

OSSIOfiber®

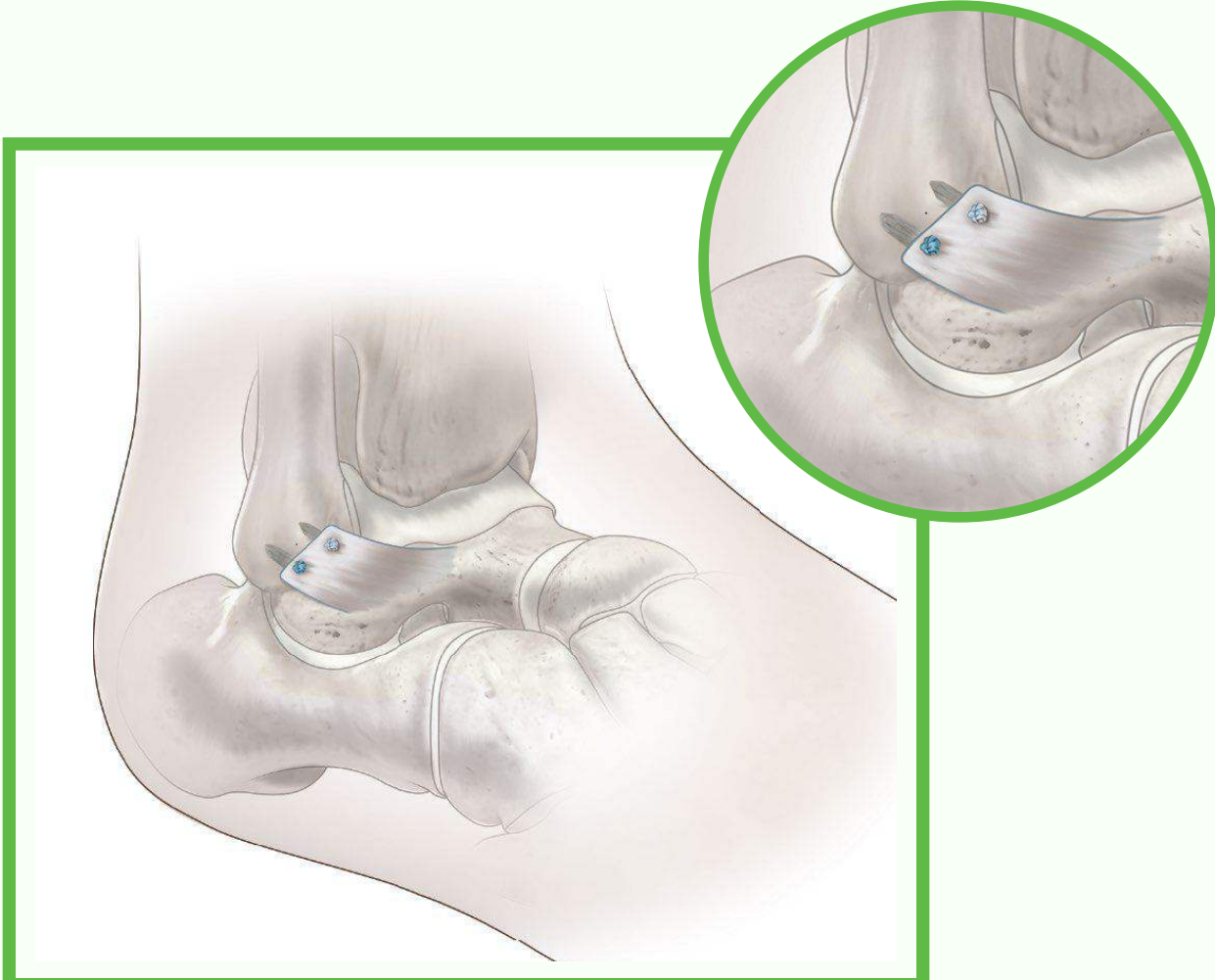
The Better Brostrom.

OSSIOfiber® 2.5mm Suture Anchor
Smaller. **Stronger.** *Smarter*

Our small anchors are engineered to integrate into bone, leaving an uncompromised, natural landscape with no adverse reactions.



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+55% Initial Pull-Out Strength Compared to SutureTak

Smaller.

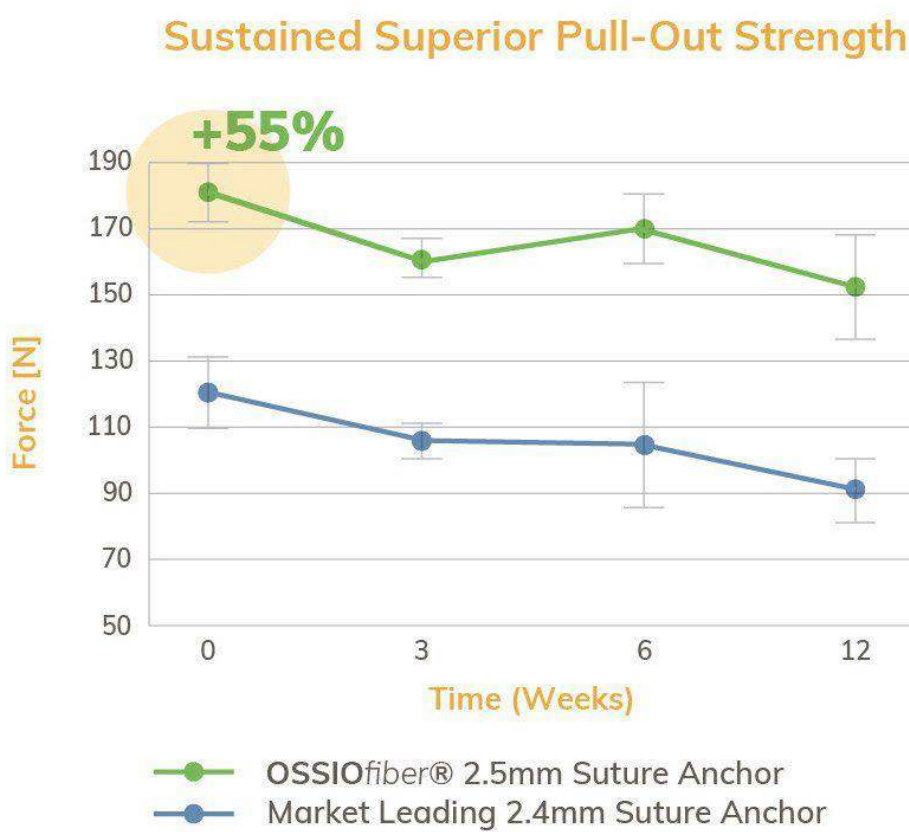
An OSSIOfiber 2.5mm Suture Anchor, now with a reduced footprint. Specifically designed for surgeries like the Brostrom procedure.

Stronger.

Rely on predictable performance during insertion and beyond.

Smarter.

Engineered to integrate into bone, leaving an uncompromised natural landscape with no adverse reactions.



OSSIOfiber® 2.5 Suture Anchor
can withstand a higher pullout load than
the Arthrex Bio SutureTak Anchors



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Biointegrative Nail Rafting Improves Pain and Function in Patients with Subchondral Insufficiency of the Knee

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ARTICLE IN PRESS

Original Article

Biointegrative Nail Rafting Improves Pain and Function in Patients With Subchondral Insufficiency of the Knee

Alexander C. Weissman, M.S., Allen A. Yazdi, B.S., Jared P. Sachs, M.S., Sarah A. Muth, B.A., Andrew S. Bi, M.D., Ron Gilat, M.D., and Brian J. Cole, M.D., M.B.A.

Purpose: To evaluate the utility of implanting biointegrative cannulated nails in a raft arrangement within the tibial plateau or femoral condyle for treatment of subchondral insufficiency of the knee. **Methods:** Patients were followed for 12 months after surgical intervention for subchondral insufficiency using biointegrative, fiber-reinforced fixation nails. Patients (ages 18-75 years) had moderate knee pain for at least 6 months, unicompartmental Kelgren-Lawrence grade 2-3 and bone marrow lesions confirmed on magnetic resonance imaging (MRI). Comparison of baseline and postoperative Knee Injury and Osteoarthritis Outcome Score (KOOS) was the primary outcome measure. Other patient-reported outcome measures included International Knee Documentation Committee (IKDC) and Patient-reported Outcomes Measurement Information System (PROMIS). Minimal clinically important difference was calculated for each PRO. Calculated bone marrow lesion volumes measured on MRI were compared from baseline to 12 months postoperative. **Results:** Nine patients were included, with follow-up of 12 ± 1 months. Significant improvements were seen in KOOS, IKDC, PROMIS, and Veterans RAND 12-Item Health Survey (VR-12). The average change in patient-reported outcome measures at 12 months were KOOS (19.68, $P = .008$), IKDC (28.99, $P = .004$), PROMIS Pain Interference (10.35, $P = .008$), PROMIS Physical Function (11.06, $P = .008$), and VR-12 Physical (16.14, $P = .008$). Minimal clinically important difference was achieved in 89% of patients for KOOS, 100% for IKDC, 87.5% for PROMIS Pain Interference and Physical Function, and 62.5% for VR-12 Physical. The average decrease in subchondral lesion size measured on MRI did not reach statistical significance ($P = .064$). All patients reported successful return to sport, with no reoperations or implant failures. **Conclusions:** Biointegrative fixation nail rafting for treatment of subchondral insufficiency of the knee resulted in improved patient-reported pain and functionality at 12-month follow-up in the setting of early-to-moderate osteoarthritis. **Level of Evidence:** Level IV, therapeutic case series.

Interested in discussing the KneeBar™ Procedure with one of our surgeon experts?

Complete the form below and an OSSIOfiber® Advisor will get in touch.

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Footnotes

¹ Data on file at OSSIO

² Clinical study data on file at OSSIO

³ Kaiser, P.B., Watkins, I., Riedel, M. D., Cronin, P., Briceno, J., Kron, J. Y. (2019). Implant Removal Matrix for the Foot and Ankle Orthopaedic Surgeon. Foot & Ankle Specialist, 12(1), 79-97. <https://doi.org/10.1177/1938640018791015>

⁴ Pre-clinical animal studies (in-bone implantation of OSSIOfiber® and PLDLA control in rabbit femurs). Data on File at OSSIO.

⁵ Haddad, S. F., Helm, M. M., Meath, B., Adams, C., Packianathan, N., & Uhl, R. (2019). Exploring the Incidence, Implications, and Relevance of Metal Allergy to Orthopaedic Surgeons. Journal of the American Academy of Orthopaedic Surgeons. Global research & reviews, 3(4), e023. <https://doi.org/10.5435/JAOSGlobal-D-19-00023>

⁶ Pot J, Wensen RV, Olsman J. Hardware Related Pain and Hardware Removal after Open Reduction and Internal Fixation of Ankle Fractures. The Foot and Ankle Online Journal. 2011;4(5). doi:10.3827/faqj.2011.0405.0001.