



Rebuilding Spinal Foundation





Integrated Global Alignment



Integrated Global Alignment (iGA) is a platform comprised of procedurally based technologies, designed to enhance clinical and economic outcomes by increasing the predictability of achieving global alignment in all spinal procedures. Integration across the surgical workflow allows the surgeon to confidently and reproducibly:

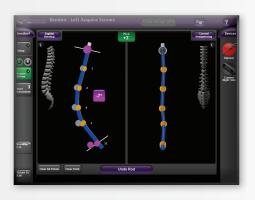
- Calculate alignment parameters with preoperative planning tools.
- **Correct** the anterior and posterior column with comprehensive procedural solutions from NuVasive with the industry's only real-time intraoperative assessment.
- **Confirm** the restoration and preservation of global alignment postoperatively.

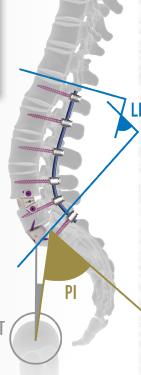
WHY ALIGNMENT MATTERS.

Current and emerging data illustrate a direct correlation between spinal alignment and long-term clinical outcomes. Specific spinopelvic parameters, including the proportionality of pelvic incidence (PI) and lumbar lordosis (LL), are key predictors in determining successful patient outcomes in all spinal procedures from single- to multi-level pathologies. NuVasive is committed to a global approach for assessing, preserving, and restoring spinal alignment in an effort to promote surgical efficiencies, lasting patient outcomes, and improved quality of life. **Alignment Matters.**

¹Terran J, Schwab F, Shaffrey CI, et al. The SRS-Schwab adult spinal deformity classification: assessment and clinical correlations based on a prospective operative and nonoperative cohort. Neurosurg 2013;73(4):559-68.







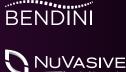


XLIFACR

NUVAMAP°

POWERED BY SUTGIMAP

ALIFACR NUVAMAP°



Rebuilding Spinal Foundation

With a rich clinical history, titanium implants have a proven strength profile and improved osteointegration capabilities compared to other materials on the market. The BASE Interfixated Titanium system offers versatile fixation options with a distinctive locking mechanism and anatomic implant design to help rebuild spinal foundation.

STRENGTH PROFILE • Increased graft volume of +25% • Standalone clearance: Up to 20° lordosis • Ø 5.0 & 6.0mm bolts Compared to Brigade ALIF Standalone (right), BASE Interfixated Titanium (left) offers ~25% more interbody graft volume.



Fusion assessment capability: 3-month postoperative CT scan with minimal scatter and visibility into graft aperture

SURFACE TEXTURING

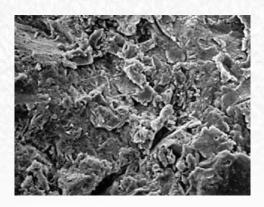
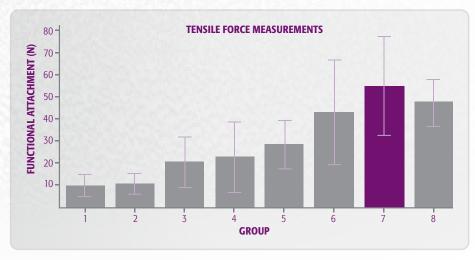


Fig. 1. Surface blasted with 180 to 220mm particles of TiO₂



Results of the tensile test measurements of eight tested surfaces following a 10-week healing period.

Bars represent mean values +/- standard deviation of five measurements of the same surface. Group 7 represents the grit blasting used on BASE Interfixated Ti implant and bolt surface.

WIDE RANGE OF ANATOMICAL IMPLANT DESIGNS

- Superior and inferior convexity, anterior rounding
- Range of options: lordosis, footprints, heights





Range of Posterior Heights: 6-12mm in 2mm increments







12mm

Lordosis Options: 10,° 15,° 20,° 25,° and 30°







20° (standalone)

10mm





25° (requires supplemental posterior fixation)

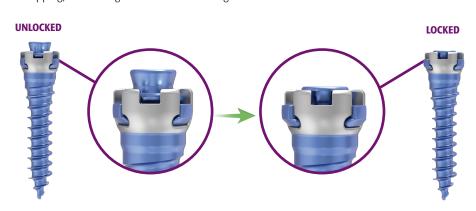
30° (requires supplemental posterior fixation)



15° (standalone)

DISTINCTIVE LOCKING MECHANISM

Self-tapping, self-driving bolt with inner-locking set screw to assist with anti-backout.







BEST-IN-CLASS INSTRUMENTATION

- Guided vs. unguided technique
- Medial implant insertion attachment
- Improved Anterolateral Inserter
- Strengthened Bolt Drivers





An Implant Inserter with medialized connection that extends into the implant to provide safe, reproducible delivery of the implant into the disc space in varying anatomies.





Low-profile Drill Guides help allow for bull's-eye placement of Awl, Drill, and bolts. The system can also be used without guides for enhanced versatility of bolt placement.



Robust and efficient Drivers with ability to dismantle for cleanabilty purposes. All-in-one Straight and Angled Driver design allows for bolt seating and locking without removing Bolt Driver.



Anterolateral Inserter grips on the anterolateral corner of the implant and allows for controlled delivery. Both Awl and bolt can be delivered while Inserter is in place.

FIXED AND VARIABLE BOLT OPTIONS

Fixed bolts for rigid fixation to the bone and interbody implant. Variable bolts allow for a 12° cone of angulation and versatility of insertion.



ONE-LEVEL ALIF ACR

Patient History:

- Female
- 56 years old
- L5-S1 Grade I spondylolisthesis
- Bilateral pars defects

Case Details:

- ALIF ACR with BASE Interfixated Titanium 25° lordotic implant
- Percutaneous pedicle screws with Reline MAS system





PRE-OP

POST-OP



MuVasive, Inc. 7475 Lusk Blvd., San Diego, CA 92121 USA • phone: 800 475 9131

RECIREP NuVasive Netherlands B.V. Jachthavenweg 109A, 1081 KM Amsterdam, The Netherlands • phone: +33 20 72 33 000