



*Preservation in motion*

ceramys

A pearl of ceramics

For healthcare professional use only. The illustrated image does not represent a connection between the use of the medical device described, nor its performance.

# History of Mathys ceramics

Since 1970, ceramic materials have been playing an important role in the area of joint replacement. In the early 1970s, the «Keramische Werke Hermsdorf, Bioceramics Department», later Mathys Orthopädie GmbH, were one of the first companies worldwide that developed and sold bioceramics for endoprosthetics.<sup>1,2</sup>

Ongoing research and development by Mathys result in continuous improvement of our existing materials.

In 2007, Mathys introduced dispersion ceramic – ceramys – (ATZ – Alumina-Toughened Zirconia) for use in hip endoprosthetics.

All Mathys ceramics are developed, produced and tested in-house.



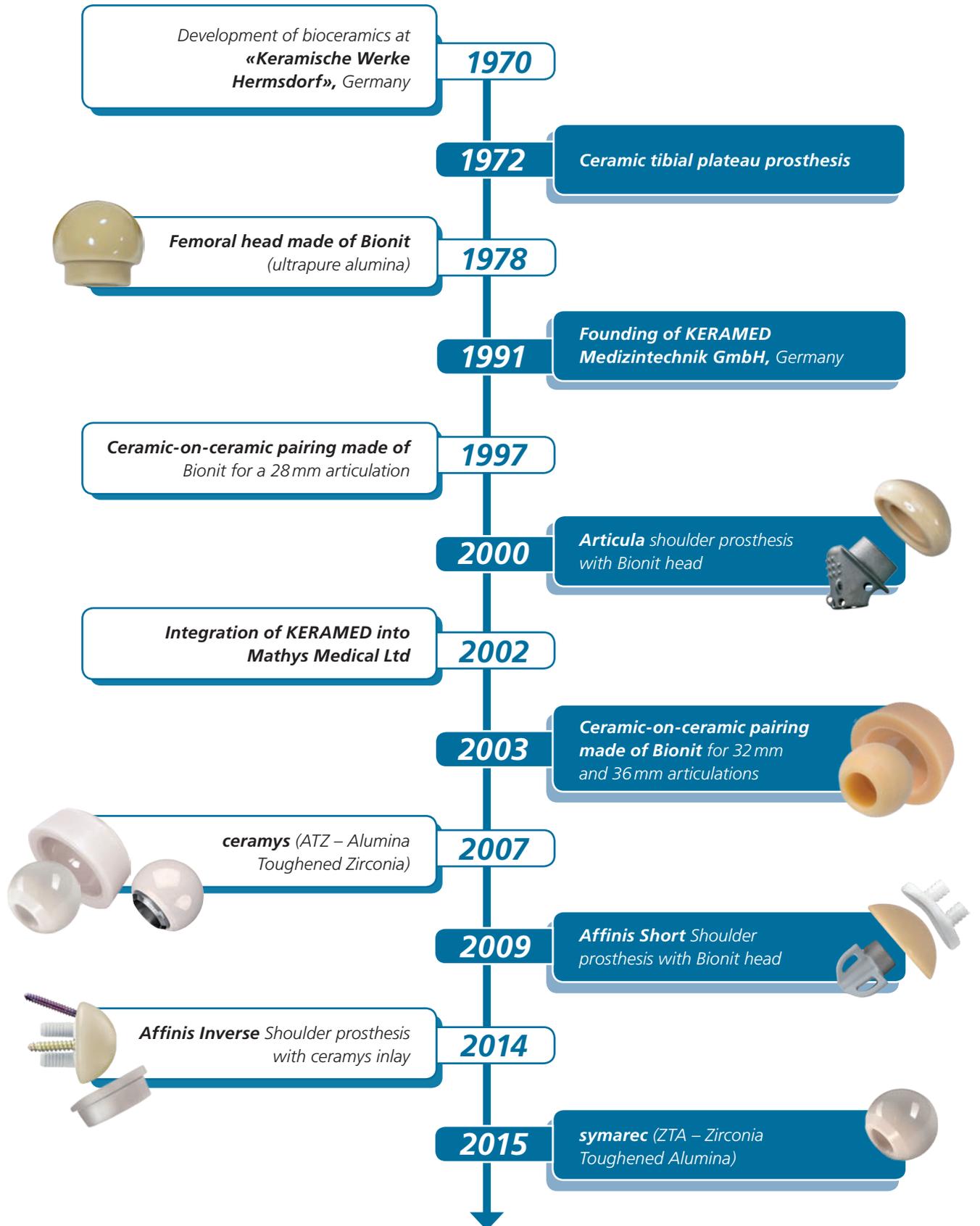
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*Building on our heritage*  
*Moving technology forward*  
*Step by step with our clinical partners*  
*Towards a goal of preserving mobility*  
**Preservation in motion**

*As a Swiss company, Mathys is committed to this guiding principle and pursues a product portfolio with the goal of further developing traditional philosophies with respect to materials or design in order to address existing clinical challenges. This is reflected in our imagery: traditional Swiss activities in conjunction with continuously evolving sporting equipment.*

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# 40 years of history, shaped by Mathys



# ceramys – a pearl of ceramics

The dispersion ceramic **ceramys** consists of a homogenous mixture of 20 % alumina and 80 % yttria-stabilised zirconia without additions. ceramys has high fracture resistance and offers additional solutions in the area of femoral heads for revisions

ceramys can be combined with the Mathys polyethylenes and all Mathys ceramics.

*ceramys – a material that combines the advantages of zirconia and alumina.*

## Advantages of ceramys

- High fracture strength<sup>3</sup>
- Reduced risk of chipping and surface roughening in the event of recurrent dislocations<sup>4</sup>
- Resistant to ageing<sup>5</sup>

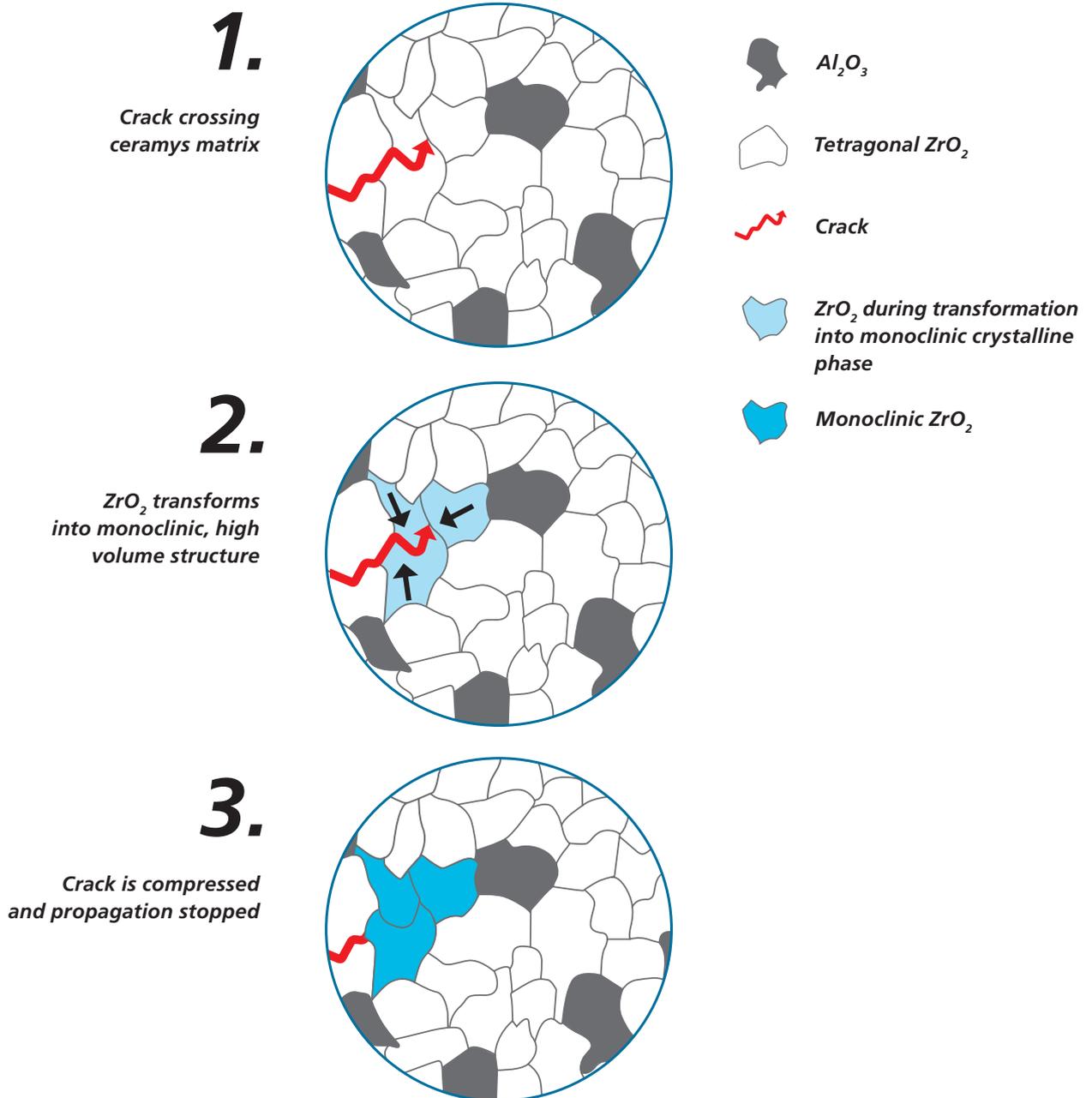


## ceramys – Material characteristics

Material characteristics	ceramys (ATZ)
Al <sub>2</sub> O <sub>3</sub> [% w/w]	20
ZrO <sub>2</sub> [% w/w] yttria-stabilised	80
Theor. density [g/cm <sup>3</sup> ]	5.51
Average grain size [µm]	0.4
Biaxial bending strength [MPa]	≥900
Fracture toughness (SEVNB) [MPa√m]	≥7

# Reinforcement power of zirconia

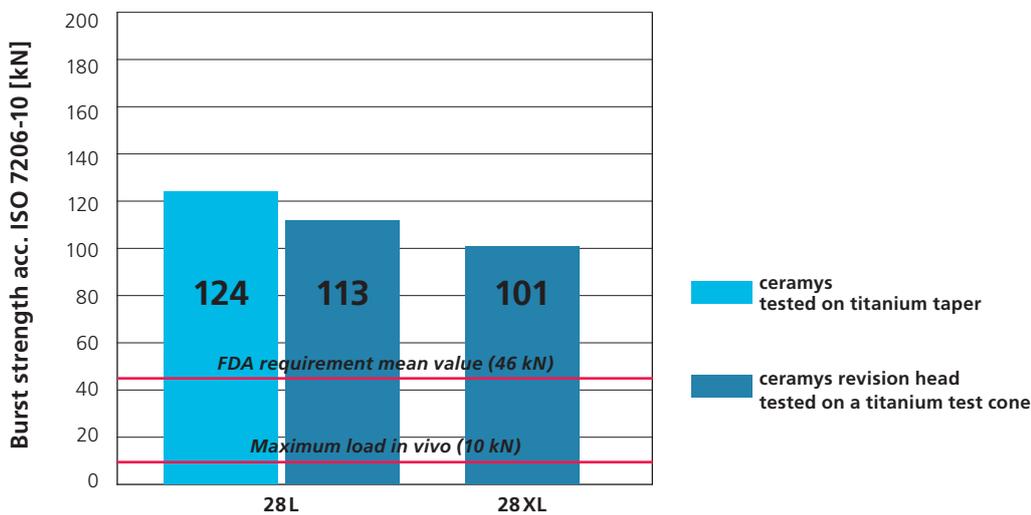
If a micro crack crosses the ceramys matrix, some of the zirconia particles will transform from tetragonal into monoclinic crystalline structure. This leads to an increase in volume, resulting in a local compressive stress field surrounding the crack tip. Hence, the crack propagation will be inhibited, resulting in enhanced fracture toughness.



# High strength

Despite all the advantages that a ceramic articulation offers,<sup>3-11</sup> such as low wear rates, high strength and toughness, low risk of surface roughening, good wettability and biologically inert behaviour, there is, however, still a concern regarding ceramic materials: They are relatively brittle and therefore have a residual risk of fracture. In the case of ceramys, this risk is reduced due to the combination of zirconia and alumina. When handled properly, ceramys offers high fracture resistance.

## Burst strength of Mathys ceramic femoral heads (28 L, XL) on cones made of titanium alloy<sup>6</sup>



During the burst strength testing according to ISO 7206-10, the ceramic heads are axial loaded until head fracture occurs. In vivo a load of around 10kN = 1 t can occur.<sup>7</sup> Even the ceramys head with the lowest strength due to the design (ceramys revision head 28XL<sup>6</sup>) withstands stresses of up to 100kN – thus ten times the in vivo loading. The burst strength raises with increasing head diameter and decreasing neck length. A ceramys head size 36S for example has a burst strength > 170kN.<sup>6</sup>

# High wear resistance

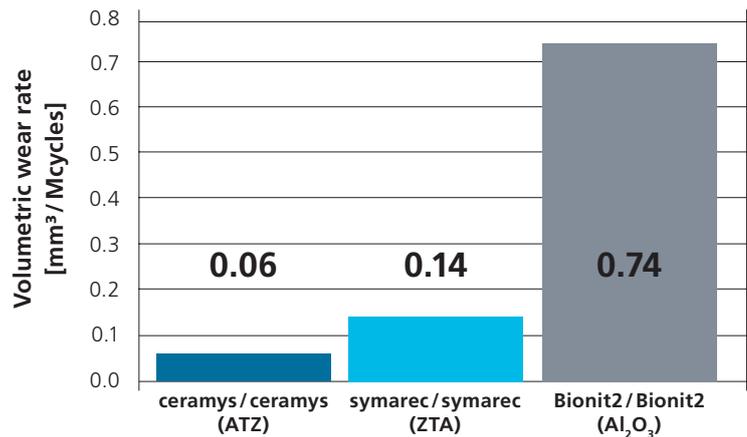
The advantage of ceramic materials is their low wear rates.

## Hip simulator test under microseparation conditions<sup>8</sup>

Independent wear tests in the hip simulator test under microseparation conditions show 58 % lower wear rates of ceramys pairings in comparison to ZTA pairings and 91 % less wear in comparison to alumina pairings.

Allergies or tissue reactions are not to be expected, since ceramys forms exclusively biologically inert wear particles.

## Wear rates in the hip simulator test with microseparation<sup>8</sup>

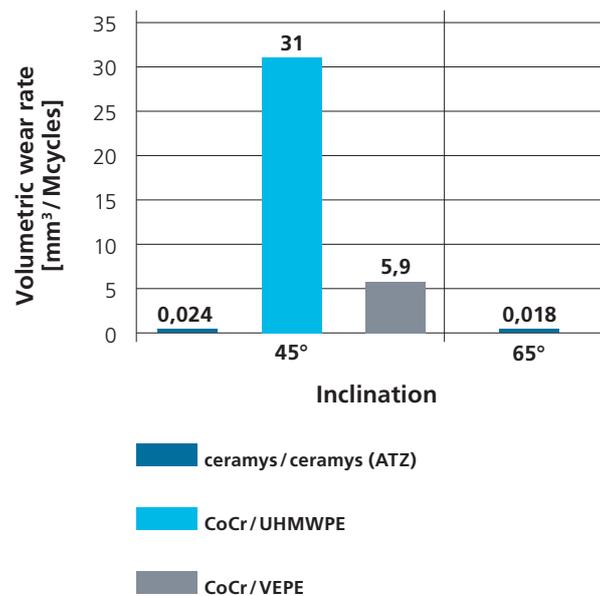


## Hip simulator test under edge loading<sup>9</sup>

Various material combinations were tested with a 28 mm articulation at the standard and the highest possible angle of inclination in the hip simulator (according to ISO 14242-1).

- At an inclination of 45°, ceramys-on-ceramys pairings have 1000 times less wear than CoCr-on-UHMWPE and 200 times less wear than CoCr-on-highly crosslinked vitamin E polyethylene (VEPE) pairings
- Edge loading does not show any negative influence on the wear behaviour of ceramys
- No surface roughening can be detected in the case of the ceramys pairing after 5 million cycles

## Hip simulator test under edge loading<sup>9</sup>



# ceramys revision heads – wear-resistant solution for demanding situations

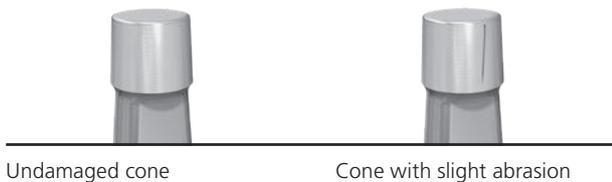


## One system – many options

ceramys revision heads offer a revision solution with decreased invasiveness.<sup>10</sup> In the case of a cup and/or femoral head revision, the surgeon has the option of putting a wear-resistant ceramic head onto a hip stem that is still in situ and firmly anchored.

- Available in four neck lengths: S, M, L and XL
- Femoral head and cup replacement without stem revision for all Mathys stem systems with a 12/14 cone
- Combination with the Mathys polyethylenes and Mathys ceramics

## Indication

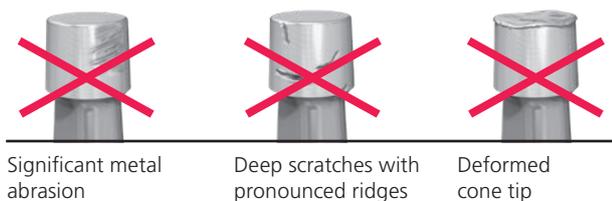


## Use also in case of slight wear of the surface of the cone

During the revision surgery, minor abrasions on the surface of the cone may occur, e.g. due to the extraction of the head.

**ceramys revision heads have high fracture resistance. They are indicated for undamaged cones and cones with minor abrasion.**

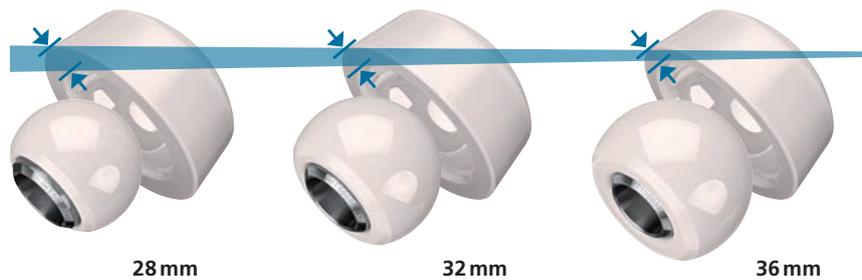
## Contraindication



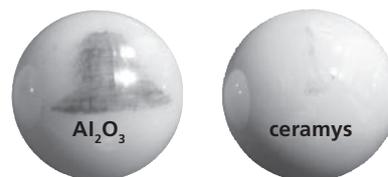
A contraindication for the revision head is heavy wear or damage to the stem cone, as it can occur e.g. after a ceramic head fracture. In this case, the stem must be replaced.

# ceramys inlays – reduced risk of surface roughening

ceramys inlays can be combined with the modular seleXys and aneXys cup system. The design and wall thickness of these shells are based on the requirements of the ceramic inlays.



The resistance against surface damage of the 28 mm ceramic articulation partners (head and liner) was investigated using a special luxation apparatus. With the use of ceramys, the risk of damage to the ceramic components from hard-on-hard pairings in cases of repeated postoperative dislocations or subluxations could be significantly reduced in comparison to alumina ceramics<sup>4, 12</sup> (see figures on the right).



Reduced surface roughening with ceramys

# Recommendations for the safe use of ceramys heads and inlays

## **1. The cone of the stem and the shell must be dry and free of any foreign bodies (e.g. soft tissues or bone or cement particles)**

- A cone contaminated with fluids or fats can lead to reduction in strength by up to 60 % and increase the risk of premature implant failure.<sup>13</sup>

## **2. Handle all ceramic components with care**

- Ceramic heads are to be fixated with positive fit onto the cone (applying rotation and axial pressure). No metal hammer may be used for fixation.
- When using the ceramys revision head, first the head – undamaged and clean – is placed on the sleeve. Then the assembled ceramys revision head is fixated with positive fit onto the cone (applying rotation and axial pressure). No metal hammer may be used for fixation.
- Ceramic inlays are manually placed into and centred in the shell. With a stroke on the plastic impactor, the inlay is secured in the shell.
- Ceramic implants that have fallen onto the floor or onto a hard surface must not be used.

## **3. Cup positioning**

- Inclination between 40 and 50°
- Recommended anteversion between 10 and 20°

Outside of these limit values, the range of motion may be restricted, which can lead to impingement of the implant components and subluxation and/or dislocation of the femoral head out of the cup. In such a case, a hard-on-soft pairing is to be used.

## **4. Trial components**

In the case of ceramic-on-ceramic pairings, use of trial implants is always recommended. No ceramic-on-ceramic pairings may be used if there is a risk of impingement between the hip stem and cup. In such a case, a hard-on-soft pairing is to be used.



**Please note that ceramic components must not be resterilised. Before using an implant manufactured by Mathys Ltd Bettlach, familiarise yourself with the warnings, safety information and recommendations listed in the package insert and surgical technique.**

# Ceramic portfolio

Cup size	Head size		
	28 mm	32 mm	36 mm
44			
46			
48			
50			
52			
54		*	
56		*	
58		*	
60		*	
62		*	
64		*	
66		*	*
68		*	*
70		*	*
Heads			
	S M L XL	S M L XL	S M L XL

- ceramys inlay
- ceramys head
- symarec head
- ceramys revision head

\* Available only for the aneXys cup system

**Mathys ceramic inlays** may be combined exclusively with **Mathys ceramic heads** and ceramys revision heads.

**Mathys ceramic heads and ceramys revision heads** can be combined with cups and inlays by Mathys that are made of ceramic or polyethylene. Combination with ceramic inlays by other manufacturers or with inlays made of metal is not permitted.

# How to proceed in case of a revision

## Pairing options for revision cases following ceramic breakage

**Ceramic-Ceramic (CoC):** Combination with low risk of wear

**Ceramic-PE (CoPE):** Acceptable combination, but increased wear may occur in comparison to a primary ceramic-on-ceramic or ceramic-on-PE pairing. CoPE can be used after ceramic failure whereas CoC may not be implanted.

**After ceramic breakage, no metal-on-metal pairings or metal-PE pairings may be used, since these can lead to increased metal wear.<sup>14</sup>**

It is not permissible to insert a new ceramic inlay into an already implanted shell, since the cup may be damaged. Replacement of the cup is necessary if another ceramic-on-ceramic pairing is to be used.



*Mathys is one of the world's few manufacturers of orthopaedic ceramic implants. Mathys combines high competence in bioceramics and long-term experience in orthopaedic technologies in one company.*

*Development of innovative ceramics, modern production, as well as competent and direct customer support – this is what Mathys stands for!*



# References

- <sup>1</sup> P. Boutin. «Arthroplastie totale de la hanche par prothèse en alumine frittée»; *Revue de Chirurgie orthopédique et réparatrice de l'Appareil moteur (Paris)* 58, pp 229-246, 1972.
- <sup>2</sup> H. Lang. «Tibiaplateauprothesen aus Aluminiumoxid – Indikation und Ergebnisse»; *Hermsdorfer Technische Mitteilungen* 23, 62, pp 1974-1975, 1983.
- <sup>3</sup> Data on file at Mathys Ltd Bettlach
- <sup>4</sup> T. Oberbach, S. Begand, W. Glien, C. Kaddick. «Luxation test of different ceramic on ceramic couplings»; *Key Engineering Materials Vols. 330-332*, pp 1235-1238, 2007
- <sup>5</sup> S. Begand, T. Oberbach, W. Glien. «ATZ – A New Material with a High Potential in Joint Replacement»; *Key Engineering Materials Vols. 284-286*, pp 983-986, 2005
- <sup>6</sup> Data on file at Mathys Ltd Bettlach
- <sup>7</sup> G. Bergmann, F. Graichen, A. Rohlmann. «Hip joint loading during walking and running, measured in two patients»; *J. Biomechanics* Vol. 26, No. 8, pp 969-990, 1993
- <sup>8</sup> Al-Hajjar et al. «Wear of novel ceramic-on-ceramic bearings under adverse and clinically relevant hip simulator conditions»; *J. Biomed. Mater Res B: Applied Biomater*, 101(8), pp 1456-1462, 2013
- <sup>9</sup> JJ. Halma et al. «Edge loading does not increase wear rates of ceramic-on-ceramic and metal-on-polyethylene articulations»; *J Biomed Mater Res Part B*, 102(8), pp 1627-38, 2014
- <sup>10</sup> D. Ganzer, L. Forke, U. Irlenbusch. «Two-year follow-up of revision total hip arthroplasty using a ceramic revision head with a retained well-fixed femoral component: a case series»; *Journal of Medical Case Reports*, 8(1), pp 434, 2014
- <sup>11</sup> U. Holzwarth, G. Cotogno. «Total Hip Arthroplasty. State of the Art, Challenges and Prospects»; *JRC Scientific and policy reports*, July 2012
- <sup>12</sup> Data on file at Mathys Ltd Bettlach
- <sup>13</sup> V. Wuttke, H. Witte, K. Kempf, T. Oberbach, D. Delfosse. «Influence of various types of damage on the fracture strength of ceramic femoral heads»; *Biomed Tech (Berl)*, 56(6), pp 333-339, 2011
- <sup>14</sup> M. Rinne, P. Willemse, P.C. Rijk, M. Hoogendoorn, W. P. Zijlstra. «Fatal Cobalt Toxicity after a Non-Metal-on-Metal Total Hip Arthroplasty»; *Case Reports in Orthopedics* Volume 2017, 2017

## Further literature:

- T. Oberbach et al. «In-vitro wear of different ceramic couplings»; *Key Engineering Materials Vols. 330-332*, pp 1231-1234, 2007
- T. Oberbach. «Current state and future trends in bioceramics for orthopaedic application»; *ICC2 Proceedings Verona*, June 29-July 4, 2008
- S. Begand, T. Oberbach, M. Herrmann, K. Sempf. «Inspection of microstructure and phase composition of a dispersion ceramic after hydrothermal treatment»; *ICC2 Proceedings Verona*, June 29-July 4, 2008
- T. Oberbach, S. Begand. «Dispersion ceramics, improved ageing resistance»; *Move* 40, April/May 2009
- S. Begand, T. Oberbach, W. Glien. Poster to publication; *Key Engineering Materials Vols. 330-332*, pp 1227-1230, 2007
- S. Begand, T. Oberbach, S. Glien. «Investigations of the mechanical properties of an alumina toughened zirconia ceramic for an application in joint prostheses»; *Key Engineering Materials Vols. 284-286*, pp 119-1022, 2005



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