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FREEDOM® KNEE

TECHNICAL BRIEF – FREEDOM TOTAL KNEE® SYSTEM

The Freedom Total Knee® System: Ten-Year Follow-Up Study*

QUICK FACTS

- ➜ 172 continuous, non-selected patients
- ➜ Prospectively studied at 2, 5 and 10-years post-index primary TKA
- ➜ All patients received the posterior stabilized (PS) Maxx Freedom Total Knee System
- ➜ 98.3% survival at 10 years
- ➜ We observed optimum safety, performance, and efficacy through a minimum of 10 years
- ➜ Achieved Goals
  - Relief of Pain
  - Restoration of Function
  - Creation and maintenance of a durable prosthetic composite

We wish to thank Dr. Durbhakula, the many contributing researchers, authors, and especially the patients for their continued commitment and support through the last 10-years!

INTRODUCTION

We previously reported on the 2-year[1] and 5-year[2] follow-up of a continuous, non-selected patient cohort that received the Maxx Freedom Total Knee® system (fig.1) as their index arthroplasty system. We now have the opportunity to report on this population at 10-year post surgery.[3]

PURPOSE

The purpose of this study was to report the early results of a primary TKA system in support of the component design characteristics for achievement of increased functional expectations.

Figure 1
The Freedom® Total Knee System (PS)

METHODS & RESULTS

Between November 2010 and December 2013, 176 consecutive primary TKAs were performed in 172 patients, without selection, utilizing the posterior stabilized (PS) Freedom Total Knee® system. All patients were followed at 2, 5, and 10 years.[1-3] At 10 years, two patients had early wound infection (I&D), one tibia revised post MVA, three patients died and ten were lost to follow-up. Of those original patients remaining for review, all had clinical and radiographic good to excellent outcomes achieving the goals of relief of pain, restoration of function and maintenance of a durable prosthetic composite.

CONCLUSIONS

The design characteristic for component sizing and functional expectations were re-confirmed in the reported Western population cohort series, and observed optimum safety, performance, and efficacy through a minimum of 10-years.[3] Further continued study efforts of this primary TKA system is warranted across multiple surgeons and all ethnic cultures.

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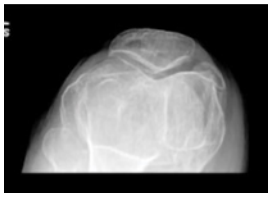
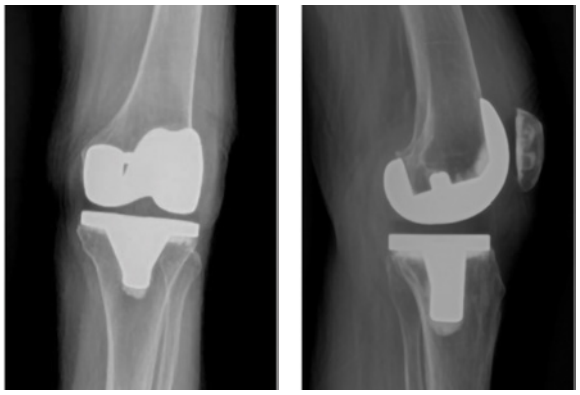


Figure 2A
Patient pre-operative anterior-posterior (AP), lateral and skyline patellar knee radiographic series (2012).



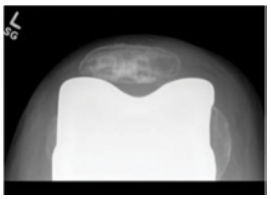


Figure 2B
2-year minimum follow-up series (2015) after primary TKA with the Maxx Freedom Knee System.

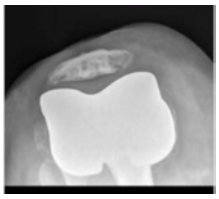


Figure 2C
5-year minimum AP radiographic follow-up (2018) after primary TKA with the Maxx Freedom Knee System.

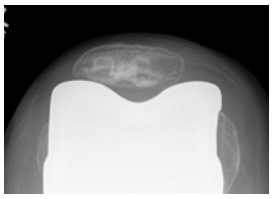


Figure 2D
10-year minimum follow-up series (2022) after primary TKA with the Maxx Freedom Knee System.

REFERENCES

1. Durbhakula S, Rego L: Restoration of Femoral Condylar Anatomy for Achieving Optimum Functional Expectations: Component Design and Early Results. *Recon Review* 6(3):31-35, 2016.
2. Durbhakula S, Durbhakula V. Durbhakula N: Restoration of Femoral Condylar Anatomy for Achieving Optimum Functional Expectations: Continuation of an Earlier Study at 5-Years minimum Follow-Up. *Recon Review* 9(1):31-35, 2019.
3. Durbhakula S, Rego L, Eberle R: Restoration of Femoral Condylar Anatomy for Achieving Optimum Functional Expectations: Continuation of Earlier Studies at 10-Years follow-up. *Recon Review* [Accepted for Publication], 2023.