



Roborotic Lateral UKA

Sébastien LUSTIG MD, PhD

C. Batailler, E. Servien.

Orthopaedic surgery and sport medicine department

Lyon University Hospital, France





ROBOTIC SURGERY: EXPERIENCE WITH UNICOMPYLAR KNEE ARTHROPLASTY
S. LUSTIG, P. NEYRET

Robotic surgery ?

Navio



Surgical robotics has been shown to improve the accuracy of bone preparation and soft tissue balance in unicompartmental knee arthroplasty (UKA). However, although extensive data have emerged with regard to CT scan-based haptically constrained robotic arm [1], little is known about the accuracy of a newer alternative, an imageless robotic system.

The Navio™ Precision Freehand Sculpting system (DePuy™, Blue Belt Technologies, Inc., Plymouth, MN, USA) is an imageless handheld robotic tool (Fig. 1), implant planning, and development of the cutting zone take place entirely intraoperatively without the need for a preoperative CT scan. The system continuously tracks the position of the patient's lower limb and the handheld robotic device using an infrared navigation system. The system is imageless in as much as it does not use a CT or MRI, to map the femoral and tibial condyle surfaces. It therefore relies on accurate registration of intraoperative knee kinematic assessment, anatomical landmarks, and surface mapping of the knee using a calibrated optical probe designed for use with this robotic system.

After percutaneous insertion of bicalcular partially threaded pins into the proximal tibia and distal femur and attachment of optical tracking arrays (Fig. 2), mechanical and

osteotomies are performed and stable autoproximal axis of the distal femur is determined out by "de probe". The system continuously tracks the position of the patient's lower limb and the handheld robotic device using an infrared navigation system. The system is imageless in as much as it does not use a CT or MRI, to map the femoral and tibial condyle surfaces. It therefore relies on accurate registration of intraoperative knee kinematic assessment, anatomical landmarks, and surface mapping of the knee using a calibrated optical probe designed for use with this robotic system.

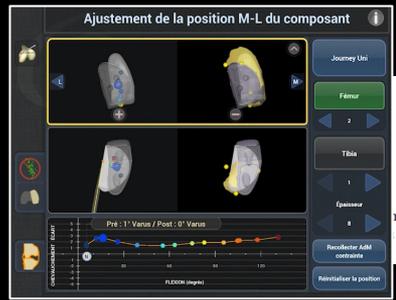
After percutaneous insertion of bicalcular partially threaded pins into the proximal tibia and distal femur and attachment of optical tracking arrays (Fig. 2), mechanical and

Sports Med Arthrosc. 2014 Dec;22(4):223-8. doi: 10.1097/JSA.000000000000053.

Lateral robotic unicompartmental knee arthroplasty.

Thein R¹, Khamaisy S, Zuiderbaan HA, Nawabi DH, Pearle AD.

Mako RIO



The Journal of Arthroplasty Vol. 27 No. 5

Accuracy of Dynamic Tactile-Guided Unicompartmental Knee Arthroplasty

Thomas J. Dunbar, BSc,* Martin W. Roche, MD,† Brian H. Park, BSc,* H. Branch, BSc,‡ Michael A. Condit, PhD,‡ and Scott A. Banks, PhD*

Timeline



2013

2015

2017

2019

2021

2022

*n= 50
Image free
Robotic TKA*

*n= 400
Image free
Robotic UKA*

*Image based
Robotic UKA/TKA*



	Robotic	Mechanical	p
IKS score - function	93 ±13	92 ±13	NS
IKS score - knee	90 ±11	88 ±15	NS

- No specific complication of the robot
- Early functional results Robotic = Mechanical
- Revisions rate **Robotic > Mechanical (Lateral)**
- Implants positioning **Robotic > Mechanical (Lateral and Medial)**

Lateral UKA	182° ±4	181° ±3	NS
-------------	---------	---------	----

HKA (°)

Knee Surgery, Sports Traumatology, Arthroscopy
<https://doi.org/10.1007/s00167-018-5081-5>

KNEE

Improved implant position and lower revision rate with robotic-assisted unicompartmental knee arthroplasty

Cécile Batailler¹ · Nathan White¹ · Filippo Maria Ranaldi¹ · Philippe Neyret¹ · Elvire Servien¹ · Sébastien Lustig¹



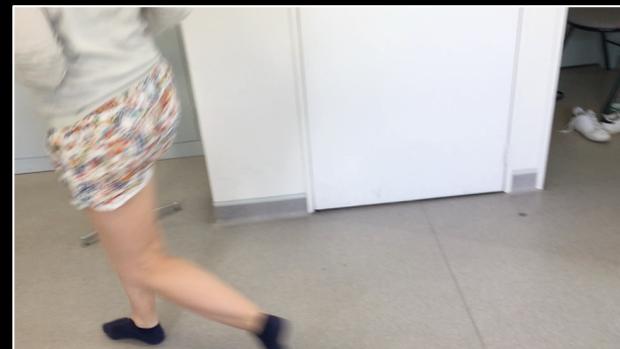
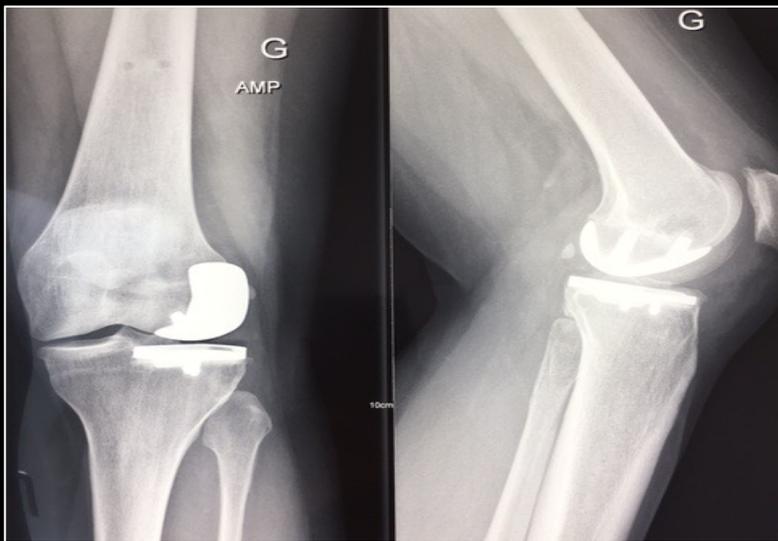
±3	NS
----	----

Outliers

1%)	0.006
-----	--------------

2%)	0.039
-----	--------------

2 months FU



Archives of Orthopaedic and Trauma Surgery (2018) 138:1765–1771
<https://doi.org/10.1007/s00402-018-3042-6>

KNEE ARTHROPLASTY



Faster return to sport after robotic-assisted lateral unicompartmental knee arthroplasty: a comparative study

R. Canetti¹ · C. Batailler¹ · C. Bankhead² · P. Neyret¹ · E. Servien¹ · S. Lustig¹



■ KNEE

Improved sizing with image-based robotic-assisted system compared to image-free and conventional techniques in medial unicompartmental knee arthroplasty

A CASE CONTROL STUDY

C. Batailler,
M. Bordes,
T. Lording,
A. Nigues,
E. Servien,
T. Calliess,
S. Lustig

Aims

Ideal component sizing may be difficult to achieve in unicompartmental knee arthroplasty (UKA). Anatomic variants, incremental implant size, and a reduced surgical exposure may lead to over- or under-sizing of the components. The purpose of this was to compare the accuracy of UKA sizing with robotic-assisted techniques versus a conventional surgical technique.

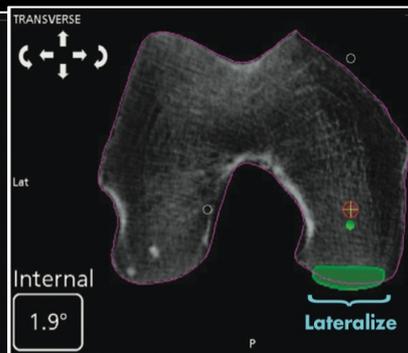
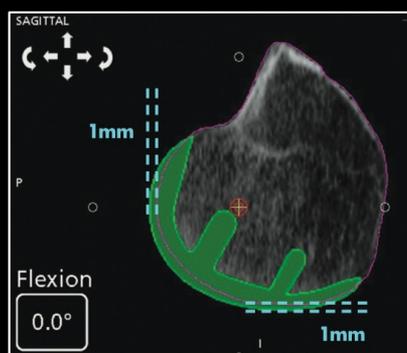
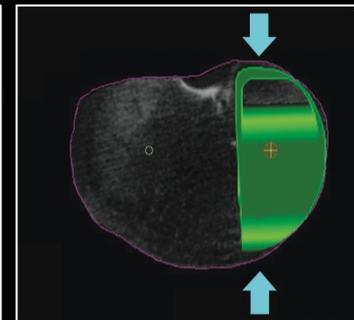
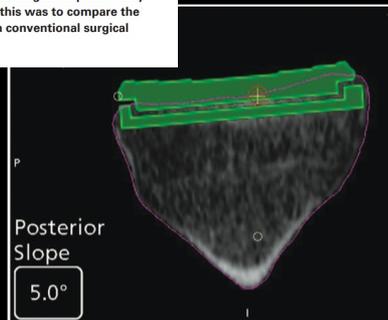
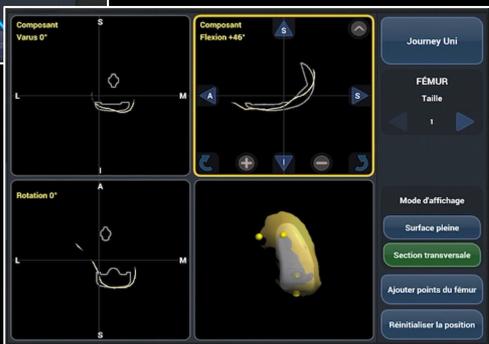




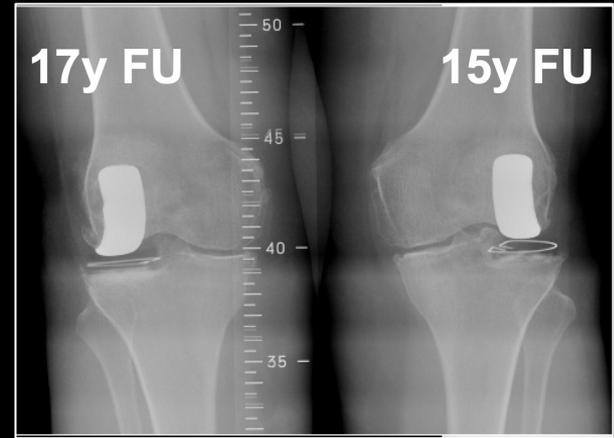
Image Based





Take Home Message

- *Lateral UKA has the potential to give better outcomes,*
- *Anatomy & biomechanics are on our side if we get the basics right,*
- *Excellent outcome even in young and active population,*
- *Robotic can help*



LYON - France



European
Knee
Society

Thank you

sebastien.lustig@gmail.com