

An Interspinous Implant to Improve Dynamic Motion in the Lumbar Spine Region



Rachel Bordin, Allen Kim, Gina Lu, Bryce Pardoe, Eric Volk

Department of Biomedical Engineering
Carnegie Mellon University, Pittsburgh, Pennsylvania
Professor Conrad Zapanta | Mentor Boyle Cheng, PhD



Problem and Clinical Need

- Lumbar spinal stenosis affects 8-11 percent of the population in the United States, with an estimated 24 million affected by 2021¹
- While minor back pain can be eliminated using physical therapy and pain medication, more severe forms of back pain require surgery
- Current procedures are able to relieve the pain through a decompression and fixation procedure, but fail to maintain dynamic motion of the spine

Market

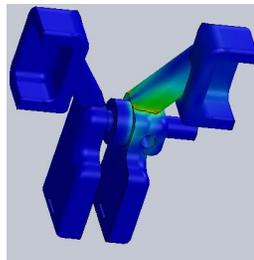
- Potential consumer base is 6 million people, but realistically target market is 500-800 thousand people²
- Customers are hospitals and the end users are patients with lumbar spinal stenosis

What is Novel?

- The device takes the best features of interspinous fusion, interspinous spacers, and facet replacement systems
- The device is a semi-interspinous device that provides the stabilization of a facet replacement system and the minimally invasive surgical procedures of an interspinous device

Simulation

- A static simulation was performed to determine factor of safety and evaluate modes of failures
- Model was loaded with 6.5 Nm
- Simulations were performed to determine FoS in:
 - Flexion: 13.5
 - Extension: 13.6
 - Torsion: 7.0



Output for Torsional Loading

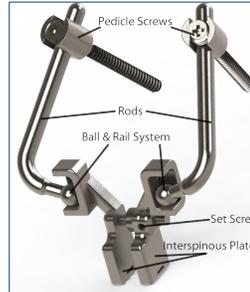


Figure 1
Isometric View of Design
Rendered in Solidworks



Figure 2
Anterior View of Design
Rendered in Solidworks



Figure 3
Exploded View of Polyaxial Pedicle Screw
Rendered in Solidworks

Design Features

- Attached using pedicle screws above functional spinal unit (FSU) and interspinous plates below FSU
- Interspinous plates mated with corresponding shafts with set screw and 6mm flat ligature
- Ball and rail system provide stabilization in flexion, extension, lateral bending, and torsion similar to facet replacement systems
- Polyaxial screws utilized to make easy adjustments in the operating room

Production Costs

- Material selection:
 - Titanium alloy Ti6Al7Nb primary structure
 - Cobalt-Chrome alloy CoCrMo articulating surfaces
- Costs include raw materials, machining, plating, and pedicle screws
- Estimates for machining and plating estimated with approximate quotes for production given a batch size of 500-1000
- Price comparison: average spinal implant cost - \$13,000³

ITEM	COST
Titanium Alloy	\$50/kilogram(kg) * 0.0518kg = <u>\$2.59</u>
Titanium Machining	\$2,200/unit
Cobalt-Chrome Plating	\$150/unit
Pedicle Screws	2 * \$600 = \$1,200/unit
TOTAL COST PER UNIT	~\$3,550/unit

Anticipated Regulatory Pathway

- Regulatory pathway is 510(k) for class II devices
- VertaMotion is similar in magnitude to the ACADIA Facet Replacement System
 - Both devices target patients suffering from spinal stenosis and maintain dynamic motion

Acknowledgements

- We would like to thank Professor Conrad Zapanta and Mentor Boyle Cheng, PhD, for their constant support and helpful guidance.

References

- "Lumbar Spinal Stenosis: The Growing Epidemic." *Lumbar Spinal Stenosis: The Growing Epidemic*. American Academy of Orthopaedic Surgeons, May 2011. Web. 10 Dec. 2013. <<http://www.aaos.org/news/aaosnow/may11/clinical10.asp>>
- Frost (2011) U.S. Spinal Surgery Market. June 2010. [Online] [Accessed on 27th October 2012] <http://www.frost.com/>
- "Lumbar Fusion Surgery in California." *Berkeley Center for Health Technology*. Vol. 2. Issue 4. <<http://bcht.berkeley.edu/docs/Vol.2.4.Lumbar-Fusion.pdf>>