# **AOFE Clinics and Annatommie MC**

- in close cooperation with MRC Doorn and Radboudumc Nijmegen The Netherlands -



CLINICS

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Osseointegration is a method of anchoring a leg or arm prosthesis to the body.

By inserting an orthopedic implant into the bone, a prosthesis can be attached by means of an adapter and connector, the so-called click system.







## What is osseointegration





## **Advantages of osseointegration**

- 1. Better control over the prosthesis and more stability (safety)
- 2. Wearing time of the prosthesis increases significantly
- 3. Walking takes less energy
- 4. "Prosthesis feeling" (better contact with the ground)
- 5. Better seating comfort
- 6. Prosthesis does not come off while sitting / walking / cycling
- 7. Prosthesis is easy to put on and take off
- 8. No perspiration problems in summer
- 9. Standing shower





## **Disadvantages of osseointegration**

- 1. Stoma should be cleaned twice a day.
- 2. Risk of irritations and infections on/in the stoma
- 3. No contact sports, skiing, jogging





- To walk
- Bicycles
- Swimming (pool sea lake)
- Sauna
- Fitness





I have never regretted the decision to have osseointegration done. I am often asked: what is the advantage of this? then I say: 'I can walk again with and without my dog without stopping, cycling and sports (sitting volleyball), I am not so tired anymore, I have much less pain in my lower back and I am only more than 1 year further! I have my life back! And I continue......

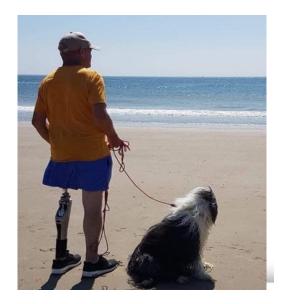
How the world has opened up for me again!

I keep walking on "my own" legs.

I did not use the wheelchair after March 15, 2018.

If only this had come my way years ago.

You really learn to walk again.





# Who is eligible for osseointegration?

- Prosthesis use less than 50 hours per week
- Walking distance less than 2 km
- Often skin problems because of the socket
- Uncomfortable sitting
- Release of the prosthesis during daily activities
- A lot of perspiration due to socket / liner





## Who is not a candidate for osseointegration?

- Severe diabetes
- Severe bone growth abnormalities or malformations
- Immature bone
- Bone diseases (stump bone infection)
- Chemotherapy
- Severe vascular disease in the legs
- Pain without a clear cause
- Overweight (BMI>30)
- Smoking





## **Treatment schedule**

### Surgery

- 1. Adjust stump and implant stem
- 2. Create a skin opening and mount dualcone adapter

Max two nights hospitalization

### Rehabilitation

3. After 4-6 weeks, the connector is attached and rehabilitation starts





## Below knee (transtibial): 4-6 weken

Week 1 and 2 walking in the bridge Weeks 3 and 4 walking with 1 or 2 crutches Week 4: walking without crutches and adjusting prosthesis

## Above knee (transfemoral): 4-12 weken

Week 1 and 2 practicing standing and walking in the bridge Week 3 walking in the bridge Week 4: walking with 2 crutches

Break

Weeks 5-12 or 10-20: Walking without crutches and adjusting prosthesis



## Contact

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