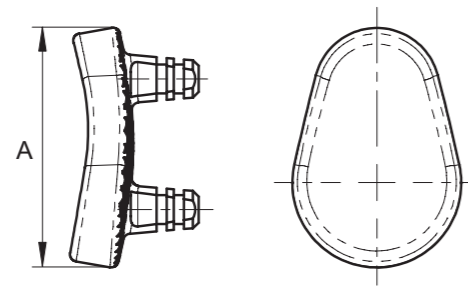


# Total Shoulder

## PE glenoid cemented

- UHMW-PE according to 5834-2
- Anatomical designed
- Peg degree is 10°, height is 9,35, 9,5 and 9,85mm.

size	A mm	Width inferior/ superior
2	Ø 33	23,2/ 16,8
3	Ø 35,8	25,2/ 18,7
4	Ø 39	29,1/ 22,5



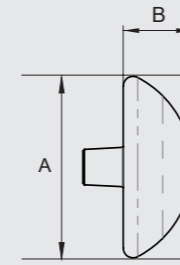
## AGILON® cap

- TiAl6V4 according to ISO 5832-3 with TiN surface engineering
- Available in 2 diameters, each with 3 thicknesses and can be inserted eccentrically in 12 different angles. Thereby the reconstruction of the original anatomy can be done more easily.



# SIZE

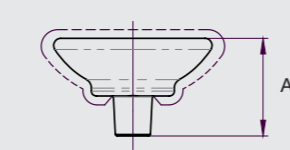
## AGILON® cap



AGILON® Cap	A(mm)	B(mm)
AGILON® cap 41mm	32	14
AGILON® cap 41mm	34	17
AGILON® cap 41mm	36,5	20
AGILON® cap 44mm	38,6	14
AGILON® cap 44mm	41,5	17
AGILON® cap 44mm	43,2	20

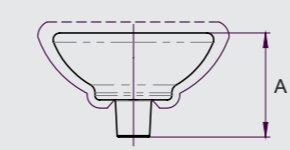
## AGILON® cap inverse

### AGILON® cap inverse



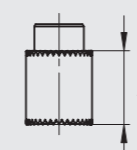
A(mm)	
Ø32mm	S 21 M 24 L 27
Ø36mm	S 21 M 24 L 27

### AGILON® retentive cap inverse



A(mm)	
Ø32mm	S 24 M 27 L 30
Ø36mm	S 24 M 27 L 30

## AGILON® extension piece



Extension Piece	A(mm)
AGILON® extension piece 7,5mm	8,4
AGILON® extension piece 10mm	10,9
AGILON® extension piece 12,5mm	13,4
AGILON® extension piece 15mm	15,9
AGILON® extension piece 17,5mm	18,4

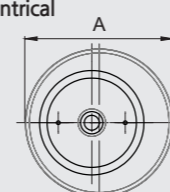
## PE-Glenosphere

### neutral



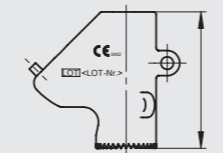
Glenosphere	A(mm)
PE-glenosphere (neutral)	32
PE-glenosphere (eccentric)	36

### eccentric

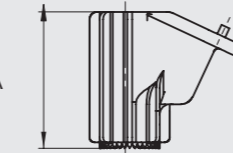


## AGILON® metaphyseal component primary

### Trauma

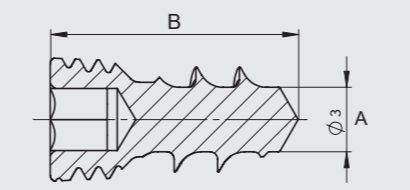


### Omarthrosis



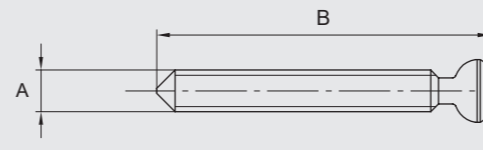
Methaphyseal Component	A(mm)
AGILON® metaphyseal component primary(Omarthrosis)40mm	37,2
AGILON® metaphyseal component primary(Omarthrosis)30mm	135° 27,2
AGILON® metaphyseal component primary(Trauma)30mm	27,2

## Cancellous screw angle stable lock Ø 4,2mm



Cancellous Screw Locked	A(Ø)	B(mm)
Cancellous Screw Locked		26
Cancellous Screw Locked		28
Cancellous Screw Locked	3	30
Cancellous Screw Locked		32
Cancellous Screw Locked		34

## AGILON® screw



AGILON® screw	A(Ø)	B(mm)
AGILON® Screw		26
AGILON® Screw	4	30
AGILON® Screw		34

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# AGILON®

THE MODULAR SHOULDER SYSTEM



# Hemi Shoulder

## AGILON® metaphyseal component primary

- TiAl6V4 according to ISO 5832-3
- 2 types available  
Trauma and Omarthrosis can be use among all AGILON® system.
- 36 teeth  
36teeth with 10° intervals facilitate retroversion adjustment during surgery.
- Pin  
Pin exists by 1mm intervals to prevent rotation.



- ▶ **36 teeth**  
• 36 teeth with 10° intervals facilitate 360° rotation.
- ▶ **8 pins**  
• 8 pins prevent rotation inside humerus and improve fixation. 6° interval cone angle allows to press-fit on cancellous bone.



## AGILON® stem cemented & cementless

- Cemented stem  
- CoCrMo according to ISO 5832-4
- Cementless stem (Corundum blaster technique)  
- TiAl6V4 according to ISO 5832-3

### Stem size

AGILON® Stem, Cemented (Diameter/length)	6/60mm	8/60mm	10/60mm	12/60mm
	6/90mm	8/90mm	10/90mm	12/90mm
	6/120mm	8/120mm	10/120mm	12/120mm

AGILON® Stem, Cementless (Diameter/length)	10/30mm	11/30mm	12/30mm	13/30mm	14/30mm
	9/60mm	10/60mm	11/60mm	12/60mm	13/60mm
	9/120mm	10/120mm	11/120mm	12/120mm	13/120mm
					14/120mm

# Total Shoulder Inverse

The Inverse System was added to treat patients with rotator cuff insufficiencies. AGILON® Inverse System is a modular type and consisting of two types of cemented and cementless type stem, extension piece, two types of Methaphyseal components and Inverse Cap, Glenosphere, Self-locking Screw and Base Plate. Unlike the competitive implants, AGILON® Inverse System improves the range of motion and reduce wear rate by swapping the material on Inverse Cap and Glenosphere. It is also easy to switch Inverse System after Hemi surgery without remove Stem.

## AGILON® cap inverse

- TiAl6V4 according to ISO 5832-3 with TiN surface engineering.  
TiN surface engineering can significantly reduce wear on the Glenosphere.

## PE-Glenosphere

- UHMW-PE according to ISO 5834-2
- Snap fit locking mechanism
- 2 types  
- 32 mm Neutral type: basic type  
- 36mm Eccentric type: Preventing scapula notching

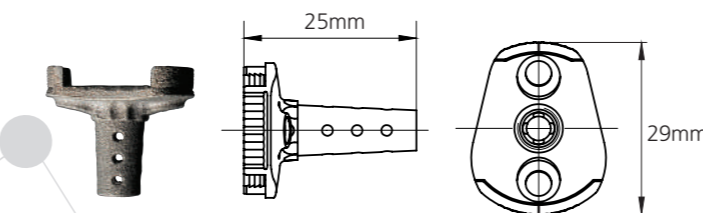
- 2 types  
- AGILON Cap Inverse  
- AGILON Retentive Cap: The Glenosphere can be overlapped and for preventing risk of dislocation, the height is 3mm higher than Inverse Cap.
- Cone length: 8mm

## Cancellous screw angle stable lock Ø 4.2mm

- TiAl6V4 according to ISO 5832-3
- From 20mm to 38mm by 4mm, 6 sizes exist.  
It can be locked freely angle with two screw up to 15 degrees.

## Glenoid Baseplate Cementless Anatomical

- Cp Ti according to ISO 5832-2
- Made of anatomical design with thinner superior and wider inferior
- Minimized bone resection for convex designed of backside.



# AGILON® History

The AGILON® Shoulder System was initially developed as a modular cemented trauma shoulder system for simple reconstruction. Later Inverse and Total Shoulder System has additional added to treat patients with rotator cuff insufficiencies. To make it easy to swap during the surgery, the AGILON® shoulder system is a complete modular type and all types of implants are made to compatible with each other.

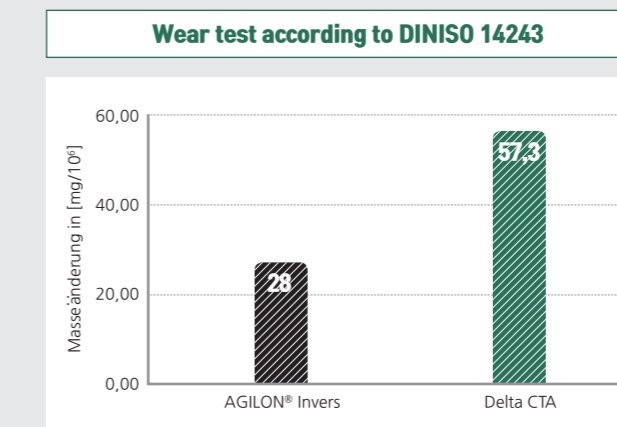
## Feature 1. Modularity

With the help of Extension Piece the proximal length of the implant can be extended from 7.5mm up to 17.5mm in steps of 2.5mm. The Extension Piece has 36 teeth on the both sides. It is also possible to do Inverse System after Hemi surgery and retroversion.

## Feature 2. Range of Motion (ROM)

The Glenosphere is made of UHMW-polyethylene. Self-cutting, angle stable cancellous screws can be used with the glenoid to support the primary stability. The chosen design offers the advantage of high range of motion, because the thickness of the Shoulder Cap Inverse is very thin.

## Feature 3. Wear Test Result



Wear test indicated less wear of this articulation compared to a system with metal glenosphere.  
\* Wear test according to ISO 14243, IMA Institute Dresden, test reports A 145/04 and A 145/06.

## Feature 4. Switch-over from Classic to Inverse implant version

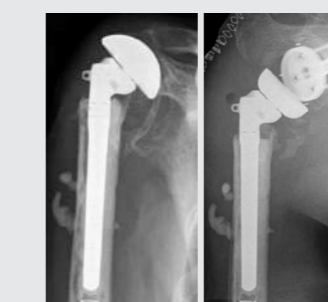


Figure A Figure B

The x-rays demonstrate a case in which necrosis of the tubercle leads to a cranial humerus decentralization (fia. A). This situation made the switch-over to the inverse version necessary (fia. B)  
**Notice:** For the primary treatment at least one extension piece should always be inserted. For a switch-over to an inverse prosthesis this piece can be removed to shorten the stem length. This leads to a lowering of the proximal implant components and optimizes the position of the prosthesis for the inverse prosthesis.