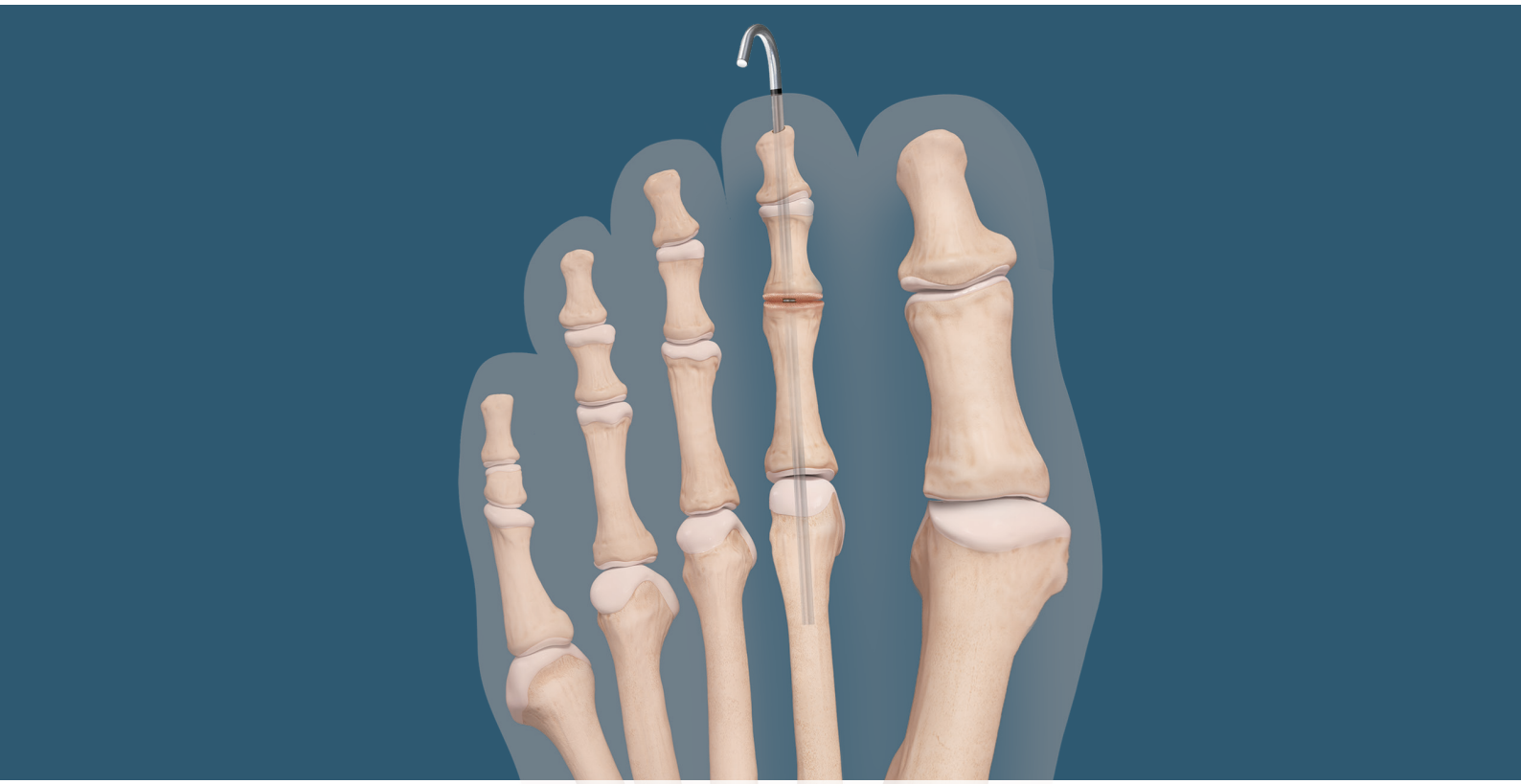
DynaNite® FlexWire for Hammertoe

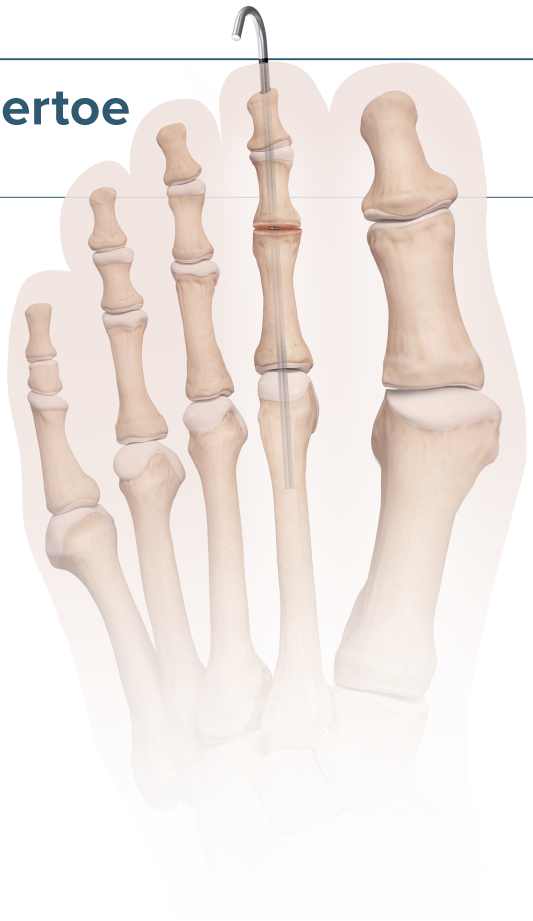
Surgical Technique



Arthrex®

DynaNite® FlexWire for Hammertoe

Introduction



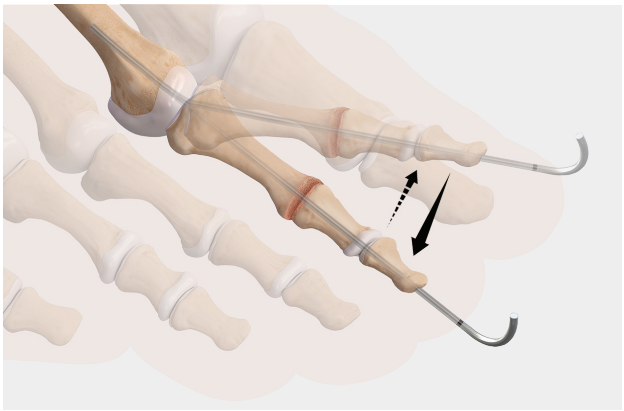
The DynaNite FlexWire is a nitinol K-wire that uses the superelastic properties of nitinol to improve upon standard K-wire fixation for hammertoe correction. Similar to other nitinol products, the FlexWire can be bent and will return to its original straight position with improved durability.[1] This two-zone wire has one superelastic end and one bendable end. The superelastic end of the wire helps maintain correction by returning to its manufactured straight position, even if a patient bends their toe postoperatively. The bendable end is left distally out of the toe to be bent, cut, and capped in a standard fashion. Surgeons have the option to cut the wire to end at the base of the proximal phalanx or to cross the MTP joint.

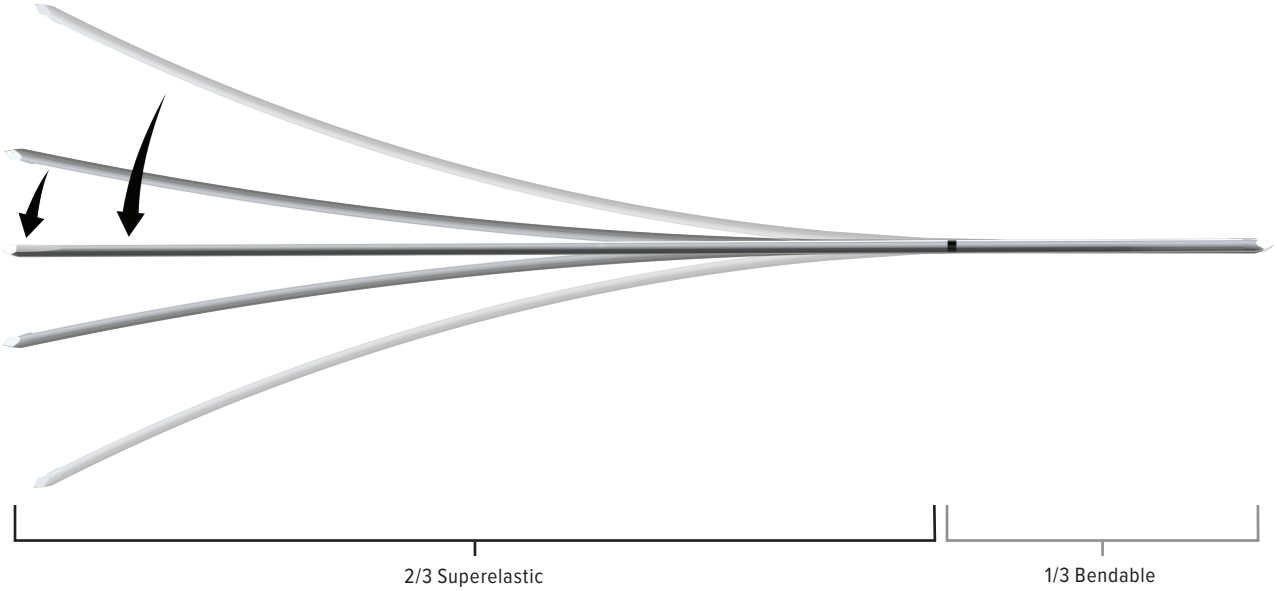
Reference

1. Arthrex, Inc. Data on file (APT-04336). Naples, FL; 2019.

Product Overview

The FlexWire is an all-nitinol K-wire with two different material properties made by preferentially heat treating a portion of the wire. The superelastic end makes up two-thirds of the wire, and the remaining one-third is heat-treated nitinol, to allow the wire to bend like a standard stainless steel wire. The two zones are marked by a laser line. The superelastic end is inserted proximally, while the bendable end remains out of the toe.





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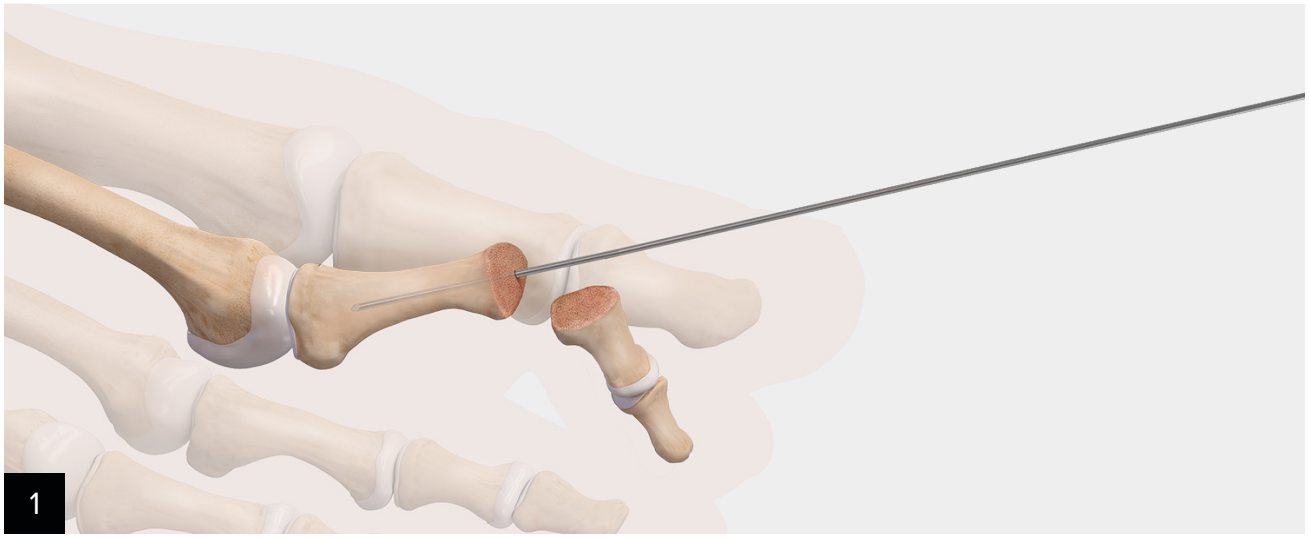
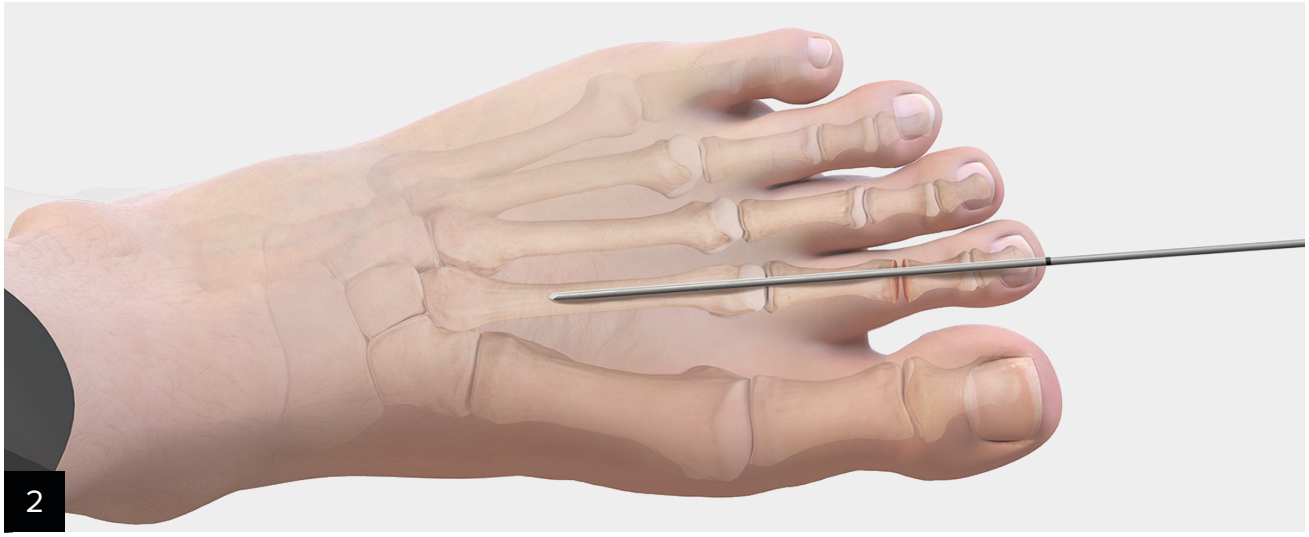
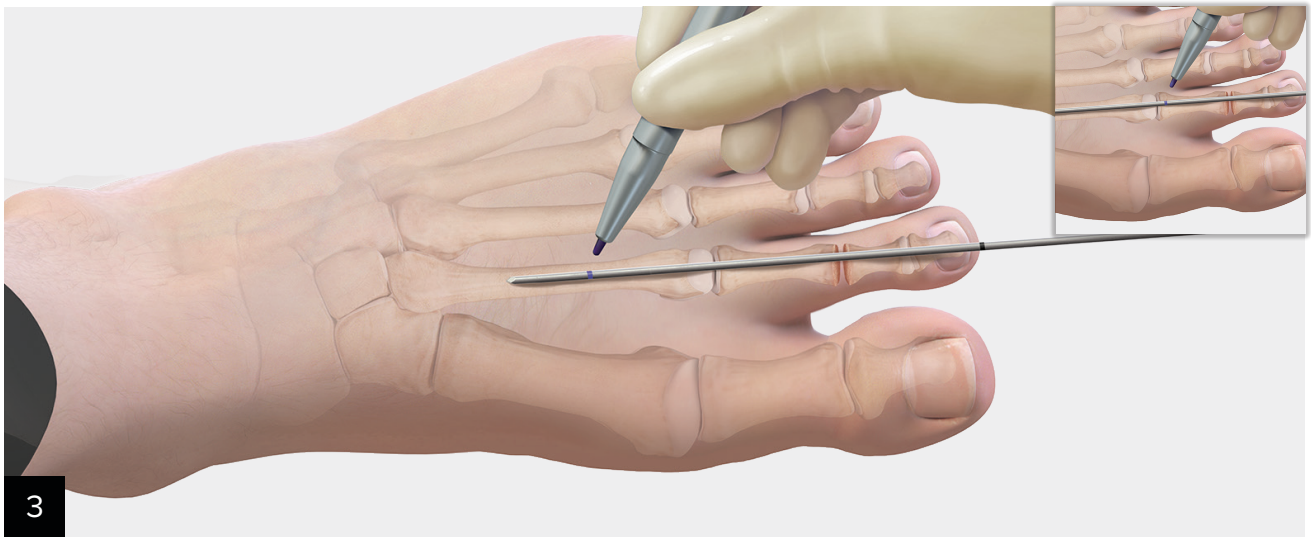


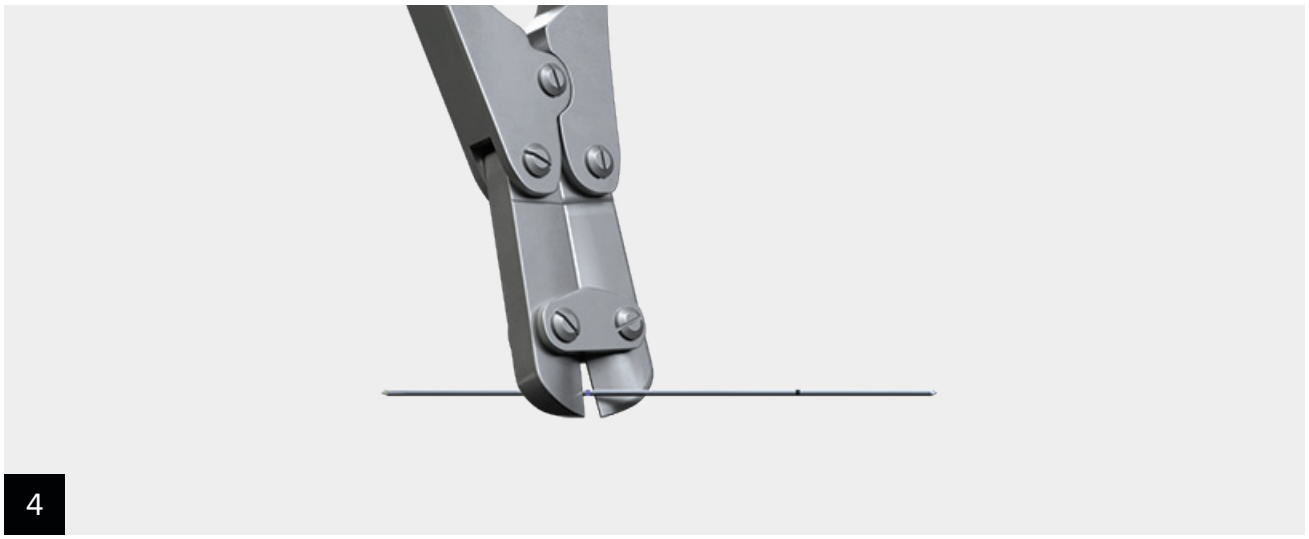
Standard joint preparation for hammertoe correction is completed based on surgeon preference. The FlexWire is then inserted into the proximal phalanx and removed. This serves as predrilling for the implant.



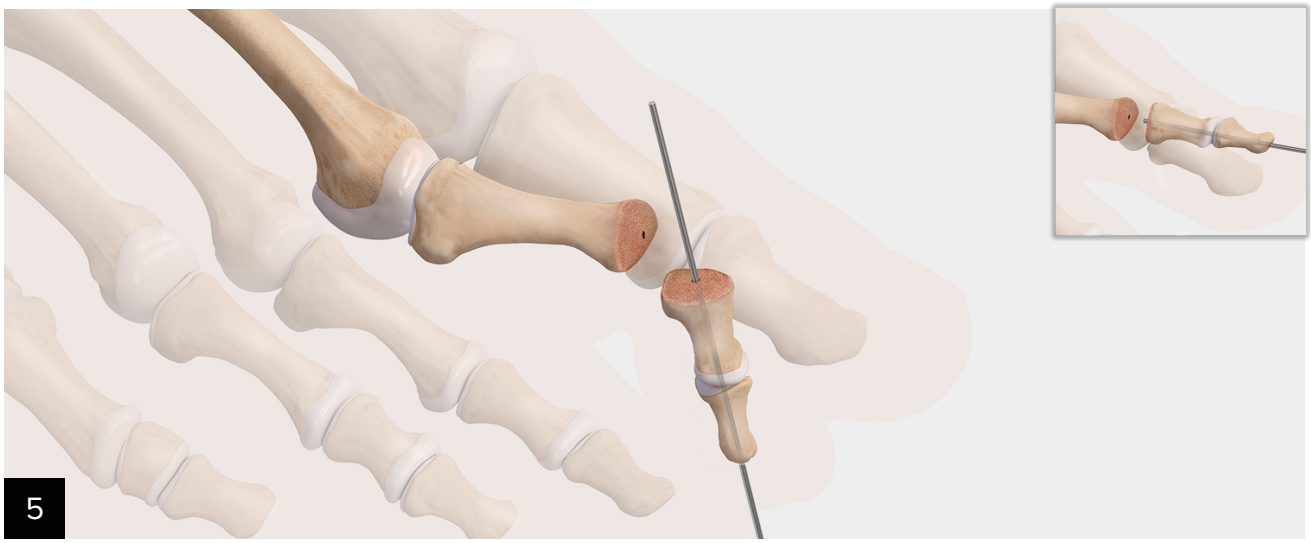
Place the FlexWire over the toe with the superelastic end proximally and the malleable end distally. Align the laser line with the tip of the toe.



Mark the desired end point of the wire on the superelastic end proximally. The surgeon has the option to have the wire extend across the MTP joint.

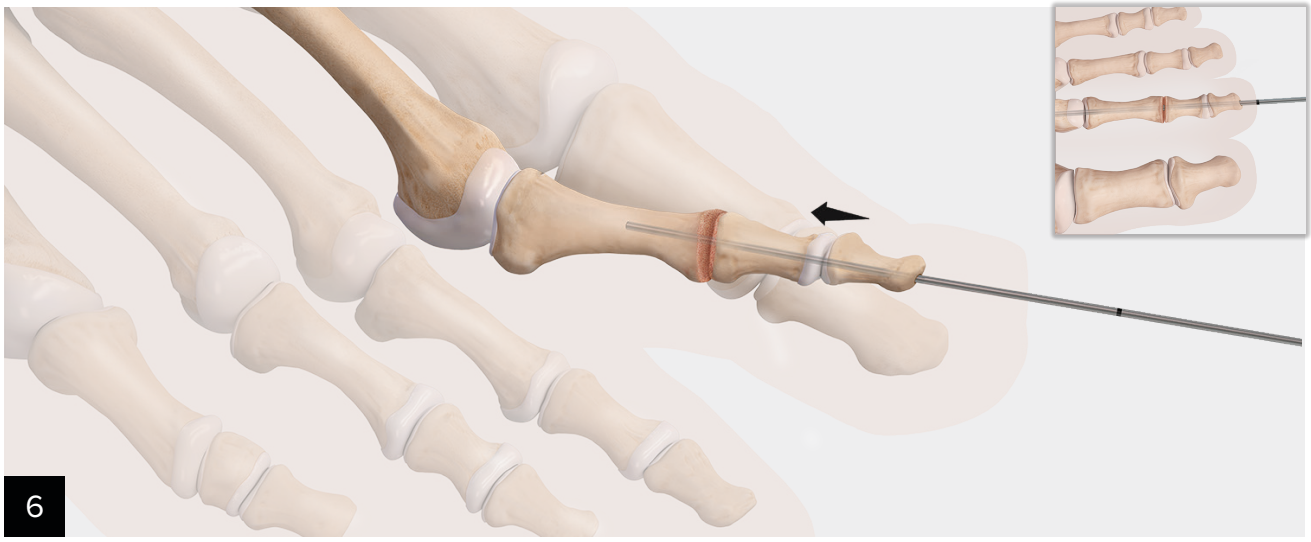


Cut the wire at the marked line. To aid in insertion, cut the FlexWire at an angle to create a bevel.

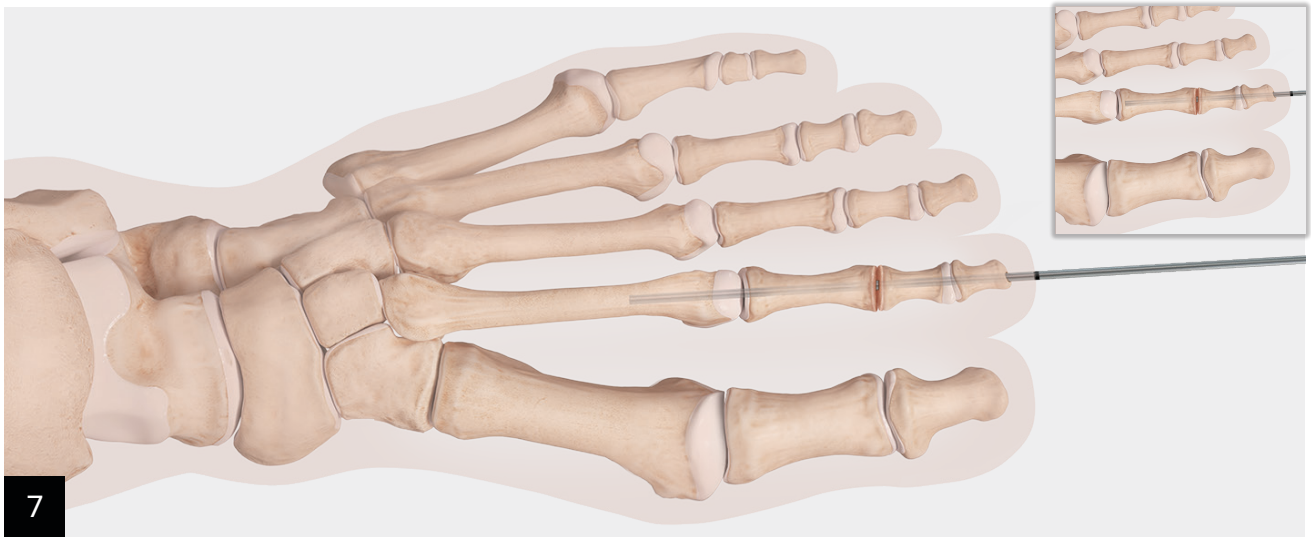


Drill the bendable end of the wire through the middle and distal phalanx, out the end of the toe. Pull the wire distally with the end left just proud of the middle phalanx.

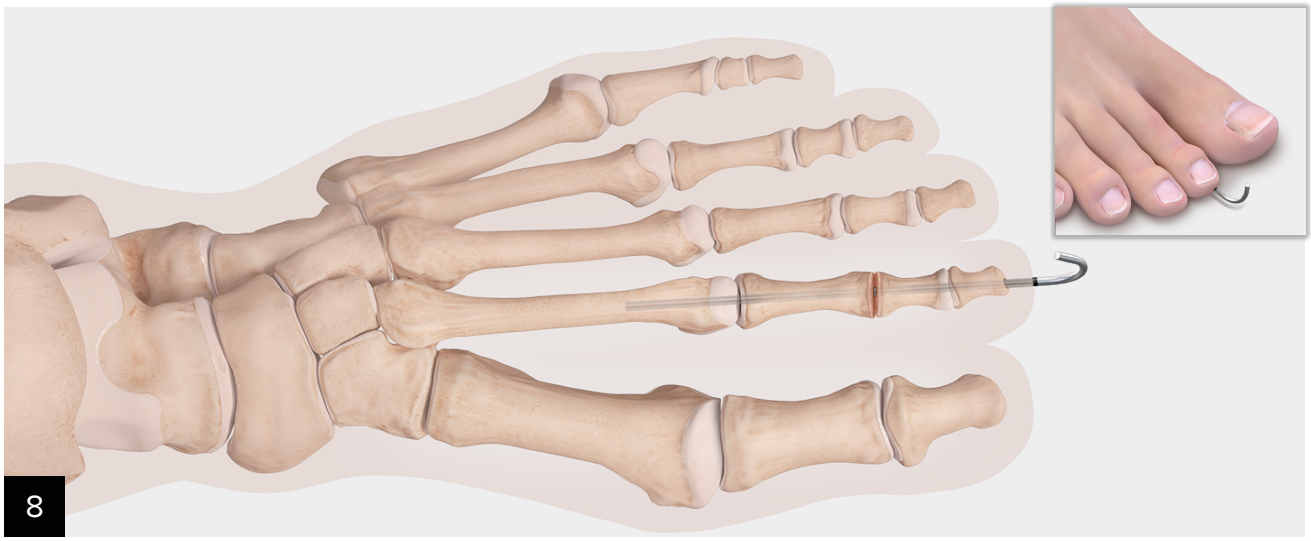
Note: Ensure that the superelastic, cut end is proximal and the bendable end is distal.



Straighten the toe into the corrected position, and drill the FlexWire in a retrograde manner until the laser line is at the tip of the toe.



With the laser line at the tip of the toe, implant the wire to the desired length as marked previously.



The distal end of the wire can be bent, cut, and capped in a standard fashion.

Ordering Information

FlexWire

Product Description	Item Number
FlexWire, double-tipped, 2-zone, .86 mm	AR-**4159-86D**
FlexWire, double-tipped, 2-zone, 1.1 mm	AR-**4159-11D**
FlexWire, double-tipped, 2-zone, 1.6 mm	AR-**4159-16D**

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