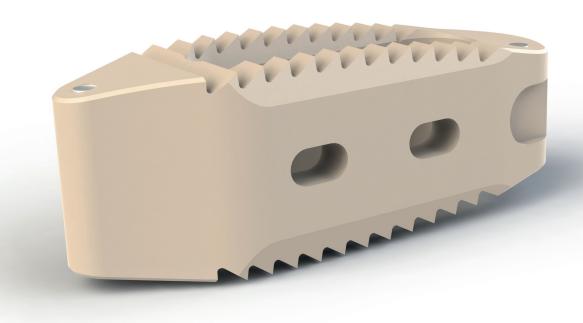


La Cage Rotatoire
The Rotating Cage



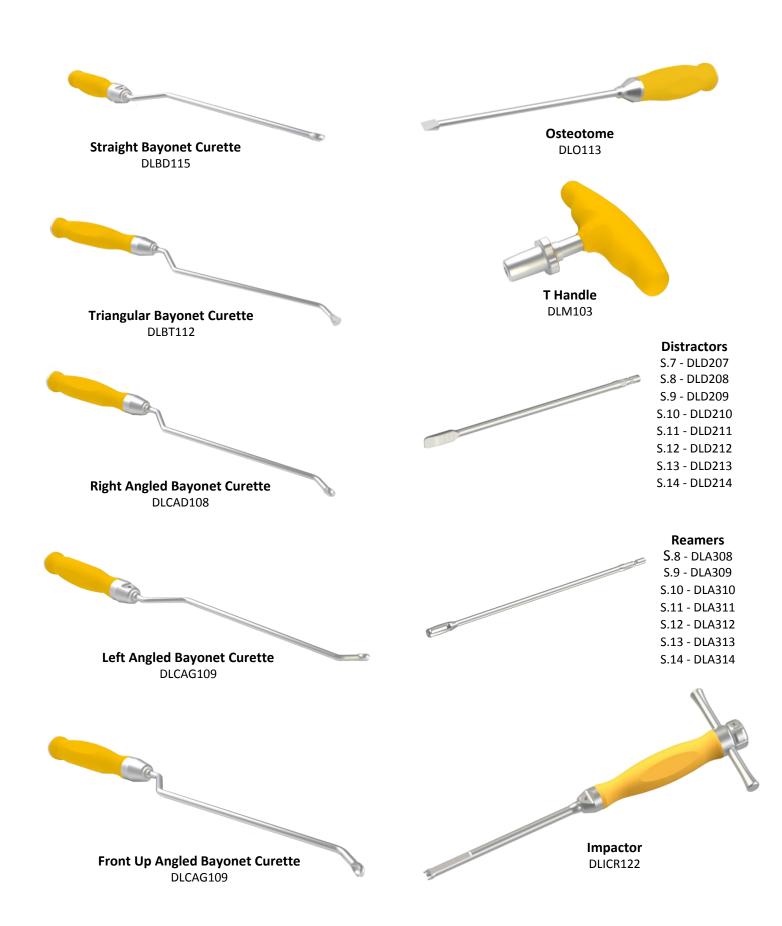
Surgical Procedure



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Instruments Range



Indications

The DIVA Twist Lumbar Interbody Device is indicated for spinal fusion procedures in skeletally mature patients with lumbar degenerative disc disease. Cages are implanted in lumbar spine between L1 and S1 levels, by a trans-lateral open or minimally invasive approach. The DIVA Twist Lumbar Interbody Device must be supplemented with a SOCORE posterior pedicle screws fixation.

Osteotomy & Discectomy

An osteotome may be used to prepare the discal space access (*Figure 1*). The facet joints must be carefully removed.



Figure 1

Curettes, Kerrisons and disc rongers may be used to remove bone and disc material and to prepare end-plates for the implantation and fusion (*Figure 2*).



Figure 2

Implant Size Selection

Once the end-plates prepared, distractors, assembled to T handle, are used to define the optimal size of DIVA Twist device. The smallest distractor size (S.7) is assembled to the T handle and inserted between the vertebrae horizontally (Figures 3a and 3b), then rotated to vertical position to test the stability (Figure 4). If the distractor is not stable, try the upper sizes until reaching the optimal size. The right-sized distractor must be stable. Once the size is defined, choose the corresponding DIVA Twist interbody device.



Figure 3b Figure 3a

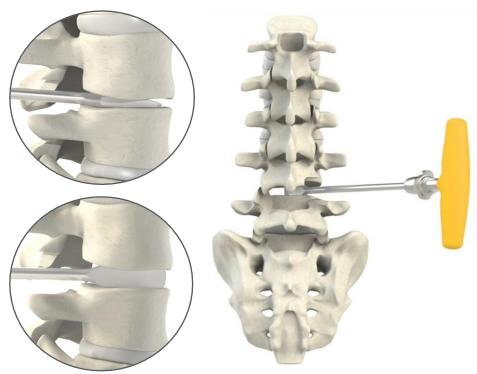


Figure 4

Implant Setting

Select the appropriate size of Twist Cage corresponding to the last distractor used. Fill the large central hole of the cage with autograft or bone substitute using the implant holder. Assemble the cage to the Impactor by screwing the inner threaded part to the back threaded hole of the cage (*Figures 5a* and *5b*). Additional bone graft can be added in the inter vertebral space before and/or after the cage implantation.

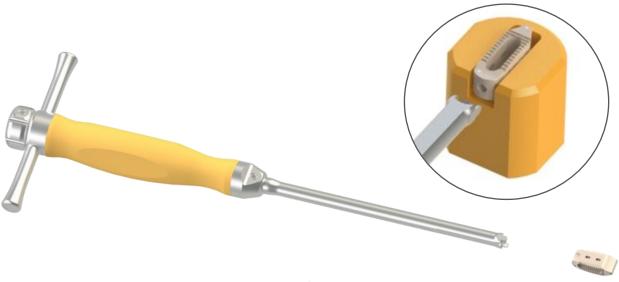
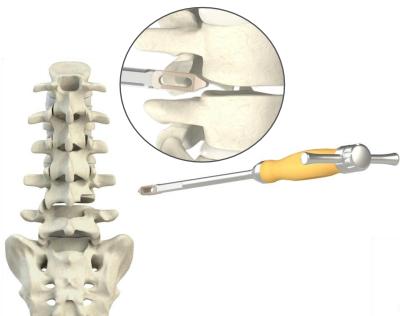


Figure 5a



Figure 5b

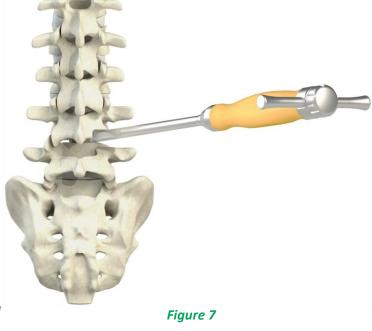
Implant Insertion



The tapered end of DIVA Twist device should be aligned with interbody space in order to fulfill its role of distractor during impaction (*Figure 6*).

Figure 6

Insert the Cage between the vertebrae by Trans-Lateral approach, in oblique direction, until reaching the desired depth (*Figure 7*). The cage should be placed in the center of the vertebra and the impactor held firmly during rotation to avoid lateral movement.



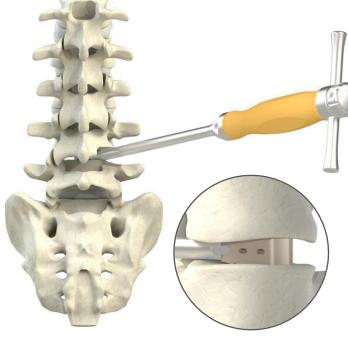


Figure 8

Rotate the impactor 90° to put the cage into final position (*Figure 8*). To obtain optimal positioning, the middle of the cage should correspond to the vertebra midline.

The DIVA Twist lumbar interbody cage can be inserted from left or right side.



Figure 9

The DIVA Twist Lumbar Interbody Cage must be supplemented with a SOCORE posterior pedicle screws fixation, as shown in *Figure 10.* A firm compression of the screws is recommended before the final tightening to avoid the mobility and migration of the cage.

The DIVA Twist Lumbar Cage is designed to restore the physiological lordosis (*Figrue 9*).

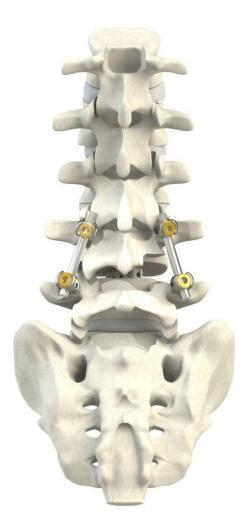


Figure 10

The surgical technique shown is for illustrative purpose only. The actual techniques employed will always depend on surgeons' medical judgment and can differ from one patient to another.



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