



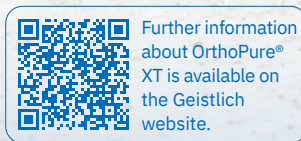
Advantages:

- *no need to harvest patient tissue*
- *biological material*



OrthoPure® XT:
*A solution for patients with
 torn knee ligaments who are
 considering reconstruction.*

The well-being of patients is Geistlich's top priority. That is why quality plays an important role right from the start – from the selection of raw materials to the means of production. As a pioneer in our industry, we attach great importance to the careful selection of partner products. Geistlich Select is our promise to you that we have chosen our partner products according to strict criteria, including the ability to meet our highest quality standards.



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OrthoPure® XT

Information for patients on knee ligament reconstruction surgery



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When the knee is unstable: Causes and consequences of a torn knee ligament

The anterior cruciate ligament (ACL) is one of several ligaments in the knee. It connects the thigh bone to the shin bone and provides stability during movement.

A cruciate ligament tear often occurs as a result of:

- sudden twists
- rapid changes of direction
- incorrect landings

Typical symptoms include a sudden popping sound in the knee, swelling, and instability when walking or standing.

Treatment options

During surgery, the damaged ligament is reconstructed using a replacement graft. There are three options available:

- **Own tendon (Autograft)**
- **Donor tendon (Allograft)**
- **Tendon from another species (Xenograft)**

With an autograft, tissue from the patient's own body is used, such as the patellar tendon, quadriceps tendon or one of the hamstring tendons. This requires an additional surgical site, which can lead to increased pain. Furthermore, recovery is longer and the risk of complications such as loss of strength or infection is higher. With an allograft, tissue from a human donor is used instead. This option does not require an additional surgical site. However, the availability and quality of the allograft can vary, and the decision often depends on the patient's preferences.

Xenograft

OrthoPure® XT offers a modern alternative to conventional auto- and allografts. Using OrthoPure® XT eliminates the need for an additional surgical site.

What is OrthoPure® XT?

OrthoPure® XT is a collagen-based implant used to treat torn knee ligaments. It is made from porcine tendon treated with dCELL® technology. The patented process removes native components to ensure the safety of the device.

Why porcine collagen?

Porcine collagen has been successfully used in medicine for many years, for example in heart valves or skin grafts. It is also frequently used to treat cartilage damage in the knee.

How does the implant work?

OrthoPure® XT acts as a scaffold that is gradually populated by the body's own cells. Over time, the implant is replaced by tissue produced by the body itself, enabling it to integrate optimally into the surrounding structures.

How is OrthoPure® XT implanted?

The implant is usually inserted arthroscopically (keyhole technique), a minimally invasive procedure. The surgeon inserts a small camera and surgical instruments into the knee joint through small incisions in order to place the implant precisely. This method is particularly gentle and facilitates healing.

Operation

Before surgery

It is important to reduce the swelling in your knee before the procedure. Your doctor may also recommend specific exercises to strengthen your knee and improve the outcome of the surgery.

During surgery

You will be given a general or local anaesthetic during the procedure. When OrthoPure® XT is used, no additional harvesting of the patient's own tissue is required. The tendon is inserted and secured in place. Depending on whether additional ligaments or the meniscus need to be treated, the surgery takes approximately 1–2 hours.

After surgery

You will spend a few hours in the recovery room immediately after the procedure, where your condition will be monitored. Once the anaesthetic has worn off, you may receive pain relief medication. Depending on your recovery progress, you may need to stay in hospital for up to three days. In many cases, however, the procedure can be performed on an outpatient basis, meaning you can leave the clinic on the same day. Patients are usually discharged with crutches and a knee brace. The medical staff will recommend a rehabilitation programme.

Physical therapy plays a key role in your recovery. It will help you gradually regain mobility and muscle strength contributing significantly to restoring knee function and stability. A personalised exercise programme will help you in returning safely and actively to everyday life. Typically, patients return to work within a few weeks, while resuming high-level sports activities may take six months or longer.

Important information

Please discuss any questions or potential risks thoroughly with your treating physician.

