

**DR ANITA BOECKSTEINER**

**ORTHOPAEDIC SURGEON**

**MELBOURNE**

**Now offering muscle sparing , minimally invasive, SUPERPATH total hip replacement techniques.**

**Link**

**<http://www.superpathhiptechnique.com/physicians/about-superpath.asp>**

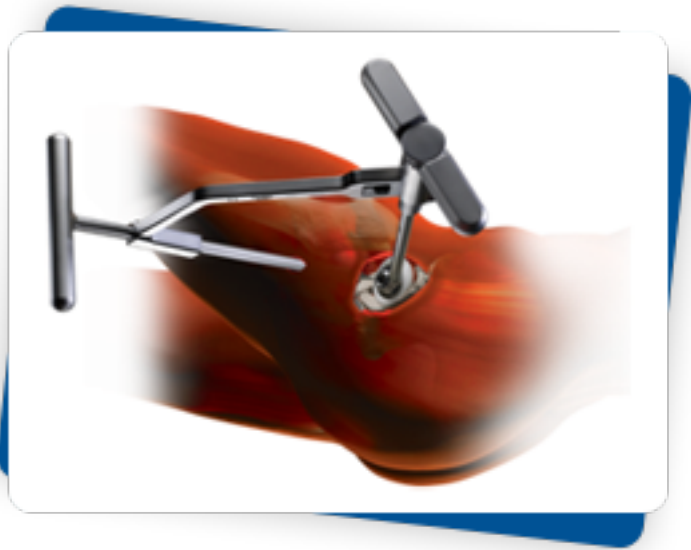
**What is the SUPERPATH® Hip Technique?**

SUPERPATH® stands for **Supercapsular Percutaneously Assisted Total Hip**.

The SUPERPATH® Micro-Posterior Approach is a **tissue-sparing** approach where **no muscles** or **tendons** are cut.

SUPERPATH®:

- has **no typical postoperative hip restrictions**
- **completely preserves the integrity of the capsule**
- allows for **direct acetabular preparation** through a cannula



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## **SUPERPATH® Surgical Technique Overview**

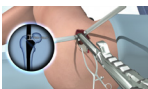
### **Femoral Reaming**

The femur is reamed and broached with the head intact to spare the external rotators and avoid calcar fracture.



### **Femoral Broaching**

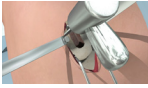
To prepare the femoral canal, broaches are utilized according to the appropriate ream-and-broach or broach-only stem selected.



### **Femoral Head Resection**

An oscillating saw with a narrow blade is used to create the femoral neck

osteotomy along the top of the broach.



### **Femoral Head Removal**

Schanz pins are utilized to rotate the head and remove it through the main incision.



### **Percutaneous Incision Placement**

A 1cm stab incision is made horizontally and the blunt trocar and cannula are then passed through the stab incision.



### **Acetabular Reaming**

Pass the acetabular reamer through the main incision. The reamer shaft is passed through the cannula and mated to the reamer *in situ*.

