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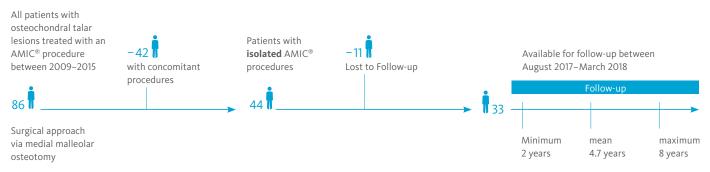
Autologous Matrix-Induced Chondrogenesis for Osteochondral Lesions of the Talus: A Clinical and Radiological 2- to 8-Year Follow-up Study

Lizzy Weigelt, Rebecca Hartmann, Christian Pfirrmann, Norman Espinosa, and Stephan H. Wirth

Isolated AMIC® Chondro-Gide® repair in osteochondral lesions of the talus led to significant pain reduction, recovery of ankle function and successful return to sports after a mean follow-up of 4.7 years.

The results for VAS pain, Tegner or AOFAS scores were independent of follow-up duration (\langle or \rangle 5 years), lesion size (\langle 1.5 cm² or \rangle 1.5 cm²) or the need for subchondral bone grafting.

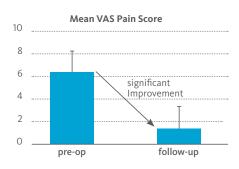
Retrospective case series (Level IV):

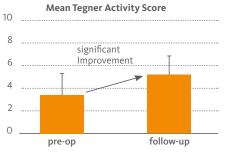


- > mean age: 35.1 years (range, 13-75 years)
- > mean pre-op lesion size: 0.9 ± 0.5 cm² (range, 0.4–2.3 cm²)
- > 85% of patients treated with concomitant autologous subchondral bone grafting

Good to excellent results at a mean follow-up of 4.7 years:

- > Significant improvement of Pain (VAS) and Sports Activity (Tegner) scores (refer to graphs on the right)
- > 79% of patients fully returned to previous sports activity levels
- > Mean AOFAS score for ankle function of 93.0 ± 7.5 points
- > Moderate radiological results with an average MOCART score of 60.6 \pm 21.2 points
- > Complete defect filling in 88% of the cases
- > No post-operative complications and no revisions for a failed AMIC® procedure







CHONDRO-GIDE® LITERATURE HIGHLIGHT

The bilayer collagen membrane is an established product for cartilage therapies with 20 years of clinical use. AMIC® Chondro-Gide®, a technique that combines bone marrow stimulation with the use of a collagen membrane, has been used for over 15 years. Based on preclinical and clinical evidence, AMIC® was included in the treatment recommendations for cartilage lesions of the talus, knee and hip by the corresponding committees of the German Society for Orthopaedics and Trauma (DGOU).

This literature highlight addresses important aspects of the evidence for Chondro-Gide®and AMIC®.

Conclusions:

- > Isolated AMIC® Chondro-Gide® repair in osteochondral lesions of the talus led to significant pain reduction, improvement in ankle function and successful return to previous sports levels during a follow-up of 2 to 8 years.
- > Clinical outcomes did not deteriorate over time and were independent of lesion size, follow-up duration or subchondral bone grafting.
- > Moderate MRI findings did not correlate with the good clinical outcome and interpretation of post-operative imaging remains difficult.
- > AMIC® Chondro-Gide® is a safe and effective procedure for the treatment of osteochondral lesions of the talus.

For details of the study refer to the original article:

Autologous Matrix-Induced Chondrogenesis for Osteochondral Lesions of the Talus

A Clinical and Radiological 2- to 8-Year Follow-up Study

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- > Chondro-Gide®, the original AMIC® membrane¹
- > One-step procedure for cartilage regeneration techniques^{1,2,3}
- > With more than 10 years of clinical experience⁴



- Geistlich Pharma AG, data on file
 Schiavone Panni, A., et al. Knee Surg Sports Traumatol 2018 Apr;26(4):1130-1136. doi: 10.1007/s00167-017-4503-0. (Clinical study)
 Niemeyer, P., et al. Significance of Matrix-augmented Bone Marrow Stimulation for Treatment of Cartilage Defects of the Knee: A Consensus Statement of the DGOUWorking Group on Tissue Regeneration. Z Orthop Unfall 2018; 156(05): 513-532. doi: 10.1055/a-0591-6457
- 4 Kaiser, N., et al. Clinical results 10 years after AMIC in the knee. Swiss Med Wkly, 2015, 145 (Suppl 210), 43S. (Clinical study)