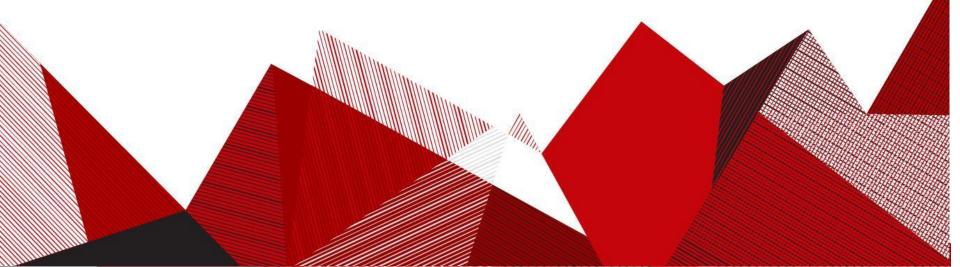
Osteochondral Transplant Delivery System

Team Leader: *Alex Teague* BPAG: *David Fiflis* Communicator/BWIG: *Alex Babinski* BSAC: *Zach Wodushek* Client: *Dr. Brian Walczak, DO* Advisor: *Dr. Tracy Puccinelli, PhD*



Client Overview

- Dr. Brian Walczak, DO
 - Orthopedic Surgeon
 - Faculty, University of Wisconsin School of Medicine and Public Health
- Specialties
 - Joint Preservation
 - Knee Arthroscopy
 - Pediatric Sports Medicine

Proposes a novel approach to osteochondral allograft (OCA) transplantation





University of Wisconsin Hospitals and Clinics Authority, "Brian E. Walczak, DO," *UW Health*. [Online].

Current OCA Transplantation Procedure

- Chondral defect is exposed and measured to determine the appropriate tool size (A)
- Guidewire is drilled into the center of the defect and surgical reamer removes defective tissue (B)
 - Depth markings on the reamer allow surgeon to drill to the proper depth
- Depth measurements taken about donor hole (C)



Current OCA Transplantation Procedure

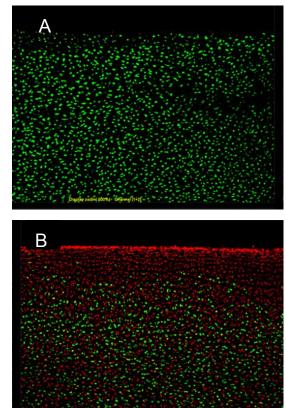
- Allograft harvested from cadaver condyle using hole-saw and oscillating saw (D)
 - Graft height trimmed to match depth of receiving hole
- Impaction rod and hammer secure the donor graft in the receiving hole (E)
- Donor graft aligned within ±1mm of native cartilage (F)



Garrett, J. (2016). Allograft OATS ® Resurfacing Technique for Articular Cartilage Restoration Surgical Technique. Atlanta, Georgia: Arthrex Inc.

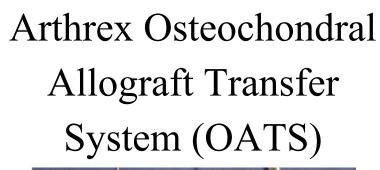
OCA Transplant Challenges

- Impaction is deleterious to chondrocyte viability [5]
 - Reducing impulse during impaction prevents chondrocyte damage
- Donor chondrocyte viability is a key determinant of OCA success [4]
 - Promotes graft integration, and maintains biomechanical function
 - All successful grafts showed viability >70% (t = 6 months)

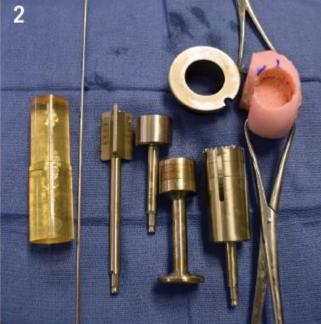


Live/dead stain after chondral impaction [5] A: Control B: 300 N Live: Green Dead: Red

Current Surgical Systems



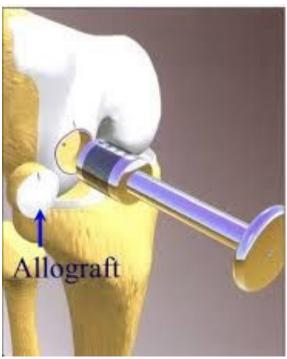
DePuy Synthes COR ® Precision Targeting System



Problem Statement

- Number of surgeries performed is increasing by 5% annually with an expected 3500 annual procedures by 2020. [2]
- Overall failure rate is 18% [3]
- Current impaction method reduces chondrocyte viability [1]
- Chondrocyte viability of 70% is the threshold for procedure success [4]
- Design a device to allow easy insertion of the graft while minimizing chondral damage

Approach We propose a screw-in allograft to replace the current impaction method



"Osteochondral Allograft Transplantation (OCA)," *Illinois Sports Medicine and Orthopaedic Centers*. [Online]. Available: [Accessed: 05-Oct-2017].

OCA Threading Prototype

Patient Receiving-Site Threading

- Stainless steel tap
- Guide-wire alignment

Cadaver Graft Threading

- Stainless steel die
- Graft holding cup

Idealized graft threading.

• Die orientation guide



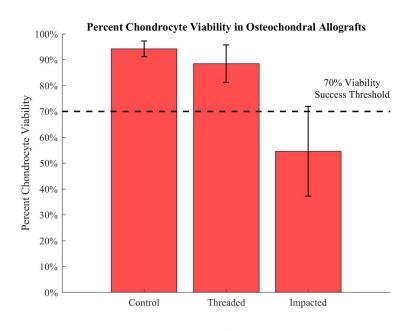
Graft insertion screwdriver.

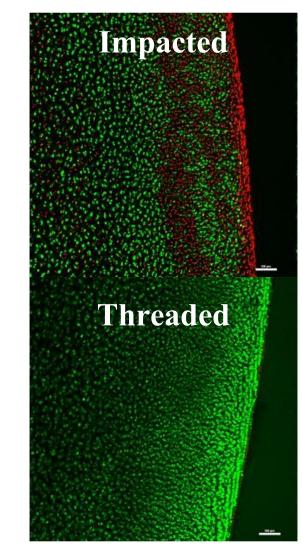


Graft threading die orientation guide.

OCA Threading Prototype Testing

- Live/dead assay of implanted porcine tissue
 - Confocal microscopy
 - Cellprofiler viability analysis





Live/dead stain after graft implantation Live: Green Dead: Red

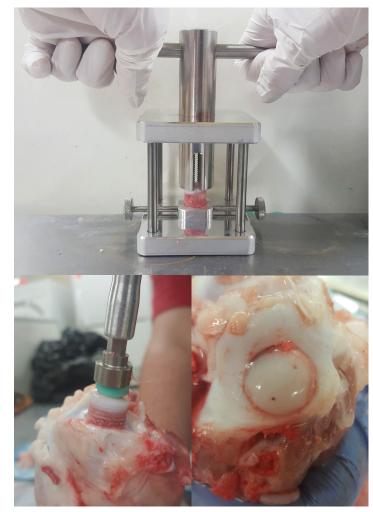
Summary of Previous Design Work

Design Successes

• Successfully showed that allograft threading can preserve chondrocyte viability

Design Shortcomings

- Did not address matching of allograft and native articular surfaces
 - Must match graft rotation and depth
 - Rotation and depth are coupled in a screw system
- Smaller pitch doesn't work with softer bone



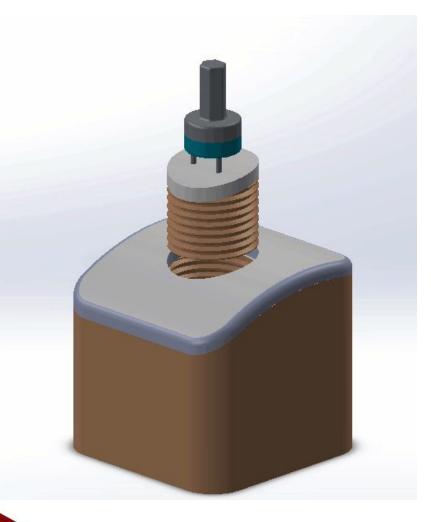
Current Design Challenges

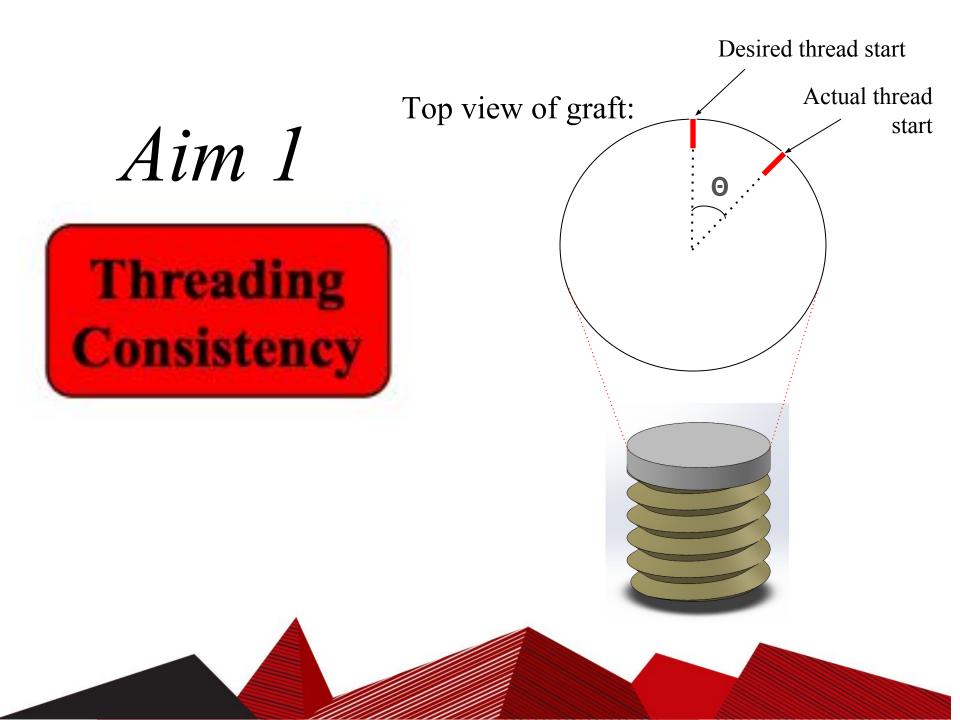
Matching graft to native surface

- Determine relationship between rotation and depth of graft
- Heights must differ by no more than 1mm

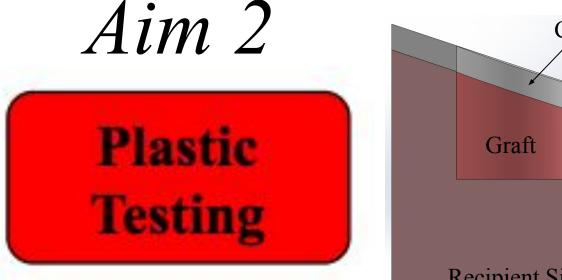
Measuring height offset

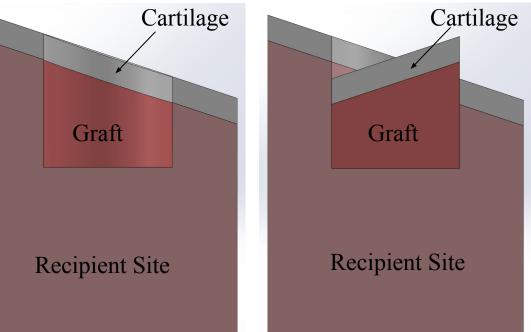
- Need to measure a small (1mm) height offset on a rounded surface
- 3D point cloud measurement
 - Obtained using laser scanners
 - Overlay and compare point clouds



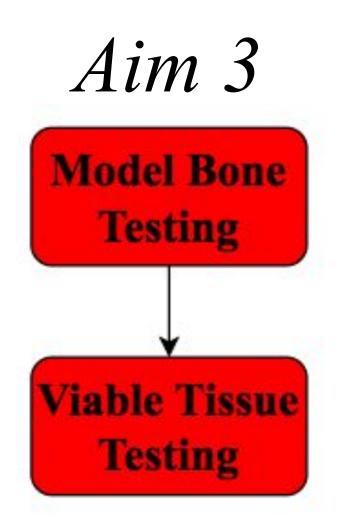


Desired Graft Rotation Undesirable Graft Rotation





Achieving intended graft rotation is essential for minimizing articular surface incongruities.

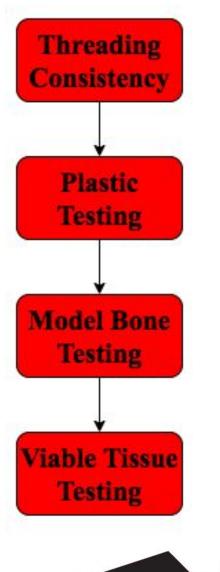




- Use non-viable porcine tissue or Sawbone
- Evaluation of surface geometry with 3D laser scanners

• Perform full procedure with chondrocyte viability and surface geometry considerations

OCA Prototype Future Work

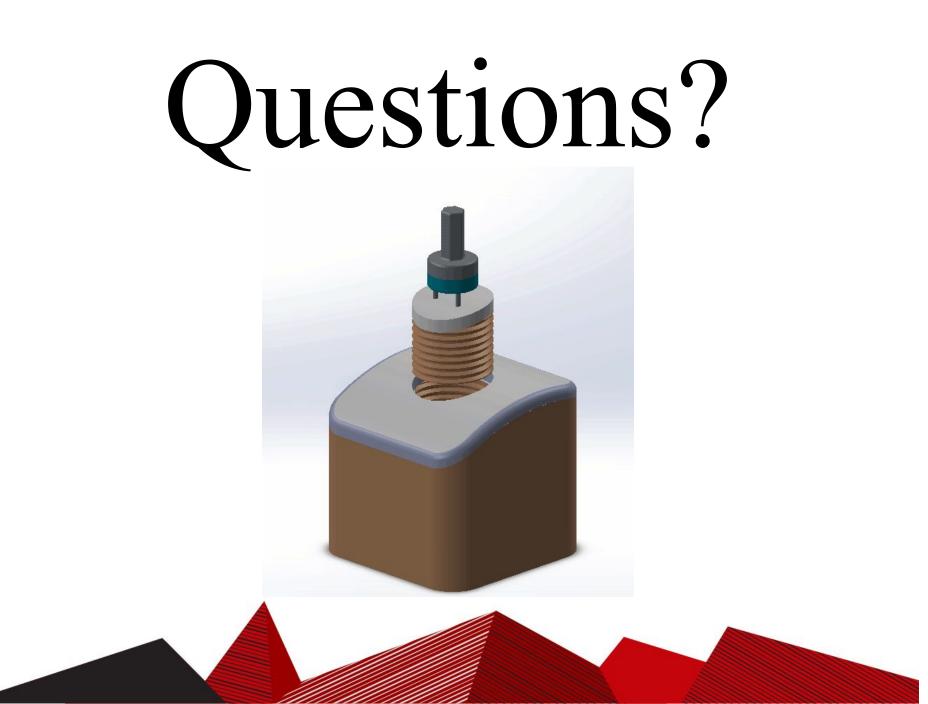


- Can we start threading where we want to?
- October 2018
- Can we match the surfaces of the graft and receiving site?
- October-November 2018
- Does our testing in plastic translate to bone geometry?
- November-December 2018
- Does our method improve procedural outcome?
- Spring 2019

Acknowledgements

We would like to thank our advisor Dr. Puccinelli, and our client Dr. Walczak for their help with the design process.

Thank you!



References

[1] A. M. Torrie, W. W. Kesler, J. Elkin, and R. A. Gallo, "Osteochondral allograft.," Curr. Rev. Musculoskelet. Med., vol. 8, no. 4, pp. 413–22, Dec. 2015.

[2] F. Mccormick et al., "Trends in the Surgical Treatment of Articular Cartilage Lesions in the United States: An Analysis of a Large Private-Payer Database Over a Period of 8 Years," Arthrosc. J. Arthrosc. Relat. Surg., vol. 30, pp. 222–226, 2014.

[3] Chahal J1, Gross AE, Gross C, Mall N, Dwyer T, Chahal A, Whelan DB, Cole BJ. (2013). Outcomes of osteochondral allograft transplantation in the knee. <u>Arthroscopy</u>. 2013 Mar;29(3):575-88. doi: 10.1016.

[4] Cook JL, Stannard JP, Stoker AM, et al. Importance of donor chondrocyte viability for osteochondral allografts. Am J Sports Med. 2016 May;44(5):1260-1268

[5] Kang RW, Friel NA, Williams JM, Cole BJ, Wimmer MA. Effect of impaction sequence on osteochondral fraft damage: the role of repeated and varying loads. Am J Sports Med. 2010 Jan;38(1):105-113.

