Early, conservative treatment
The UniSpacer Knee System
An early option for the arthritic patient

The UniSpacer Knee System offers an alternative treatment option for many patients suffering from the early stages of osteoarthritis of the knee. The cobalt-chromium alloy, load-bearing implant was developed for patients with knee pain who have exhausted traditional treatments, such as drug therapy and arthroscopy. The goals of the UniSpacer design are to reduce pain and increase mobility while maintaining the bony and ligamentous anatomy of the knee.

Delays the Need for TKA
The UniSpacer Knee System is intended to delay the need for TKA while conserving bone for possible future arthroplasty procedures. Unlike other early stage procedures, implantation of the UniSpacer component requires:

- No bone resection
- No fixation

Helps Restore Knee Alignment and Kinematics
- Establish appropriate axial alignment by replacing articular material lost from the femur and tibia.
- Enhances stability by aiding the ligament balancing.
- Accommodates the natural movement of the femur relative to the tibia throughout the ROM.
Addressing The Needs Of Younger Patients:
The UniSpacer Knee System is specifically designed to help patients who are not ideal candidates for alternative treatments. The UniSpacer component is implanted using a minimally invasive technique.

Candidacy criteria include:
- Patients with isolated, degeneration of the medial compartment (Grade III-IV chondromalacia) with no more than minimal degeneration (Grade I-II chondromalacia, no loss of joint space) in the lateral and patellofemoral compartments.
- Patients experiencing debilitating knee pain who have exhausted all conservative treatment options.

Product Offering:
- 6 sizes: A/P lengths of 38mm, 42mm, 46mm, 50mm, 54mm and 58mm
- 4 thicknesses: 2mm, 3mm, 4mm and 5mm

As with any joint replacement surgery, the outcome can depend on each patient’s individual factors, such as weight, activity level, bone quality, and how well the physical therapy routine is followed after surgery. Proper placement of the implant is also very important. All patients may not experience every potential benefit and many patients may experience short or long-term post-operative pain. The post-operative expectations and limitations should be well understood by the surgeon, and discussed thoroughly with the patient, before the operation, in order to minimize pain/chance of failure as well as maximize recovery and patient satisfaction.