Case Report
Right Hip AVN with CERAMENT™ Bone Void Filler: 6 month follow-up

Cecilia Pascual-Garrido, M.D.
CU Orthopedics, University of Denver, Denver, CO, USA
PATIENT
33-year-old female

**DIAGNOSIS**
- AVN of the right femoral head secondary to chronic steroids (Fig. 1)
- MRI showed no sign of collapse.

**TREATMENT**
- Using C-arm imaging core decompression is performed. A K-wire was manually introduced using the same drill hole. Using the K-wire as a guide, the tip extender from the CERAMENT™ device was introduced into the hole (Fig. 2). The K-wire was then removed and the CERAMENT™ injection device was attached to the tip extender.
- Under radiographic monitoring, CERAMENT™ BONE VOID FILLER was injected from the medial to lateral and from proximal to distal, beginning in the subchondral region. The device was slowly pulled out while injecting product. Radiograph was assessed for correct filling.
- 5cc of CERAMENT™ BONE VOID FILLER was injected.

**OUTCOME**
- Clinically the patient did very well. At 3 months post-op, the CERAMENT™ BONE VOID FILLER is no longer evident and there is complete resolution of AVN (Fig. 3).
- At 6 months post-op, the drilling area is nearly undetectable and there was no progression of disease (Fig. 4,5).
- Using CERAMENT™ BONE VOID FILLER reduced operating time to 40 minutes and allowed patient immediate weight bearing with crutches.
- Recovery and operative time were significantly improved.

Fig. 1 Pre-op
Fig. 2. Intra-op
Fig. 3. 3 months post-op
Fig. 4. 6 months post-op
Fig. 5. 6 months post-op

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OUR MISSION is to improve the lives of patients suffering from bone disorders that cause bone voids, lead to injury, breakage, pain, and reduced quality of life.

BONESUPPORT AB
Ideon Science Park,
Scheelevägen 19
SE-223 70 Lund, Sweden

T: +46 46 286 53 70
F: +46 46 286 53 71
E: info@bonesupport.com

www.bonesupport.com

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