

# Room for improvement?



>50%

report some
degree of
limitation to
their functional
activities.8



20%

of total knee replacement patients report unmet levels of satisfaction.<sup>24</sup>

After total knee arthroplasty (TKA), patients may report their knee feeling 'artificial' with functional limitations. 10

The abnormal kinematics associated with conventional TKA may be contributing to these poor outcomes:



decreased satisfaction with daily activities<sup>8</sup>



**abnormal** gait patterns<sup>23</sup>



decreased stability<sup>25</sup>



decreased confidence<sup>9</sup>

From design concept to reality, new evidence shows when compared to conventional TKA, JOURNEY II TKA can give your patients:



Smoother Recovery<sup>1</sup>



Improved Function<sup>2-6</sup>



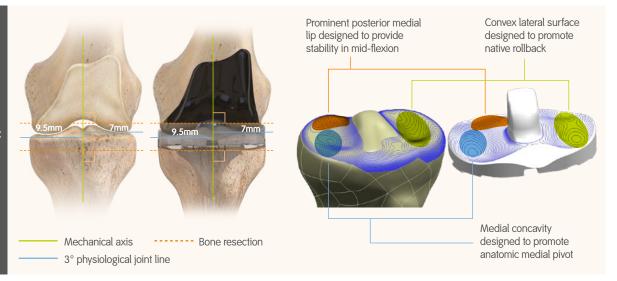
Higher Patient Satisfaction<sup>1,2,6,7</sup>



## Rediscover normal through design

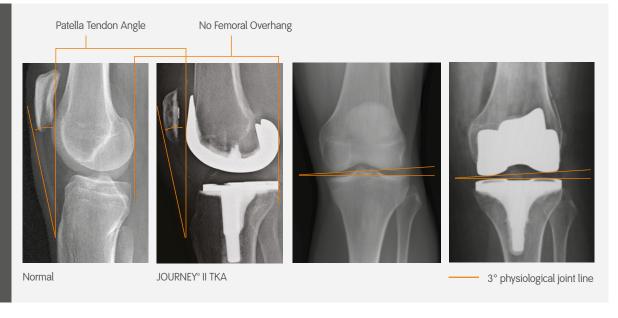
### Shape

Replication of anatomic asymmetric femoral and tibial profiles



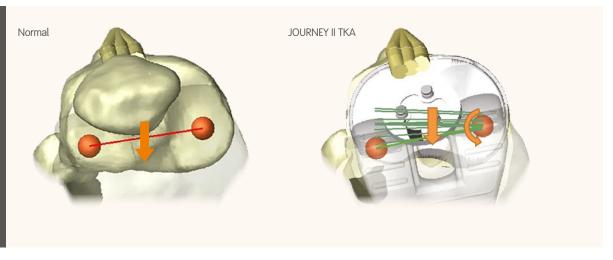
### Position

Restoration of native anterior/posterior (A/P) starting position and the anatomic 3° varus joint line



### Motion

Replication of native femoral rollback and axial rotation





# Smoother recovery

- Significantly lower risk of hospital readmission<sup>1</sup>
- Significantly reduced length of hospital stay and associated costs
- Significant and clinically relevant improvements in flexion at 6 weeks post-operative<sup>2</sup>

Compared with conventional TKA, patients with JOURNEY® II TKA were:1,26



less likely to be discharged to a skilled nursing facility (p<0.0001)

35%

more likely to be discharged to home (p=0.0008)

51%

less likely to be readmitted to hospital within 30 days (p=0.0037)



### Significantly reduced:1

Mean length of hospital stay (p<0.0001)

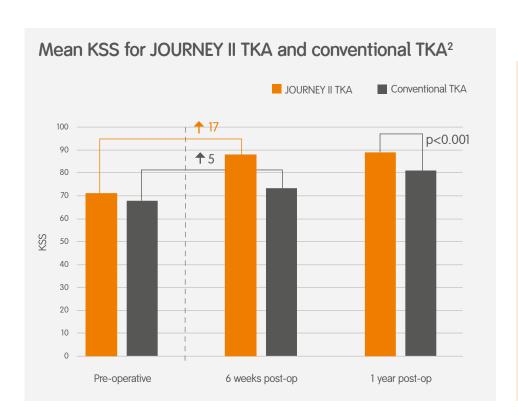


Mean patient hospital costs (↓\$1,690, p<0.0001)

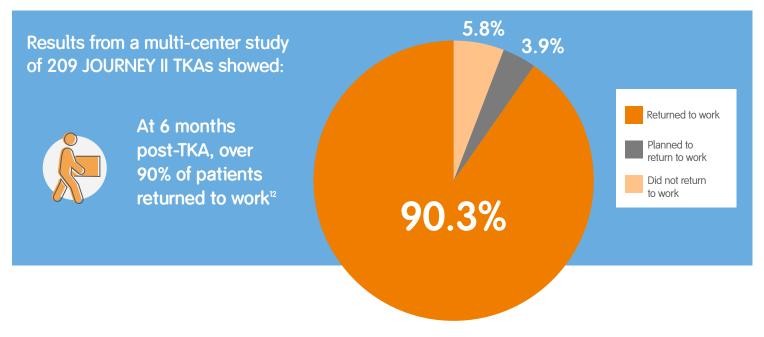




Recent evidence shows JOURNEY<sup>o</sup> II TKA demonstrates improvements in KSS scores compared to conventional TKA at 6 weeks and 1 year.<sup>2</sup>









- Kinematic patterns comparable to a native knee and Unicompartmental Knee Arthoplasty (UKA)<sup>13,14</sup>
- Significantly higher maximal flexion at one year compared to conventional TKA<sup>2,4-5</sup>
- Significant improvements in KSS compared to conventional TKA<sup>2,6</sup>





The fact that many patients are unable to return to prior level of function is likely attributable to differences in kinematics between the normal knee and a conventional TKA."



JOURNEY II TKA helps restore normal-like kinematic patterns<sup>13-15</sup> contributing to an improved functional outcome



Compared with conventional TKA, JOURNEY II TKA has shown significantly higher maximal flexion at one year<sup>2,4-5</sup>



improvements in Knee Society Scores (KSS) compared to conventional TKA<sup>2,6</sup>

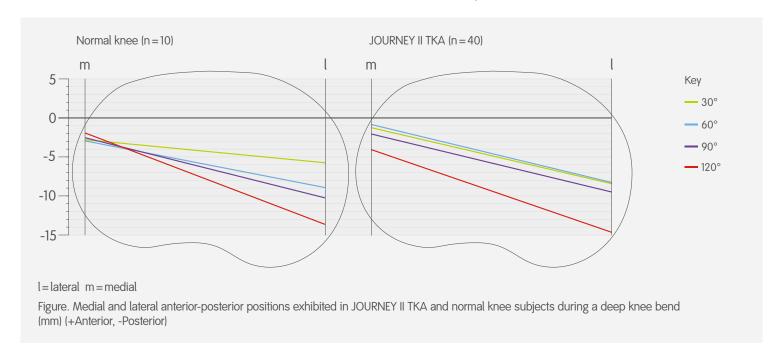
Significant



JOURNEY II TKA

provides ML stability<sup>16</sup>
which allows for a
normal-like medial
pivot movement of
the knee. This may
positively impact
patient satisfaction.

#### JOURNEY® II TKA has demonstrated normal-like kinematic patterns.14



#### JOURNEY<sup>®</sup> II TKA restores function comparable to the Oxford UKA and native knees<sup>13</sup>

In a recent study comparing JOURNEY II TKA (n=64) with Oxford UKA (n=50) and asymptomatic control knees (n=50), the results showed:13 JOURNEY II TKA is likely to reproduce native anterior and posterior cruciate function and native knee rollback.

A JOURNEY II TKA

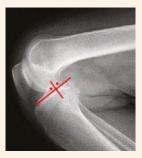
Rollback ratio =  $37.9 \pm 4.9\%$ Flexion angle =  $121.8 \pm 8.4^{\circ}$ 

B Oxford UKA



Rollback ratio = 35.7 + 4.2%Flexion angle =  $125.4 \pm 7.5^{\circ}$ 

C Control knee



Rollback ratio = 35.3 + 4.8%Flexion angle =  $127 \pm 10.3^{\circ}$ 

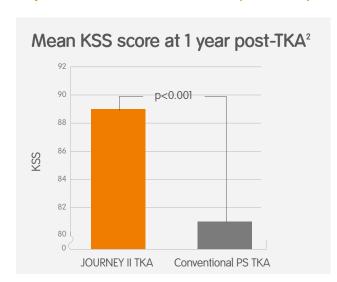
Together, these results suggest the dual cam-post design and asymmetric articular geometries of JOURNEY II TKA replicate ACL and PCL function of motion to deliver normal kinematic patterns.13,14

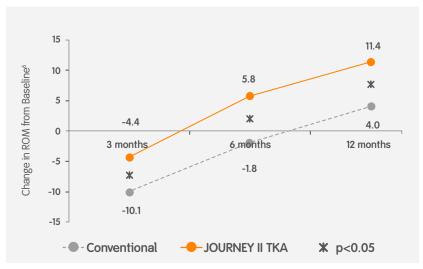
# Improved function

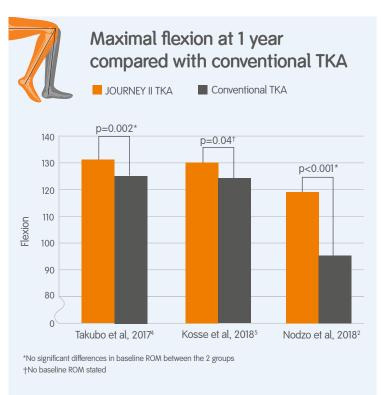


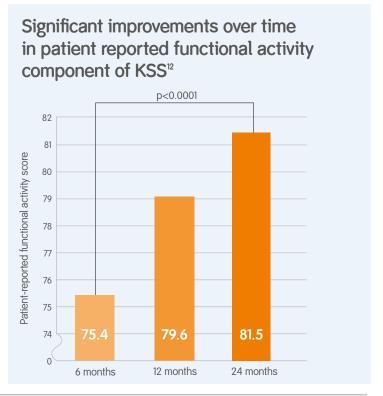
Postoperative range of motion is one of the most important factors influencing patient satisfaction after TKA, with limited flexion negatively impacting activities of daily living.<sup>17</sup>

Multiple studies have shown JOURNEY° II TKA to have significantly **higher maximal flexion and improvements in KSS** at one-year compared with conventional TKA.<sup>2, 4-6</sup>







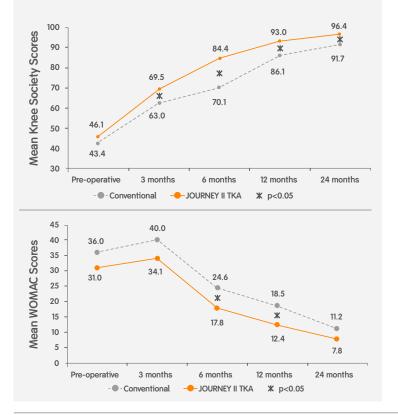


- Improvements in WOMAC and KSS are associated with higher patient satisfaction<sup>18,19</sup>
- Patients less likely to be readmitted to hospital within 30 days<sup>1</sup>
- Satisfaction levels comparable to patients undergoing total hip arthroplasty (THA)<sup>7</sup>

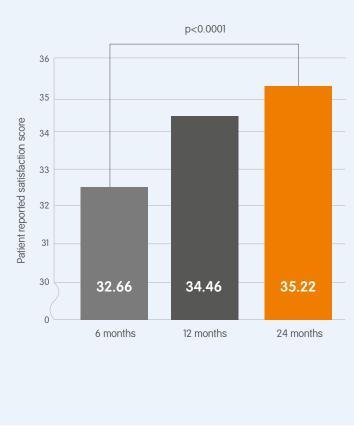


"Patients reporting their artificial joint as 'natural' as opposed to 'artificial' are more likely to report higher rates of satisfaction and have higher outcome scores." 20

Compared to conventional TKA, JOURNEY II TKA has reported significant improvements in WOMAC and KSS scores compared to conventional TKA (p<0.05).6



Significant improvements in patient satisfaction from 6 months post-op to 24 months.<sup>12</sup>





# Higher patient satisfaction

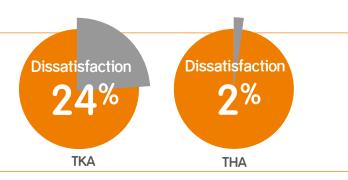


#### Why JOURNEY° II TKA?

The design features of JOURNEY II TKA have been shown to deliver improved flexion,<sup>2-6</sup> more normal-like kinematic patterns<sup>13,14</sup> and significant improvement in patient satisfaction<sup>1,2,6,7</sup> compared to conventional TKA.



A recent study confirmed that patient satisfaction following TKA remains significantly lower when compared with THA<sup>20</sup>







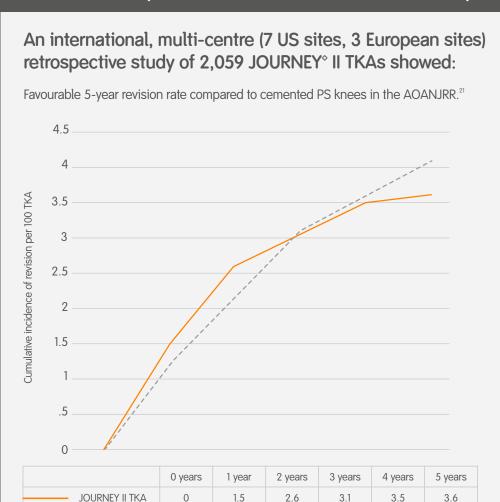


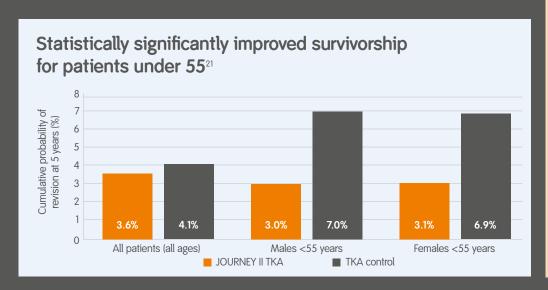
### Survivorship<sup>21</sup>

Favorable estimated rates of revision compared with PS cemented knees in Australian Orthopaedic Association National Joint Replacement Registry (AOANJRR)<sup>21</sup>

3.6

4.1

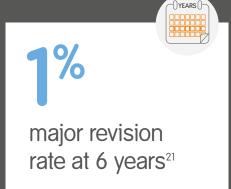




1.2

AOANJRR (PS)







### JOURNEY\* II TKA delivers:



### Smoother Recovery

- Significantly lower risk of hospital readmission<sup>1</sup>
- Significantly reduced length of hospital stay and associated costs<sup>1</sup>
- Significant and clinically relevant improvements in flexion at 6 weeks post-operative<sup>2</sup>



# Improved Function

- Kinematic patterns comparable to a native knee and UKA<sup>13,14</sup>
- Significantly higher maximal flexion at one year compared to conventional TKA<sup>2,4-5</sup>
- Significant improvements in KSS compared to conventional TKA<sup>2,6</sup>



# Higher Patient Satisfaction 12.6.7

- Improvements in WOMAC and KSS are associated with higher patient satisfaction<sup>18,19</sup>
- Patients less likely to be readmitted to hospital within 30 days<sup>1</sup>
- Satisfaction levels comparable to patients undergoing THA<sup>7</sup>

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