# A clinical study of the Triathlon knee prostheses using individualized patient matched operation tools

Submission date	Recruitment status  No longer recruiting	<ul><li>Prospectively registered</li></ul>		
09/07/2012		☐ Protocol		
Registration date	Overall study status Completed	Statistical analysis plan		
12/02/2013		[X] Results		
Last Edited	Condition category	Individual participant data		
06/12/2016	Musculoskeletal Diseases			

## Plain English summary of protocol

Background and study aims

Total knee replacements are one of the most successful joint reconstruction operations used today. The development of the implant design, as well as the improvement of instruments over the last decades have allowed good and reliable results, however with the increasing success of joint replacements and the decreasing age of patients, the expectations of total knee replacements are constantly on the rise. There is still scope to improve the longevity of implant survival as well as improving the function of the implant, giving the patient the ability to not only return to their activities of daily living but also sports and high impact activities. The opportunity exists to provide an alternative approach to total knee replacement surgery which may result in improved patient outcomes. One such approach is to determine the optimal placement of components based on the individual anatomy of patients. The position of the implant can be determined by 3D preoperative planning using an MRI scanning of the knee. Based on this planning custom specific instrumentation is made to position the implant correctly during surgery. Custom cutting guides are generated for each individual patient to enable the surgeon to perform the bone resections in such a way that the resultant construct with the total knee replacement components reproduces the pre-disease limb alignment or natural kinematic knee alignment. The aim of this study is to assess the impact of this new surgical technique aiming at natural kinematic alignment developed by Stryker on the short term functional outcome of patients undergoing primary total knee joint replacement.

## Who can participate?

The ShapeMatch study aims to recruit 144 patients, men or non-pregnant women, age 18-80 years, with a diagnosis of Non-Inflammatory Degenerative Joint Disease, candidates for a primary total knee replacement.

## What does the study involve?

All 144 patients will receive the same prosthesis but they will be randomly allocated to one of three groups. One third of the subjects will receive the prosthesis performed using the Stryker Patient-Specific Cutting Guides with kinematic alignment; another third of the subjects will receive the prosthesis using the Stryker Patient-Specific Cutting Guides modified to provide

neutral overall limb alignment and the last third of the subjects will receive the prosthesis performed using conventional instrumentation intended to achieve neutral overall limb alignment.

What are the possible benefits and risks for participating?

There are no additional risks associated with participating in this study over and above that of the primary total knee replacement procedure. Complications associated with any total knee arthroplasty procedure have been reported. These include the potential for: injury to the knees neurovascular structures, loosening of the components, heterotopic bone formation, infection, deep vein thrombosis, pulmonary embolism, metal sensitivity reactions, intra-operative or postoperative fracture of the femur, tibia or patella, and the need for re-operation, revision, arthrodesis of the involved joint or amputation of the limb. There is no guarantee that subjects will personally benefit from inclusion in this study. Subjects may undergo more thorough screening and follow-up than non-study patients and may benefit from this increased surveillance. This study seeks to provide clinicians information about this patient specific instrumentation by comparing the results of this instrumentation to the results of conventional instrumentation. Information gathered in this study may benefit others undergoing this procedure and general total knee replacements in the future.

## Where is the study run from?

Our patients will be recruited in four different hospitals in Europe: two hospitals in Italy, one hospital in UK and one in Germany.

When is study starting and how long is it expected to run for? Recruitment started mid-2012 and it is expected that the study will run for two years.

## Who is funding the study?

The technique using pre-operative planning and custom made instrumentation has been developed by Stryker, a global orthopaedic company, who is sponsoring, funding and monitoring this clinical study. To gain more information about the company or study you can contact the main Stryker office in Europe, Stryker SA, Grand Rue 92, 1820 Montreux, Switzerland, website: www.stryker.eu

Who is the main contact? Prof. Fabio Catani catani.fabio@policlinico.mo.it

# **Contact information**

**Type(s)**Scientific

#### Contact name

Prof Fabio Catani

## Contact details

Department of Orthopaedic Surgery University of Modena e Reggio Emilia Policlinico di Modena Via del Pozzo 71 Modena

# Additional identifiers

## Protocol serial number

K-S-045

# Study information

#### Scientific Title

A prospective randomized multi-centre study of the Triathlon Cruciate Retaining Total Knee System using ShapeMatched Cutting Guides

## Acronym

ShapeMatch\_EU

## Study objectives

There will be a statistically significant improvement in short term kinematics and functional outcome of the Triathlon® CR Total Knee System in combination with natural kinematic aligned ShapeMatch Cutting Guides compared to the Triathlon® CR Total Knee System in combination with ShapeMatch cutting guides modified to provide neutral overall limb alignment or with conventional instrumentation intended to achieve neutral overall limb alignment.

## Ethics approval required

Old ethics approval format

# Ethics approval(s)

Azienda Ospedaliero-Universitaria di Modena, Comitato Etico Provinciale, 05/08/2011, ref: 2765/C.E

# Study design

Post-market prospective randomized single blind multi-centre study

# Primary study design

Interventional

# Study type(s)

**Treatment** 

# Health condition(s) or problem(s) studied

Non-inflammatory degenerative joint disease/total knee replacement

#### Interventions

Study device:

**Required Components:** 

- 1. Triathlon® Cruciate Retaining Total Knee System with X3® polyethylene insert
- 2. Resurfaced Patella

## Required Instrumentation:

- 1. Kinematic aligned ShapeMatch Cutting Guide
- 2. Precision™ saw Blade

#### Reference device:

# **Required Components:**

- 1. Triathlon® Cruciate Retaining Total Knee System with X3® polyethylene insert
- 2. Resurfaced Patella

## Reference Instrumentation:

- 1. Conventional instrumentation intended to achieve neutral overall limb alignment
- 2. ShapeMatch Cutting Guides modified to provide neutral overall limb alignment
- 3. Precision™ saw Blade

## Intervention Type

Device

## Primary outcome(s)

To demonstrate by means of fluoroscopy and functional evaluation that TKRs performed using a kinematic aligned ShapeMatch Cutting Guide provides better short term kinematic and functional improvement compared to those TKRs performed with ShapeMatch cutting guides modified to provide neutral overall limb alignment or with conventional instrumentation intended to achieve neutral overall

- 1. Consistent femoral-tibial pivot point location
- 2. Consistent femoral Anterior-Posterior translation
- 3. Consistent external rotation during extension
- 4. Better Get-up-and-go test

# Key secondary outcome(s))

- 1. To compare pain, function and health related quality of life (QOL) between the kinematic aligned ShapeMatch Cutting Guide group and the neutral overall limb aligned groups using cutting guides and conventional instrumentation, respectively.
- 2. To evaluate the cost-benefit ratios between those TKRs performed using kinematic aligned ShapeMatch Cutting Guides and those TKRs performed with ShapeMatch cutting guides modified to provide neutral overall limb alignment or with conventional instrumentation intended to achieve neutral overall limb alignment. To meet this objective, the following criteria will be satisfied:
- 2.1. Lower procedural and hospital logistic costs
- 2.2. Lower blood loss
- 2.3. Less (pain) medication
- 2.4. Higher activity score on discharge
- 2.5. Faster functional improvement
- 3. To compare device-related adverse events between those knees implanted using the kinematic aligned ShapeMatch Cutting Guide and those implanted using ShapeMatch cutting guides modified to provide neutral overall limb alignment or those implanted using conventional instrumentation intended to achieve neutral overall limb alignment.

Published complication rates with similar devices, as well as complications reported in the investigational and control groups, will be reviewed.

## Completion date

11/06/2014

# Eligibility

## Key inclusion criteria

- 1. Patient has signed an EC approved, study specific Informed Patient Consent Form
- 2. Patient is a male or non-pregnant female, skeletally mature and age 18-80 years at the time of study device implantation
- 3. Patient has a diagnosis of Non-Inflammatory Degenerative Joint Disease (NIDJD)
- 4. Patient is a candidate for a primary total knee replacement
- 5. Patient is willing and able to comply with postoperative scheduled clinical and radiographic evaluations and rehabilitation

## Participant type(s)

Patient

## Healthy volunteers allowed

No

## Age group

Adult

## Lower age limit

18 years

## Upper age limit

80 years

#### Sex

All

## Key exclusion criteria

- 1. Patient has a Body Mass Index (BMI)  $\geq$  40
- 2. Patient age ≥ 80
- 3. Patient has a varus or valgus deformity greater than 10° or flexion contracture greater than 20°
- 4. Patient has an active or suspected latent infection in or about the affected knee joint at time of study device implantation
- 5. Patient has received any orthopaedic surgical intervention to the lower extremities within the past year or is expected to require any orthopaedic surgical intervention to the lower extremities, other than the TKR to be enrolled in this study, within the next year
- 6. Patient requires bilateral total knee replacements, or has a history of contralateral partial or total knee replacement
- 7. Patient has any implanted device that would be incompatible with MRI procedures
- 8. Patient has chronic heart failure (NYHA Stage  $\geq$  2)
- 9. Patient has a neuromuscular or neurosensory deficiency, which limits the ability to evaluate the safety and efficacy of the device
- 10. Patient is diagnosed with a systemic disease (e.g. Lupus Erythematosus) or a metabolic disorder (e.g. Pagets disease) leading to progressive bone deterioration
- 11. Patient is immunologically suppressed or receiving steroids in excess of normal physiological requirements (e.g. > 30 days)
- 12. Patient requires revision surgery of a previously implanted total knee replacement or knee

fusion to the affected joint 13. Patient has a known sensitivity to device materials 14. Patient is a prisoner

# Date of first enrolment

11/06/2012

## Date of final enrolment

08/04/2013

# Locations

## Countries of recruitment

**United Kingdom** 

England

Germany

Italy

41124

# Study participating centre University of Modena e Reggio Emilia

Direttore della Struttura Complessa di Ortopedia e Traumatologia Azienda Ospedaliera-Universitaria di Modena Largo del Pozzo, 71 Modena Italy

Study participating centre Princess Elizabeth Orthopaedic Centre

Barrack Road Exeter United Kingdom EX2 5DW

Study participating centre Istituto Ortopedico Rizzoli

Via di Barbiano 1/10 Bologna Italy 40136

## Study participating centre

## Orthopädische Klinik der Medizinischen Hochschule Hannover im Annastift

Anna-von-Borries-Str. 1-7 Hannover Germany D-30625

# Sponsor information

## Organisation

Stryker SA (Switzerland)

## **ROR**

https://ror.org/04t7jet59

# Funder(s)

## Funder type

Industry

## **Funder Name**

Stryker SA (Switzerland)

# **Results and Publications**

## Individual participant data (IPD) sharing plan

Due to early study termination, there was limited data available for analysis and therefore insufficient power to provide robust, meaningful results for primary or secondary analysis.

## IPD sharing plan summary

Not expected to be made available

# **Study outputs**

Output type	Details	Date created Date added	Peer reviewed?	Patient-facing?
Results article	results	01/04/2016	Yes	No
Results article	results	01/02/2018	Yes	No
Participant information sheet	Participant information sheet	11/11/2025 11/11/2025	No	Yes