

ANTERIOR ADVANTAGE™ Hip Replacement
Facility News Release Template
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FOR IMMEDIATE RELEASE

CONTACT: [Insert Name and Phone Number]

**AN INNOVATIVE APPROACH TO HIP REPLACEMENT SURGERY MAY RESULT IN
LESS TIME IN THE HOSPITAL, QUICKER RECOVERY AND LESS PAIN**

**[INSERT NAME OF HOSPITAL] Offers ANTERIOR ADVANTAGE™ Hip Replacement,
a Technology-Assisted, Minimally Invasive Alternative to
Traditional Hip Replacement Surgery**

[INSERT CITY, STATE - DATE] – Hip replacement is a common surgery, with more than 400,000 procedures performed in the United States each year¹. However, surgeons may choose from different approaches to perform their patients' surgery. The anterior approach to hip replacement is a minimally invasive surgical technique in which surgeons make an incision at the front of the hip and work between the muscles to keep them intact, instead of working through the buttocks or side of the hip as is common with traditional hip replacement.

An innovative way to perform the anterior approach is called ANTERIOR ADVANTAGE™ Hip Replacement and is now being performed by doctors at [INSERT NAME OF HOSPITAL].

ANTERIOR ADVANTAGE Hip Replacement goes beyond the anterior approach technique and includes technologies that help improve the surgical experience for patients. These include:

- KINCISE™ Surgical Automated System, an exclusive DePuy Synthes technology, which enables surgeons to automate and improve the precision of key steps during hip replacement surgery.
- VELYS™ Hip Navigation, also an exclusive DePuy Synthes technology, which aids in accurate implant placement.
- The Hana® Orthopedic Table was designed to allow surgeons better access to the hip joint to support accurate leg length assessment and implant placement. (Other orthopedic tables may also be utilized with this approach.)
- Clinically successful hip replacement implants that are designed to act much like a natural hip, enabling smooth movement, increasing joint stability and reducing pain.

ANTERIOR ADVANTAGE Hip Replacement is a technology-assisted, minimally invasive procedure for hip replacement surgery that is associated with less pain^{2,3,4} faster recovery^{2,4,5} a reduced length of hospital stay^{2,5,6} and the need for fewer narcotics to relieve pain after surgery^{3,6,7,8} – compared to patients who have undergone traditional hip replacement surgery.

ANTERIOR ADVANTAGE Hip Replacement is a strong option for patients who have avoided hip replacement because they feared a lengthy and painful recovery.

[CONSIDER INCLUDING A QUOTE THAT SHARES A PHYSICIAN'S PERSPECTIVE ON ANTERIOR ADVANTAGE HIP REPLACEMENT BASED ON HIS/HER PATIENTS' RESPONSE TO THE SURGERY.]

[INSERT NAME OF PATIENT, AGE] worked as a [DESCRIBE JOB AND ACTIVITIES HE OR SHE PARTICIPATED IN BEFORE HIP PAIN DISRUPTED HIS/HER DAILY LIFE]. But at the age of [INSERT AGE WHEN HIP SYMPTOMS STARTED, INSERT NAME] began experiencing pain in [HIS/HER] hip, a pain that grew progressively worse over the next [INSERT NUMBER OF YEARS WITH HIP PAIN] years. After years of treating [HIS/HER] pain with pain medication, changes in everyday activities and physical therapy, putting off hip replacement no longer seemed like an option. Doctors told [NAME] that [HE/SHE] needed surgery to replace the damaged bone and cartilage in [HIS/HER] hip with an artificial ball and socket.

[CONSIDER INCLUDING A QUOTE FROM THE PATIENT THAT DESCRIBES:]

- His/her hip pain and how it interfered with daily life
- How he/she made the decision to have hip replacement surgery
- How the referral process to an orthopaedic surgeon worked
- Which tests were ordered to help determine he/she was a candidate for ANTERIOR ADVANTGE Hip Replacement

[INSERT NAME OF PATIENT] had ANTERIOR ADVANTAGE Hip Replacement surgery in [INSERT MONTH] and was out of the hospital in [INSERT NUMBER] days. [HE/SHE] did a rehabilitation program for about [INSERT TIME PERIOD] and within [INSERT TIME PERIOD], [HE/SHE] was back to doing the things HE/SHE enjoys, such as [INSERT TYPES OF ACTIVITIES], with little or no pain.

CONSIDER INCLUDING A QUOTE FROM THE PATIENT ON HOW HE/SHE FELT AFTER SURGERY.]

Learn more at MyAnteriorAdvantageHip.com or [hospital website].

About [Name of Hospital]

[INSERT DESCRIPTIVE INFORMATION ABOUT THE FACILITY AND INCLUDE A LINK TO THE WEBSITE WHERE MORE INFORMATION MAY BE OBTAINED ABOUT HIP REPLACEMENT IN GENERAL AND ANTERIOR ADVANTAGE HIP REPLACEMENT.]

Important Safety Information

The performance of hip replacements depends on age, weight, activity level and other factors. There are potential risks and recovery takes time. People with conditions limiting rehabilitation should not have hip replacement surgery. Only an orthopaedic surgeon can determine if hip replacement is required based on each individual patient's condition.

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References:

1. 2019 GlobalData Medical Intelligence Center (190219): 39-Country Hip Reconstruction Market Model Dataset. <https://medical.globaldata.com/Medtrics/OrthopedicMedtrics>.
2. Barrett WP, et al. "Prospective Randomized Study of Direct Anterior vs Postero-Lateral Approach for Total Hip Arthroplasty." The Journal of Arthroplasty 2013; (28): 1634-1638.
3. Zawadsky MW, et al. "Early Outcome Comparison Between the Direct Anterior Approach and the Mini-Incision Posterior Approach for Primary Total Hip Arthroplasty: 150 Consecutive Cases." The Journal of Arthroplasty 2014; (29): 1256-1260.
4. Bourne MH, Mariani EM. A Comparison Between Direct Anterior Surgery of the Hip (DASH) and Anterolateral (AL) Surgical Approaches to Total Hip Arthroplasty: Post-Operative Outcomes. Poster Presentation #014, AAOS, New Orleans, LA, March 9-13, 2010. Comparison of functional

- outcomes after Anterior Approach (211 patients) with Anterolateral/Traditional (259 patients).
5. Kamath A, Chitnis A, Holy C, et al. Medical resource utilization and costs for total hip arthroplasty: benchmarking an anterior approach technique in the Medicare population. *J Med Econ.* 2017; 1-7.
 6. Petis SM, et al. "In Hospital Cost Analysis of THA: Does Surgical Approach Matter?" *The Journal of Arthroplasty* 2016; (31)" 53-58.
 7. Miller LE, Gondusky JS, Bhattacharyya S, Kamath AK, Boettner F, Wright J. Does Surgical Approach Affect Outcomes in Total Hip Arthroplasty Through 90 Days of Follow-Up? A Systematic Review with MetaAnalysis. *J Arthroplasty.* 2017: 33(4); 1296-1302.
 8. Schweppe et al. Does Surgical Approach in Total Hip Arthroplasty Affect Rehabilitation, Discharge Disposition, and Readmission Rate? *Surgical Technology International XXIII.* 2013.

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