do not have to be removed again because they dissolve, are rebuilt by the body and form the basis for new mineralized bone substance.

The ideal solution: MAGNEZIX[®] implants are suitable for indications that require a temporary fixation of the bone, but for which remaining material or a surgical removal of the metal following the healing process is not desirable.

MAGNEZIX® implants offer you:

Stability: MAGNEZIX[®] products are metallic and offer significantly greater stability than conventional resorbable implants.

Transformation: Implants made of MAGNEZIX[®] are rebuilt in the body and replaced by endogenous bone tissue.

Osteoconductive properties: Magnesium stimulates bone growth.

Inhibition of infection: The degradation of magnesium creates an alkaline, anti-bacterial environment.

Compatibility: MAGNEZIX[®] has an excellent biocompatibility, no allergies are known for the components of the alloy.

THE MAGNEZIX®-PRINCIPLE

First healing, then dissolving! MAGNEZIX[®] implants are metallically stable and are transformed into endogenous bone tissue, setting new standards for implants.

THIS METAL SCREW TURNS INTO BONE

MAGNEZIX® CS/CS^c

INTENDED USE

The MAGNEZIX[®] CS/CS^c is a bioabsorbable compression screw that is used to restore the bone continuity after fractures and osteotomies (osteosynthesis) as well as for treatment of pseudarthroses. Specifically, the MAGNEZIX[®] CS/CS^c is intended to achieve anatomical retention of bone sections that have been joined together by surgical splinting following prior reduction until the bone has healed. The implant is designed for single use.

INDICATIONS

The indications for MAGNEZIX[®] CS/CS^c implants are reconstruction procedures after fractures and malalignment in the human skeleton. The surgeon must determine the degree of injury and the scope of the required surgical procedure and then select the correct surgical procedure and the appropriate implant. This is particularly important when using bioabsorbable MAGNEZIX[®] implants. The surgeon is always responsible for the decision to use these implants.

Depending on the chosen size, the MAGNEZIX[®] CS/CS^c can be used as a bone screw for children, adolescents or adults for the adaptation-capable or exercise-capable fixation of bones and bony fragments.

MAGNEZIX[®] CS 2.0, 2.7, 3.2:

- ➔ Intra- and extraarticular fractures of small bones and bony fragments
- ➔ Arthrodeses, osteotomies and pseudarthroses of small bones and joints
- → Small bony ligament and tendon ruptures
- ➔ Similar indications

MAGNEZIX® CS 2.0:

- → Phalangeal and metacarpal bones
- → Processus styloideus radii et ulnae
- → Capitulum humeri and caput radii
- ➔ Osteochondrosis dissecans
- ➔ Similar indications

MAGNEZIX® CS 2.7, 3.2:

- → Carpal, metacarpal, tarsal and metatarsal bones
- ➔ Processus styloideus radii et ulnae
- → Capitulum humeri and caput radii
- ➔ Epicondylus humeri
- ➔ Hallux valgus corrections
- ➔ Similar indications

MAGNEZIX® CSc 4.8:

- ➔ Intra- and extraarticular fractures of small and medium-sized bones and bony fragments
- ➔ Arthrodeses, osteotomies and pseudarthroses of small- and medium-sized bones and small joints
- ➔ Similar indications at distal tibia, calcaneus, talus and metatarsus
- ➔ Re-fixiation of bony fragments also on distal femur and proximal tibia

CONTRAINDICATIONS

MAGNEZIX[®] implants are contraindicated (absolute contraindication) in specific clinical situations or they should only be planned and used after careful consideration (relative contraindication).

Absolute contraindications

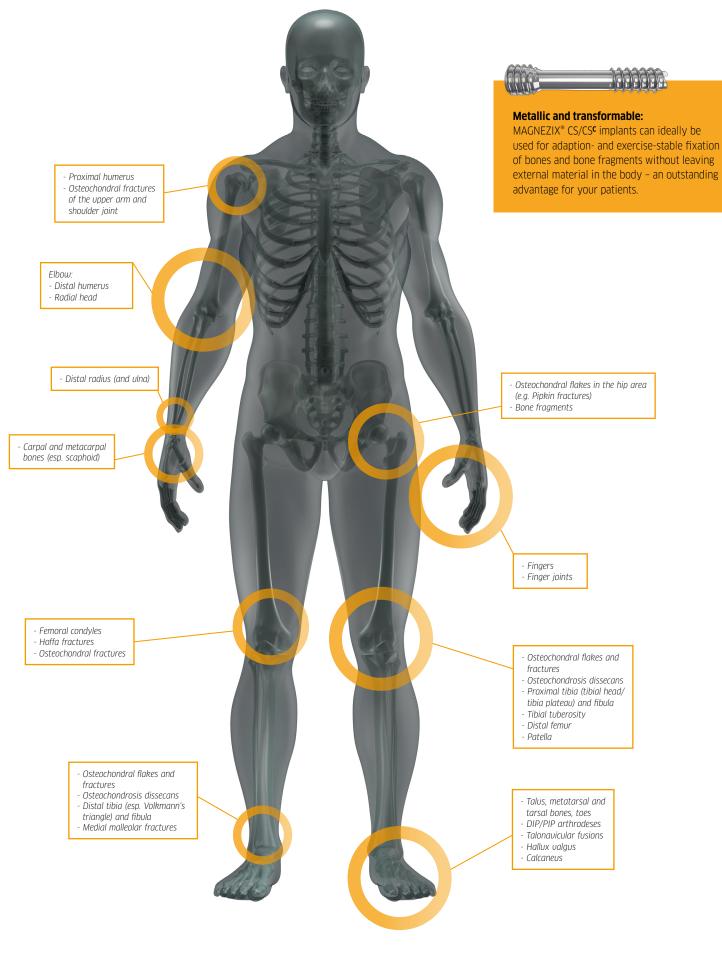
- Insufficient or avascular bone mass for anchorage of the implant, except osteochondral fractures and dissecates
- ➔ Confirmation or suspected septic infectious surgical site
- ➔ Application in the area of the epiphyseal plates
- ➔ Load-bearing stable osteosynthesis
- ➔ Radioscaphoid and/or midcarpal arthrosis
- ➔ Arthrodeses of medium-sized and large joints
- ➔ Applications on the spinal column

Relative contraindications

- → Options for conservative treatment
- ➔ No options for adequate postoperative treatment (e.g. temporary strain relief)
- ➔ Uncooperative patient or patient with restricted intellectual capacity
- ➔ Alcohol, nicotine and/or drug abuse
- ➔ Poor skin/soft tissue conditions
- ➔ Osteoporosis
- → Acute sepsis
- ➔ Epilepsy



Application examples

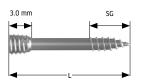


MAGNEZIX[®] CS

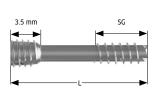
MAGNEZIX[®] CS/CS^C **PRODUCT OVERVIEW**

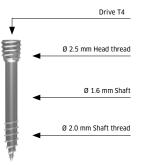
DIMENSIONS

MAGNEZIX® CS 2.0



MAGNEZIX® CS 2.7









SG

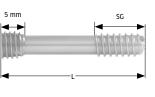
11111

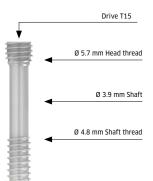
MAGNEZIX[®] CS 3.2

3.5 mm

. 4

MAGNEZIX® CSC 4.8





| Art. No. | Threaded shaft length | Screw length | Art. No. | Thre shaf |
|----------------------|--------------------------|-----------------|----------|--------------|
| | SG [mm] | L [mm] | | SG (r |
| 1020.008 | 4 | 8 | 1027.010 | |
| 1020.008 | 4 | 10 | 1027.010 | |
| 1020.012 | 4 | 12 | 1027.014 | |
| 1020.014 | 5 | 14 | 1027.016 | |
| 1020.016 1020.018 | 5 | 16 18 | 1027.018 | |
| 1020.010 | 6 | 20 | 1027.022 | |
| 1020.022 | 6 | 22 | 1027.024 | |
| 1020.024 | 6 | 24 | 1027.026 | |
| | | | 1027.028 | |

| Art. No. | Threaded shaft length SG [mm] | Screw length L [mm] |
|----------|-------------------------------------|---------------------------|
| | | |
| 1027.010 | 4 | 10 |
| 1027.012 | 5 | 12 |
| 1027.014 | 5 | 14 |
| 1027.016 | 7 | 16 |
| 1027.018 | 7 | 18 |
| 1027.020 | 7 | 20 |
| 1027.022 | 7 | 22 |
| 1027.024 | 7 | 24 |
| 1027.026 | 7 | 26 |
| 1027.028 | 7 | 28 |
| 1027.030 | 7 | 30 |
| 1027.032 | 9 | 32 |
| 1027.034 | 9 | 34 |
| | | |

| Art. No. | Threaded shaft length SG [mm] | Screw length L [mm] | Art. No. | Threaded- shaft length SG [mm] | Screw length L [mm] |
|----------|-------------------------------------|---------------------------|----------|--------------------------------------|---------------------------|
| | | | | | |
| 1032.010 | 4 | 10 | 2048.014 | 6 | 14 |
| 1032.012 | 5 | 12 | 2048.016 | 6 | 16 |
| 1032.014 | 5 | 14 | 2048.018 | 6 | 18 |
| 1032.016 | 7 | 16 | 2048.020 | 6 | 20 |
| 1032.018 | 7 | 18 | 2048.022 | 8 | 22 |
| 1032.020 | 7 | 20 | 2048.024 | 8 | 24 |
| 1032.022 | 7 | 22 | 2048.026 | 8 | 26 |
| 1032.024 | 7 | 24 | 2048.028 | 8 | 28 |
| 1032.026 | 7 | 26 | 2048.030 | 10 | 30 |
| 1032.028 | 7 | 28 | 2048.032 | 10 | 32 |
| 1032.030 | 7 | 30 | 2048.034 | 10 | 34 |
| 1032.032 | 9 | 32 | 2048.036 | 10 | 36 |
| 1032.034 | 9 | 34 | 2048.038 | 14 | 38 |
| 1032.036 | 9 | 36 | 2048.040 | 14 | 40 |
| 1032.038 | 9 | 38 | 2048.042 | 14 | 42 |
| 1032.040 | 9 | 40 | 2048.044 | 14 | 44 |
| | | | 2048.046 | 14 | 46 |
| | | | 2048.048 | 14 | 48 |
| | | | 2048.050 | 14 | 50 |
| | | | 2048.055 | 20 | 55 |
| | | | 2048.060 | 20 | 60 |
| | | | 2048.065 | 20 | 65 |

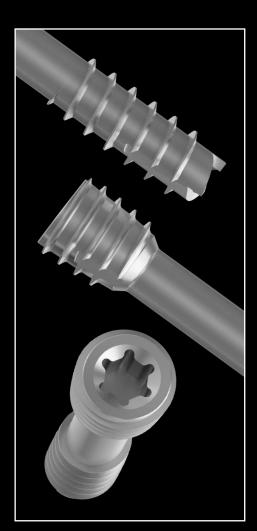
2048.070

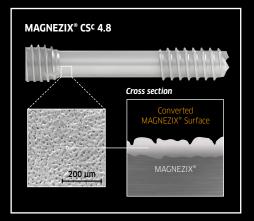
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ADVANTAGES AND FEATURES MAGNEZIX® CS/CS^C IMPLANTS





Unique, bioabsorbable magnesium alloy

The use of MAGNEZIX[®] implants makes any subsequent implant removal unnecessary, and moreover, it supports the osseous healing process. MAGNEZIX[®] is bioabsorbable and biocompatible.

Self-tapping screw tip

The self-tapping properties of the screw tip reduce the operation time and simplify the surgical application technique.

Cannulated screw

The screw is cannulated (hollow) to allow controlled positioning of the screw using the guide wire. This feature supports minimal invasive surgery.

Self-tapping head thread

The self-tapping design of the screw head simplifies insertion and countersinking of the screw head.

Different thread pitches

The threads of the head and the shaft have different thread pitches. This adapted design of the screw generates compressive forces and supports the intended inter-fragmentary compression.

Self-holding screwdriver

The screw head is equipped with a T4/T7/T8/T15 (ISO 10664-4/7/8/15). The advantages of this ISO standardized technology are:

- → Enlarged contact area
- → Improved self-retaining mechanism
- → Improved torque transmission

Innovative surface design MAGNEZIX® CS^c 4.8

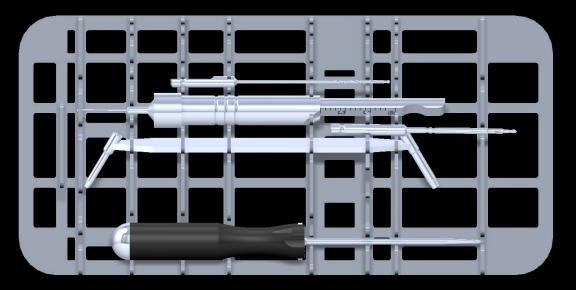
MAGNEZIX[®] CS^c 4.8 includes a highly innovative modification of the implant surface. This deliberately delays the transformation process and additionally ensures the stability required during the healing process.

WARNINGS

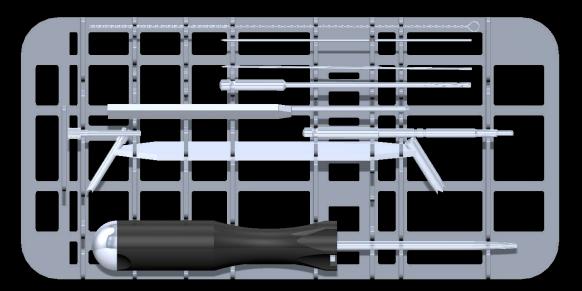
In the case of concurrent use of third party implants it must borne in mind that steel, titanium and cobalt-chromium alloys may not remain in direct contact with a MAGNEZIX* implant at the intervention site (i.e. no physical contact of implants). Since the implants are designed for single use only, reuse of MAGNEZIX* implant devices is grossly negligent and can result in an increased risk of infection and loss in implant stability. In general, re-steri-lization alters the implant's functionality in an unpredictable way.



MAGNEZIX® CS product overview instruments



MAGNEZIX[®] CS 2.0



MAGNEZIX[®] CS 2.7 (LIKE CS 3.2)

INSTRUMENTS MAGNEZIX® CS/CS^c



CS Ø 2.7 mm 8027.002 CS^c Ø 4.8 mm 8048.002

PRODUCT OVERVIEW

| | Art. No. | Description | | |
|------------|----------------------|--|---------------|------|
| | 6020.104 | Screwdriver T4, One-Piece Handle, consisting of: | | |
| | | 9099.001 One-Piece Handle for Screwdriver, 9020.015 Screwdriver btlade T4 | | |
| | 6027.107 | Screwdriver T7, One-Piece Handle, Ø 1.1 mm cannulated, consisting of: | | |
| | | 9099.001 One-Piece Handle for Screwdriver, 9027.015 Screwdriver blade T7 | | |
| | 6032.108 | Srcewdriver T8, One-Piece Handle Ø 1.3 mm cannulated, consisting of: | | |
| | | 9099.001 One-Piece Handle for Screwdriver: 9032.015 Screwdriver blade T8 | | |
| | 6020.204 | Screwdriver T4, Multi-Part Handle, consisting of: | | |
| | | 9099.002 Multi-Part Handle for Screwdriver, 9020.015 Screwdriver blade T4 | | |
| | 6027.207 | Screwdriver T7, Multi-Part Handle Ø 1.1 mm cannulated, consisting of: | | |
| | | 9099.002 Multi-Part Handle for Screwdriver, 9027.015 Screwdriver blade T7 | | |
| | 6032.208 | Screwdriver T8, Multi-Part Handle Ø 1.3 mm cannulated, consisting of: 9099.002 Multi-Part Handle for Screwdriver, 9032.015 Screwdriver blade T8 | | |
| | 9099.003 | Screwdriver Handle with Quick Coupling | | |
| | 9048.015 | Screwdriver Blade T15, self-holding, for Quick Coupling | | |
| | 9020.020 | Drill Bit Ø 1.5 mm, length 88/63 mm, for Quick Coupling | | |
| | 9027.020 | Drill Bit Ø 2.2/1.1 mm, cannulated, length 100/75 mm, for Quick Coupling | | |
| | 9032.020 | Drill Bit Ø 2.5/1.3 mm, cannulated, length 160/135 mm, for Quick Coupling | | |
| | 9048.020 | Drill Bit Ø 4.0/1.9 mm, cannulated, length 160/135 mm, for Quick Coupling | | |
| | 9020.021 | Countersink Ø 2.2/1.5 mm, cannulated, for Quick Coupling | | |
| | 9027.021 | Countersink Ø 3.1/1.1 mm, cannulated, for Quick Coupling | | |
| | 9032.021 | Countersink Ø 3.5/1.3 mm, cannulated, for Quick Coupling | | |
| | 9048.021 | Countersink Ø 5.0/1.9 mm, cannulated, for Quick Coupling | | |
| | 9048.030 | Protection Sleeve, Ø 5.0 mm | | |
| | 9020.033 | Double Drill Guide, Ø 2.2/1.5 mm | | |
| | 9027.033 | Double Drill Guide, Ø 3.1/2.2 mm | | |
| <i>4</i> V | 9032.033 | Double Drill Guide, Ø 3.5/2.5 mm | | |
| | 9027.034 | Drill Sleeve, Ø 2.2/1.1 mm | | |
| | 9032.034 | Drill Sleeve, Ø 2.5/1.3 mm | | |
| | 9048.031 | Drill Sleeve, Ø 5.0/4.0 mm | | |
| | 9048.032 9048.033 | Drill Sleeve, Ø 4.0/1.9 mm Trocar, Ø 1.8 mm | | |
| | 9027.040 | Guide Wire Ø 1.0 mm, with trocar tip, length 100 mm | | |
| | 9032.040 | Guide Wire Ø 1.2 mm, with trocar tip, length 150 mm | | |
| | 9048.043 | Guide Wire Ø 1.7 mm, with trocar tip, length 150 mm | | |
| | 9027.041 | Guide Wire Ø 1.0 mm, with threaded tip, length 100 mm | | |
| | 9032.041 | Guide Wire Ø 1.2 mm, with threaded tip, length 150 mm | | |
| | 9048.044 | Guide Wire Ø 1.7 mm, with threaded tip, length 150 mm | | |
| 20 30 40 | 9020.042 | Depth Gauge for screws | | |
| | 9027.042 | Measuring Device, for Guide Wire Ø 1.0 mm, Guide Wire length 100 mm | | |
| 19 R R 19 | 9032.042 9048.042 | Measuring Device, for Guide Wire Ø 1.2 mm, Guide Wire length 150 mm Measuring Device, for Guide Wire Ø 1.7 mm, Guide Wire length 150 mm | | |
| | 9027.050 | Cleaning Stylet Ø 1.05 mm, for Ø 1.1 mm, cannulated instruments | | |
| 0 | 9032.050 | Cleaning Stylet Ø 1.25 mm, for Ø 1.3 mm, cannulated instruments | | |
| | 9048.050 | Cleaning Stylet Ø 1.85 mm, for Ø 1.8 mm, cannulated instruments | | |
| | Not Shown: | Sterilizing Tray, without content Lid for Sterilizing Tray | | |
| | | CS Ø 2.0 mm 8020.001 CS Ø 3.2 mm 8032.001 CS Ø 2.0 mm 8020.002 | CS Ø 3.2 mm 8 | 3032 |
| | | CS & 2.5 mm 0025.001 CS & 5.2 mm 0052.001 CS & 2.6 mm 0025.002 | | 0.0 |

The illustrations are not to scale.

The latest generation of instruments can additionally have color codes.

MAGNEZIX[®] CS

CS Ø 2.7 mm 8027.001 CS^c Ø 4.8 mm 8048.001

A KIND OF ITS OWN

MAGNEZIX® Pin

INTENDED USE

The MAGNEZIX[®] Pin is a bioabsorbable bone pin that is used to restore the bone continuity of bone fragments that are subjected to low loads and dimensionally stable after fractures, for the treatment of bony avulsion fractures, and for the refixation of bone fragments and osteochondral fragments. Specifically, the MAGNEZIX[®] Pin is intended to achieve anatomical retention of bone sections that have been joined together by surgical splinting following prior reduction until the bone has healed. The implant is designed for single use.

INDICATIONS

The indications for MAGNEZIX[®] Pin implants are reconstruction procedures after fractures and malalignment in the human skeleton. The surgeon must determine the degree of injury or changes in the bone and the scope of the required surgical procedure and then select the correct surgical procedure and the correct implant. This is particularly important for the use of bioabsorbable MAGNEZIX[®] implants. The surgeon always remains responsible for the decision to use these implants.

Depending on the chosen size, the MAGNEZIX[®] Pin can be used as a bone pin for children, adolescents or adults for the adaptation-capable or exercise-capable fixation of bones, bone fragments or osteochondral fragments for areas that are only subjected to minor loads. The relevant medical literature and corresponding guidelines of the professional associations must be observed when selecting the pin size that is going to be used.

MAGNEZIX[®] Pin 1.5, 2.0, 2.7, 3.2 for example:

- ➔ Intra-articular and extra-articular fractures of small bones and bone fragments
- → Arthrodeses and osteotomies of small bones and joints
- → Small osseous ligament and tendon ruptures
- ➔ Osteochondral fractures and dissecates
- ➔ Similar Indications

MAGNEZIX[®] Pin 1.5 among others:

- → Phalangeal and metacarpal bones
- ➔ Osteochondrosis dissecans
- ➔ Similar indications

MAGNEZIX[®] Pin 2.0 among others:

- → Carpal, metacarpal, tarsal and metatarsal bones
- → Ulnar and radial styloid processes
- → Radial head and capitulum
- ➔ Similar indications

MAGNEZIX® Pin 2.7 and 3.2 among others:

- ➔ Pipkin fractures
- → Metaphyseal fractures of the radius and ulna
- → Hallux valgus corrections
- ➔ Similar indications

CONTRAINDICATIONS

MAGNEZIX[®] implants are contraindicated (absolute contraindication) in specific clinical situations or they should only be planned after careful consideration (relative contraindication).

Absolute contraindications

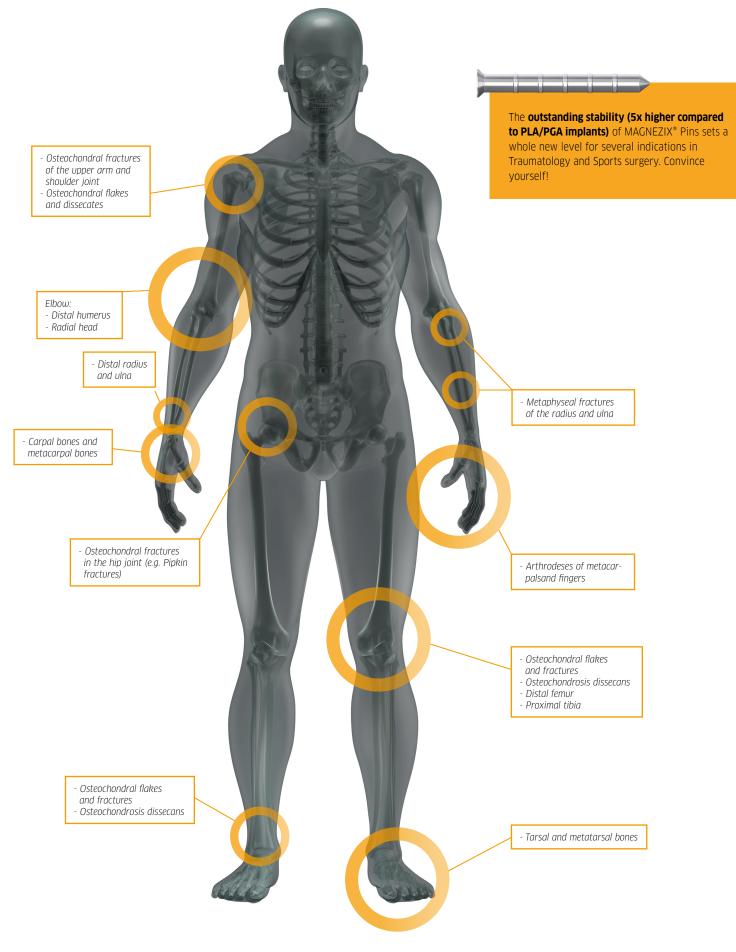
- ➔ Insufficient or avascular bone tissue for anchorage of the implant
- → Confirmation or suspected septic infectious surgical site
- → Application in the area of the epiphyseal plates
- ➔ Functionally stable osteosynthesis
- Arthrodeses of medium to large joints
 Applications on the spinal column

Relative contraindications

- ➔ Options for conservative treatment
- → Acute sepsis
- → Osteoporosis
- → Continuous stretching of tendons and ligaments with foreseeable secondary dislocation
- ➔ Alcohol, nicotine and/or drug abuse
- ➔ Epilepsy
- → Poor skin/soft tissue conditions
- Uncooperative patient or patient with restricted intellectual capacity
- No options for adequate postoperative treatment (e.g. temporary strain relief)



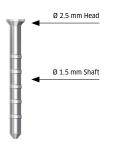
Application examples



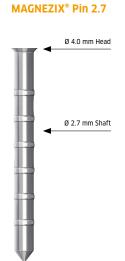
MAGNEZIX[®] Pin

DIMENSIONS

MAGNEZIX® Pin 1.5









Head height is 1.0 mm.

Head height is 1.0 mm.

Head height is 1.1 mm.

Head height is 1.3 mm.

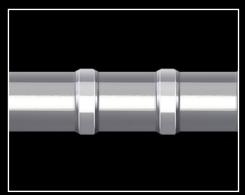
| Art. No. | Length [mm] |
|----------|-------------|----------|-------------|----------|-------------|----------|-------------|
| 1115.008 | 8 | 1120.008 | 8 | 1127.012 | 12 | 1132.012 | 12 |
| 1115.010 | 10 | 1120.010 | 10 | 1127.014 | 14 | 1132.014 | 14 |
| 1115.012 | 12 | 1120.012 | 12 | 1127.016 | 16 | 1132.016 | 16 |
| 1115.014 | 14 | 1120.014 | 14 | 1127.018 | 18 | 1132.018 | 18 |
| 1115.016 | 16 | 1120.016 | 16 | 1127.020 | 20 | 1132.020 | 20 |
| 1115.018 | 18 | 1120.018 | 18 | 1127.022 | 22 | 1132.022 | 22 |
| 1115.020 | 20 | 1120.020 | 20 | 1127.024 | 24 | 1132.024 | 24 |
| 1115.022 | 22 | 1120.022 | 22 | 1127.026 | 26 | 1132.026 | 26 |
| 1115.024 | 24 | 1120.024 | 24 | 1127.028 | 28 | 1132.028 | 28 |
| 1115.026 | 26 | 1120.026 | 26 | 1127.030 | 30 | 1132.030 | 30 |
| 1115.028 | 28 | 1120.028 | 28 | 1127.032 | 32 | 1132.032 | 32 |
| 1115.030 | 30 | 1120.030 | 30 | 1127.034 | 34 | 1132.034 | 34 |
| | | 1120.032 | 32 | 1127.036 | 36 | 1132.036 | 36 |
| | | 1120.034 | 34 | 1127.038 | 38 | 1132.038 | 38 |
| | | 1120.036 | 36 | 1127.040 | 40 | 1132.040 | 40 |
| | | 1120.038 | 38 | 1127.042 | 42 | 1132.042 | 42 |
| | | 1120.040 | 40 | 1127.044 | 44 | 1132.044 | 44 |
| | | | | 1127.046 | 46 | 1132.046 | 46 |
| | | | | 1127.048 | 48 | 1132.048 | 48 |
| | | | | 1127.050 | 50 | 1132.050 | 50 |



ADVANTAGES AND FEATURES

MAGNEZIX® PIN IMPLANTS







Unique, transformable magnesium alloy

The use of MAGNEZIX[®] implants makes any subsequent implant removal unnecessary, and moreover, it supports the osseous healing process. MAGNEZIX[®] is bioabsorbable and biocompatible.

Head design

The flat designed head of the MAGNEZIX[®] Pin enables stable reduction of the bone fragment. Prominent protrusion of the implant involving possible damage to proximal structures can thus be avoided and the pin head can be completely countersunk. In addition, a recess in the pin head improves positioning of the impactor and the impactor is prevented from slipping off the pin head during impaction.

Axially stabilising shaft design

The symmetric collars on the pin shank result in compression of the free bone fragment during impaction of the implant. In addition, the collars increase the axial positioning precision of the implant and thus ensure reduction during the healing process.

Design of the pin tip

The tip design of the MAGNEZIX[®] Pin displaces cancellous bone and thus compresses the implant bed. The pin tip without any collars facilitates positioning of the MAGNEZIX[®] Pin in the pre-drilled implant bed.

WARNINGS

In the case of concurrent use of third party implants it must borne in mind that steel, titanium and cobalt-chromium alloys may not remain in direct contact with a MAGNEZIX[®] implant at the intervention site (i.e. no physical contact of implants). Since the implants are designed for single use only, reuse of MAGNEZIX[®] implant devices is grossly negligent and can result in an increased risk of infection and loss in implant stability. In general, re-sterilization alters the implant's functionality in an unpredictable way.



MAGNEZIX® Pin product overview instruments





INSTRUMENTS MAGNEZIX® Pin

PRODUCT OVERVIEW

| Art. No. | Description |
|-----------|--|
| 6115.010 | Impactor for MAGNEZIX* Pin Ø 1.5 mm, consisting of:9115.010Impactor Sleeve for MAGNEZIX* Pin Ø 1.59115.011Impactor Insert for MAGNEZIX* Pin Ø 1.59115.012Impactor Tip for MAGNEZIX* Pin Ø 1.5 |
| 6120.010 | Impactor for MAGNEZIX® Pin Ø 2.0 mm, consisting of:9120.010Impactor Sleeve for MAGNEZIX® Pin Ø 2.09120.011Impactor Insert for MAGNEZIX® Pin Ø 2.09120.012Impactor Tip for MAGNEZIX® Pin Ø 2.0 |
| <u> </u> | Impactor for MAGNEZIX® Pin Ø 2.7 mm, consisting of:9127.010Impactor Sleeve for MAGNEZIX® Pin Ø 2.79127.011Impactor Insert for MAGNEZIX® Pin Ø 2.79127.012Impactor Tip for MAGNEZIX® Pin Ø 2.7 |
| 6132.010 | Impactor for MAGNEZIX* Pin Ø 3.2 mm, consisting of:9132.010Impactor Sleeve for MAGNEZIX* Pin Ø 3.29132.011Impactor Insert for MAGNEZIX* Pin Ø 3.29132.012Impactor Tip for MAGNEZIX* Pin Ø 3.2 |
| 9115.020 | Drill Bit Ø 1.5 mm, length 115/90 mm, for Quick Coupling |
| 9120.020 | Drill Bit Ø 2.0 mm, length 115/90 mm, for Quick Coupling |
| 9127.020 | Drill Bit Ø 2.7 mm, length 115/90 mm, for Quick Coupling |
| 9132.020 | Drill Bit Ø 3.2 mm, length 115/90 mm, for Quick Coupling |
| | Double Drill Guide, for MAGNEZIX® Pin Ø 1.5/2.0 mm |
| 9127.033 | Double Drill Guide, for MAGNEZIX® Pin Ø 2.7/3.2 mm |
| 9115.040 | Reduction Wire Ø 1.5 mm, spade point tip, length 100 mm |
| 9120.040 | Reduction Wire Ø 2.0 mm, spade point tip, length 100 mm |
| 9127.040 | Reduction Wire Ø 2.7 mm, spade point tip, length 100 mm |
| 9132.040 | Reduction Wire Ø 3.2 mm, spade point tip, length 100 mm |
| 9100.042 | Measuring Device, for reduction wires, up to Ø 3.2 mm, for length 100 mm |
| 9100.045 | Depth Gauge for MAGNEZIX® Pin |
| Not shown | n: 8100.001 Sterilizing Tray for MAGNEZIX [®] Pin, without contents 8100.002 Lid for Sterilizing Tray, for MAGNEZIX [®] Pin 9100.000 Hammer 230 g, with plastic insert, optional |

9100.001 Plastic Insert, spare part



UNIQUE ADVANTAGES, VERSATILE APPLICATIONS

MAGNEZIX® CBS

INTENDED USE

The MAGNEZIX® CBS is a bioabsorbable bone screw that is used to restore the bone continuity after fractures and osteotomies (osteosynthesis) as well as for treatment of pseudarthroses. Specifically, the MAGNEZIX® CBS is intended to achieve anatomical retention of bone sections that have been joined together by surgical splinting following prior reduction until the bone has healed. The implant is designed for single use only.

INDICATIONS

The indications for MAGNEZIX[®] CBS implants are reconstruction procedures after fractures and malalignment in the human skeleton. The surgeon must determine the degree of injury or changes in the bone and the scope of the required surgical procedure and then select the correct surgical procedure and the correct implant. This is particularly important for the use of bioabsorbable MAGNEZIX[®] implants. The surgeon is always responsible for the decision to use these implants.

Depending on the chosen size, the MAGNEZIX[®] CBS can be used as a bone screw for children, adolescents or adults for the adaptation-capable or exercise-capable fixation of bones and bone fragments.

MAGNEZIX® CBS 2.0, 2.7, 3.5:

- ➔ Intra- and extra-articular fractures of small bones and bone fragments
- ➔ Arthrodeses, osteotomies or pseudarthroses of small bones and joints
- → Small bony ligament and tendon ruptures
- → Osteochondral fractures and dissecates
- ➔ Similar indications

MAGNEZIX® CBS 2.0:

- ➔ Phalangeal and metacarpal bones
- ➔ Osteochondrosis dissecans
- ➔ Similar indications

MAGNEZIX® CBS 2.7 and 3.5:

- → Carpal, metacarpal, tarsal and metatarsal bones
- ➔ Epicondylus humeri
- ➔ Metaphyseal fractures of small and mediumsized bones and bone fragments
- ➔ Similar indications

CONTRAINDICATIONS

MAGNEZIX[®] implants are contraindicated (absolute contraindication) in specific clinical situations or they should only be planned and used after careful consideration (relative contraindication).

Absolute contraindications

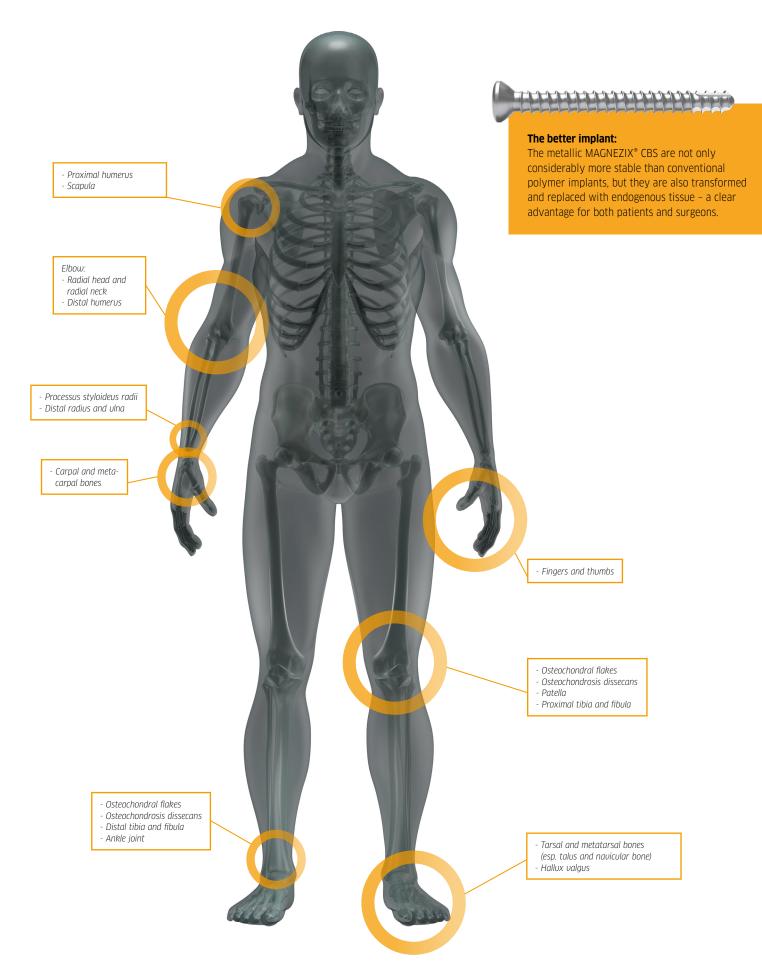
- → Insufficient or avascular bone mass for anchorage of the implant, except osteochondral fractures and dissecates
- ➤ Confirmation or suspected septic infectious surgical site
- → Application in the area of the epiphyseal plates
- → Loadbearing stable osteosynthesis
- → Arthrodeses of medium to large joints
 → Applications on the spinal column
- Applications of the ppint coordination
 Applications in combination with osteosyntheses plates, consisting of foreign material

Relative contraindications

- ➔ Options for conservative treatment
- ➔ Acute sepsis
- ➔ Osteoporosis
- ➔ Alcohol, nicotine and/or drug abuse
- ➔ Epilepsy
- ➔ Poor skin/soft tissue conditions

Application examples





MAGNEZIX® CBS

DIMENSIONS

MAGNEZIX[®] CBS 2.0

0 1.4 mm Core diameter 0 2.0 mm Thread Drill bit for threaded hole: 1.5 mm Drill bit for glide hole: 2.0 mm

MAGNEZIX[®] CBS 2.7



MAGNEZIX® CBS 3.5



Head height is 1.9 mm.

| Art. No. | Length [mm] |
|----------|-------------|
| 1320.006 | 6 |
| 1320.008 | 8 |
| 1320.010 | 10 |
| 1320.012 | 12 |
| 1320.014 | 14 |
| 1320.016 | 16 |
| 1320.018 | 18 |
| 1320.020 | 20 |

| Art. No. | Length [mm] |
|----------|-------------|
| 1327.006 | 6 |
| 1327.008 | 8 |
| 1327.010 | 10 |
| 1327.012 | 12 |
| 1327.014 | 14 |
| 1327.016 | 16 |
| 1327.018 | 18 |
| 1327.020 | 20 |
| 1327.022 | 22 |
| 1327.024 | 24 |
| 1327.026 | 26 |
| 1327.028 | 28 |
| 1327.030 | 30 |
| | |

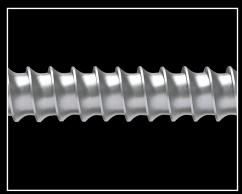
| Art. No. | Length [mm] |
|----------|-------------|

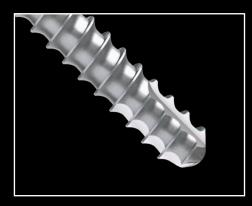
| 1335.008 | 8 |
|----------|----|
| 1335.010 | 10 |
| 1335.012 | 12 |
| 1335.014 | 14 |
| 1335.016 | 16 |
| 1335.018 | 18 |
| 1335.020 | 20 |
| 1335.022 | 22 |
| 1335.024 | 24 |
| 1335.026 | 26 |
| 1335.028 | 28 |
| 1335.030 | 30 |
| 1335.032 | 32 |
| 1335.034 | 34 |
| 1335.036 | 36 |
| 1335.038 | 38 |
| 1335.040 | 40 |
| | |



ADVANTAGES AND FEATURES MAGNEZIX® CBS IMPLANTS







Unique, transformable magnesium alloy

The use of MAGNEZIX[®] implants makes any subsequent implant removal unnecessary, and moreover, it supports the osseous healing process. MAGNEZIX[®] is bioabsorbable and biocompatible.

Head design

The head of the MAGNEZIX[®] CBS, with a typical cortical screw design, allows for stable repositioning of the bone fragment, with good compression characteristics.

Patented safety drive design

The special design of the TORX-based drive protects the implant in the shaft and head area from failure. If the torsional load is too high during the insertion process, a targeted deformation of the screw head drive takes place. As a result, subsequent steps can be continued using a hexagonal screwdriver blade.

Thread design

The thread design, which is typical for cortical screws, produces a strong fixation in cortical bone. A dimension-dependent thread pitch supports the controlled compression of bone fragments.

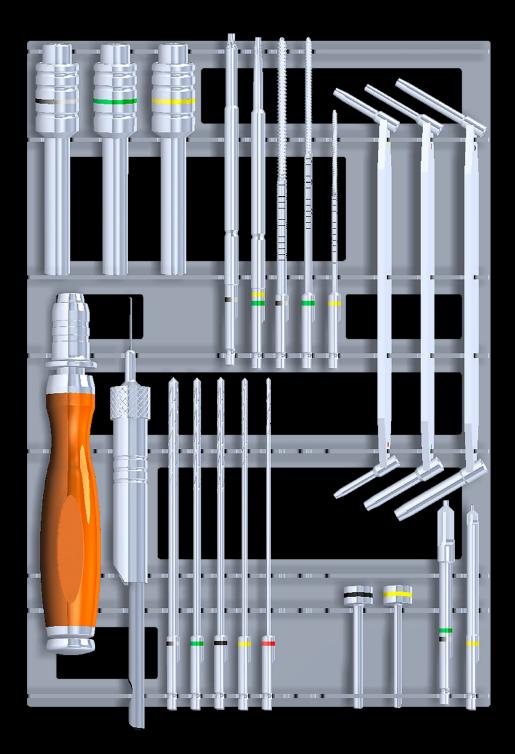
Screw tip

The additionally existing chip flutes improve the thread quality and ease the screwing-in. However, a precutting of the thread in cortical bone is required.

WARNINGS

When using other makes of implant at the same time, it is important to note that steel, titanium and cobalt-chromium alloys in the surgical site must not be in direct contact with a MAGNEZIX* implant for an extended period (physical contact between implants). Since the implants are intended for single use only, reuse of MAGNEZIX* implants constitutes gross negligence. It may lead to increased risk of infection and especially loss of implant stability. Re-sterilization will have an unpredictable impact on the product.

MAGNEZIX® CBS <u>product overview instruments</u>





INSTRUMENTS MAGNEZIX® CBS

PRODUCT OVERVIEW

| | Art. No. | Description |
|--|------------|--|
| | 9115.020 | Drill Bit Ø 1.5 mm, Length 115/90 mm, for Quick Coupling |
| | 9120.020 | Drill Bit Ø 2.0 mm, Length 115/90 mm, for Quick Coupling |
| | 9127.020 | Drill Bit Ø 2.7 mm, Length 115/90 mm, for Quick Coupling |
| | 9325.020 | Drill Bit Ø 2.5 mm, Length 115/90 mm, for Quick Coupling |
| and a for the second seco | 9335.020 | Drill Bit Ø 3.5 mm, Length 115/90 mm, for Quick Coupling |
| | | Countersink CBS Ø 2.0, for Quick Coupling |
| | 9327.021 | Countersink CBS Ø 2.7/3.5, for Quick Coupling |
| | | Tap CBS Ø 2.0, for Quick Coupling |
| | 9327.022 | Tap CBS Ø 2.7, for Quick Coupling |
| | 9335.022 | Tap CBS Ø 3.5, for Quick Coupling |
| | 9115.033 | Double Drill Guide, Ø 1.5/2.0 mm |
| | 9327.033 | Double Drill Guide, Ø 2.0/2.7 mm |
| | 9335.033 | Double Drill Guide, Ø 2.7/3.5 mm |
| | 9327.034 | Insert Drill Sleeve Ø 2.7/2.0 |
| | 9335.034 | Insert Drill Sleeve Ø 3.5/2.5 |
| | 9300.045 | Depth Gauge for MAGNEZIX® CBS |
| | 9320.015 | Screwdriver Blade T7, for Quick Coupling |
| | 9335.015 | Screwdriver Blade T10, for Quick Coupling |
| | 9320.016 | Holding Sleeve CBS Ø 2.0, for 9320.015 |
| | 9327.016 | Holding Sleeve CBS Ø 2.7, for 9320.015 |
| | 9335.016 | Holding Sleeve CBS Ø 3.5, for 9335.015 |
| | 9099.004 | Small Screwdriver Handle with Quick Coupling |
| | Not shown: | 8300.001 Sterilizing tray for MAGNEZIX [®] CBS, without contents 8300.002 Lid sterilizing tray MAGNEZIX [®] CBS |

8300.003 Insert sterilizing tray MAGNEZIX® CBS

PROGRESS IN FOREFOOT SURGERY

MAGNEZIX[®] StarFuse[®]

INTENDED USE

The MAGNEZIX[®] StarFuse[®] is a bioabsorbable intramedullary arthrodesis implant that is intended for adaptation-capable or exercise-capable fixation of small bone reconstruction limited to interphalangeal fusion of the lesser toes. The implant is designed for single use.

INDICATIONS

The indications for MAGNEZIX[®] StarFuse[®] implants are small bone reconstruction procedures after malalignment in the human skeleton. The surgeon must determine the degree of the deformity and the scope of the required surgical procedure and then select the correct surgical procedure and the appropriate implant. This is particularly important when using bioabsorbable MAGNEZIX[®] implants. The surgeon is always responsible for the decision to use these implants.

Depending on the chosen size and angulation, the MAGNEZIX[®] StarFuse[®] can be used for adaptation-capable or exercisecapable fixation of osteotomies and reconstruction procedures limited to interphalangeal arthrodesis of the lesser toes.

CONTRAINDICATIONS

MAGNEZIX* implants are contraindicated (absolute contraindication) in specific clinical situations or they should only be planned after careful consideration (relative contraindication).

Absolute contraindications:

- → PAOD (peripheral arterial occlusive disease)
- ➔ Insufficient or avascular bone mass for anchorage of the implant
- → Confirmation or suspected septic infectious surgical site
- ➔ Load-bearing stable osteosynthesis
- → Arthrodeses of medium-sized and large joints

Relative contraindications:

- → Options for conservative treatment
- ➔ No options for adequate postoperative treatment (e.g. temporary strain relief)
- → Application in the area of the epiphyseal plates
- Uncooperative patient or patient with restricted intellectual capacity
- ➔ Alcohol, nicotine and/or drug abuse
- → Poor skin/soft tissue conditions
- ➔ Osteoporosis
- → Acute sepsis
- ➔ Epilepsy



Application examples

Ideal for forefoot surgery – this metal implant turns into bone!

MAGNEZIX[®] StarFuse[®] consists of an innovative magnesium alloy. It offers the stability of conventional metal implants, but is rebuilt by the body and stimulates bone growth. Magnesium has an antibacterial effect and helps to prevent infections around the implant.

PIP arthrodesis, especially for correction of hammer and claw toes deformities

MAGNEZIX® StarFuse

MAGNEZIX® StarFuse®

PRODUCT OVERVIEW

DIMENSIONS

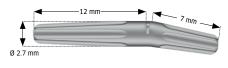
MAGNEZIX® StarFuse® Short

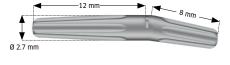
MAGNEZIX[®] StarFuse[®] Medium

MAGNEZIX[®] StarFuse[®] Large

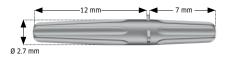
12 mm













8 mm

| Art. No. | Proximal/Distal length [mm] | Angle | |
|-------------|--------------------------------|-------|--|
| 1427.126.00 | 12/6 | 0° | |
| 1427.126.10 | 12/6 | 10° | |

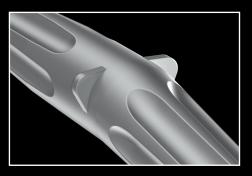
| Art. No. | Proximal/Distal length [mm] | Angle | |
|-------------|--------------------------------|-------|--|
| 1427.127.00 | 12/7 | 0° | |
| 1427.127.10 | 12/7 | 10° | |

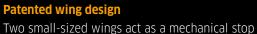
| Art. No. | Proximal/Distal length [mm] | Angle | |
|-------------|--------------------------------|-------|--|
| 1427.128.00 | 12/8 | 0° | |
| 1427.128.10 | 12/8 | 10° | |

ADVANTAGES AND FEATURES



MAGNEZIX[®] StarFuse[®] IMPLANTS





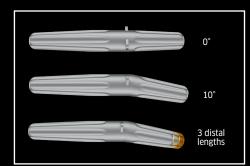
during insertion and following reduction of the more distal phalanx. This innovative design feature ensures stable axial implant positioning.



Star-shaped profile

Deep cutting longitudinal flutes guarantee proper rotational stability for optimal fixation.





Blunt ends

The blunt end design ensures secure implant position via reducing the risk of axial implant displacement.

Tapered design

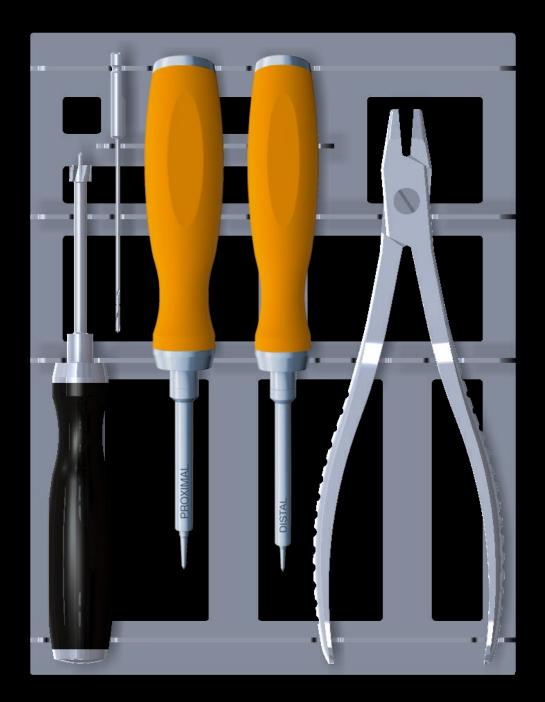
The conical shape of the proximal and distal end allows fast and easy insertion. This design aspect further achieves proper intra-medullar press-fit anchoring.

Multiple sizes

The implants are available in two angles, 0° and 10°, with three different distal lengths each.

MAGNEZIX[®] StarFuse[®]

PRODUCT OVERVIEW INSTRUMENTS



INSTRUMENTS MAGNEZIX[®] StarFuse[®]



PRODUCT OVERVIEW

| | Art. No. | Description |
|----|----------------------|---|
| -5 | 9427.001 | StarFuse® Calcar Reamer |
| | 9427.020 | Drill Bit Ø 1.5 mm, length 85/60 mm, for Quick Coupling |
| | 9427.003 9427.004 | Punch, proximal, with depth stop Punch, distal, with depth stop |
| | 9427.002 | StarFuse* Holding Forceps |
| | Not shown: | 8400.001 Sterilization Tray for StarFuse[®], without contents 8400.002 Lid for Sterilization Tray for StarFuse[®] 8400.003 Insert for Sterilizing Tray for StarFuse[®] |

ADDITIONAL REFERENCES

Acar B. | Unal M. | Turan A. | Kose O. (2018):

Isolated Lateral Malleolar Fracture Treated with a Bioabsorbable Magnesium Compression Screw. Cureus 10 (4): e2539. DOI: 10.7759/cureus.2539.

Aktan C. | Ertan M. B. | Unal M. | Turan A. | Kose O. (2018):

Fixation of Small Osteochondral Fragments in a Comminuted Distal Humerus Fracture with Magnesium Bioabsorbable Screws: A Case Report. Cureus 10(12): e3752. DOI: 10.7759/cureus.3752.

Biber R. | Pauser J. | Geßlein M. | Bail H. J. (2016):

Magnesium-Based Absorbable Metal Screws for Intra-Articular Fracture Fixation. Case Reports in Orthopedics 3, pp. 1-4.

Biber R. | Pauser J. | Brem M. | Bail H. J. (2017):

Bioabsorbable metal screws in traumatology: A promising innovation. Trauma Case Reports 8, pp. 11–15.

Choo J. T. | Wei Hong Lai S. | Qian Ying Tang C. | Thevendran G. (2018):

Magnesium-based bioabsorbable screw fixation for hallux valgus surgery – A suitable alternative to metallic implants. Foot Ankle Surg. Published online, DOI: 10.1016/j.fas.2018.09.001.

Gigante A. | Setaro N. | Rotini M. | Finzi S. S. | Marinelli M. (2018):

Intercondylar eminence fracture treated by resorbable magnesium screws osteosynthesis: A case series. Injury, Int. J. Care Injured, Volume 49 , pp. 48–53. DOI: 10.1016/j.injury.2018.09.055.

Grieve P. | O'Carroll S. | Albastaki O. (2017):

Six cas de série de patients de Magnezix[®]. Une vis métallique absorbable pour la fixation de la fracture du carpe et des fusions entre les carpes. Hand Surgery and Rehabilitation 36 (6), pp. 488-489.

Klauser H. (2018):

Internal fixation of three-dimensional distal metatarsal I osteotomies in the treatment of hallux valgus deformities using biodegradable magnesium screws in comparison to titanium screws. Foot and Ankle Surgery. Published online, DOI: 10.1016/j.fas.2018.02.005.

Kose O. | Turan A. | Unal M. | Acar B. | Guler F. (2018):

Fixation of medial malleolar fractures with magnesium bioabsorbable headless compression screws: short-term clinical and radiological outcomes in eleven patients. Archives of Orthopaedic and Trauma Surgery. Published online, DOI: 10.1007/s00402-018-2941-x.

Liao, Y. | Xu Q. | Zhang J. et al. (2015):

Cellular response of chondrocytes to magnesium alloys for orthopedic applications. International Journal of Molecular Medicine 36 (1), pp. 73–82.

Modrejewski C. | Plaass C. | Ettinger S. et al. (2015):

Degradationsverhalten bioabsorbierbarer Magnesium-Implantate bei distalen Metatarsale-1-Osteotomien im MRT. Fuß & Sprunggelenk 13 (3), pp. 156–161.

Nan M. | Yangmei C. | Bangcheng Y. (2014):

Magnesium metal – A potential biomaterial with antibone cancer properties. J Biomed Mater Res Part A 2014: 102A: 2644-2651.

Plaass C. | von Falck C. | Ettinger S. et al. (2018):

Bioabsorbable magnesium versus standard titanium compression screws for fixation of distal metatarsal osteotomies – 3 year results of a randomized clinical trial. Journal of Orthopaedic Science 23 (2), pp. 321–327.

Seitz J.-M. | Lucas A. | Kirschner M. H. (2016):

Magnesium-Based Compression Screws: A Novelty in the Clinical Use of Implants. Journal of The Minerals, Metals & Materials Society 68 (4), pp. 1177–1182.

Sonnow L. | Könneker S. | Vogt P. M. | Wacker F. | von Falck C. (2017):

Biodegradable magnesium Herbert screw – image quality and artifacts with radiography, CT and MRI. BMC Medical Imaging 17(1), p. 16. DOI: 10.1186/s12880-017-0187-7.

Turan A. | Kati Y. A. | Acar B. | Kose O. (2019):

Magnesium Bioabsorbable Screw Fixation of Radial Styloid Fractures: Case Report. Journal of Wrist Surgery. DOI: 10.1055/s-0039-1685489.



Wagner F. C. | Polossek L. | Hohloch L. et al. (2017):

Biomechanische dynamische Vergleichsanalyse von Polylactid- und Magnesiumpins zur operativen Stabilisierung von Radiusköpfchenfrakturen. Deutscher Kongress für Orthopädie und Unfallchirurgie.

Waizy H. | Diekmann J. | Weizbauer A. et al. (2013):

In vivo study of a biodegradable orthopedic screw (MgYREZr-alloy) in a rabbit model for up to 12 months. Journal of Biomaterials Applications 28 (5), pp. 667–675.

Windhagen H. | Radtke K. | Weizbauer A. et al. (2013):

Biodegradable magnesium-based screw clinically equivalent to titanium screw in hallux valgus surgery: short term results of the first prospective, randomized, controlled clinical pilot study. BioMedical Engineering OnLine 12, p. 62.

Zeng J. | Ren L. | Yuan Y. | Wang Y. et al. (2013):

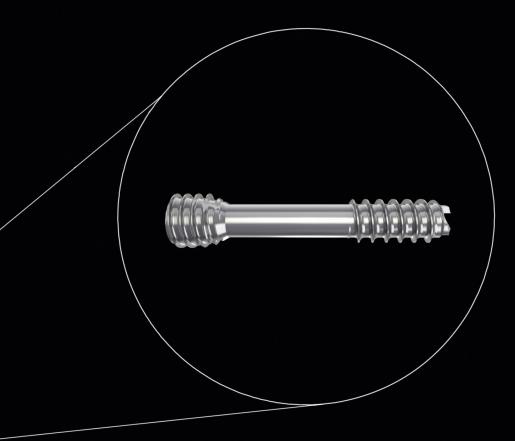
Short-term effect of magnesium implantation on the osteomyelitis modeled animals induces by staphylococcus aureus. Journal of Materials Science: Materials in Medicine 24 (10), pp. 2405–2416.











METALLIC AND TRANSFORMABLE. A MEDICAL SENSATION. MAGNEZIX®



MAGNEZIX[®] is designed, developed and made in Germany.

Syntellix AG

Aegidientorplatz 2a 30159 Hannover Germany

T +49 511 270 413 50 F +49 511 270 413 79

info@syntellix.com www.syntellix.com

Implants are manufactured in Germany in cooperation with Königsee Implantate GmbH.