

SAFETY AND PERFORMANCE OF THE JOURNEY[◇] II CRUCIATE RETAINING TOTAL KNEE SYSTEM: A PROSPECTIVE, MULTICENTRE STUDY

Jordi Villalba¹, James MacDonald², Tad Gerlinger³, James Chow⁴, Michael Swank⁵, Jeffrey A. Geller⁶, Herbert Cooper⁷, Jonathan Miles⁸, Amir Kamali⁹, Pramod Achan¹⁰

1. Servei de Cirurgia Ortopèdica i Traumatologia, Hospital Universitari Parc Taulí de Sabadell – UAB, Barcelona 2. Anne Arundel Medical Center, Annapolis, USA 3. Midwest Orthopaedics @ Rush, Chicago, USA 4. Orthopedic Institute of the West, Phoenix, USA 5. The Lindner Research Center @ the Christ Hospital, Cincinnati, USA 6. Center for Hip and Knee Replacement at Columbia University Medical Center, New York City, USA 7. Columbia University Medical Center, New York City, USA 8. Royal National Orthopaedic Hospital, London, UK 9. Smith+Nephew, Leamington Spa, UK 10. Barts Health NHS Trust, Royal London Hospital & Barts Health Orthopaedic Centre, London, UK

+ Two-year data from 170 patients indicate that the JOURNEY II CR total knee system featuring OXINIUM technology is safe, effective and yields high levels of satisfaction in patients undergoing TKA

Background

- Although conventional total knee arthroplasty (TKA) is associated with successful pain relief and long-term implant survivorship¹, patients undergoing this procedure routinely note that their functional expectations have not been met, contributing to high levels of postoperative dissatisfaction².
- Novel cruciate-retaining TKA devices aim to address patient dissatisfaction by achieving more-normal postoperative kinematics and restoration of native anatomy.
- In preliminary studies, the JOURNEY[®] II Cruciate Retaining total knee system (JOURNEY II CR, Smith and Nephew, Memphis, TN, USA; Fig. 1) has exhibited an ability to more closely recreate the performance of the natural knee through enhanced flexion and external rotation, as well as increased muscle strength³.

Objective

The aim of this ongoing multicentre, prospective, international study was to evaluate the early clinical success and efficacy of the JOURNEY II CR in the largest cohort of patients to date.

Methods

Patients undergoing primary TKA with JOURNEY II CR TKS, at 10 sites, were followed up at 3, 12, and 24 months postoperatively. The femoral components of the implants used in this study were composed of OXINIUM[®] (Oxidised Zirconium), a material with enhanced wear performance known to increase durability⁴⁻⁶. Study outcomes included the EuroQol 5D visual analogue scale (EQ-5D VAS), 2011 Knee Society Score (KSS), Self-Administered Patient Satisfaction Scale for Primary Hip and Knee Arthroplasty; implant survivorship assessed using a cumulative Kaplan-Meier estimate with the endpoint of revision; and adverse events.

Results

- Overall, 170 patients (mean age, 63 years; mean BMI, 30.2 kg/m²; 60 male, 110 female) were enrolled. Osteoarthritis was the main primary indication 86 patients (50.6%) followed by degenerative arthritis (78, 45.9%) and post-traumatic arthritis (6, 3.5%).
- Excellent improvements were observed between preoperative assessments and postoperative follow up in mean EQ-5D VAS (Fig. 2) and KSS objective, function and satisfaction scores (Fig. 3).
- A majority of patients were satisfied with surgery results at all follow-up points (90.2% at 3 months, 93.7% at 12 months, and 92.1% at 24 months).
- Implant survivorship was 98.7% [95% confidence interval (CI): 95.1-99.7] at 12 months and 97.8% (95% CI: 93.0- 99.3) at 24 months.

Conclusion

Interim results from this ongoing study, in the largest cohort of patients yet to undergo primary TKA with the JOURNEY II CR, indicate that it achieves early improvements in function, high levels of patient satisfaction, and an acceptable risk of revision.

Fig 1: The JOURNEY II Cruciate Retaining Total Knee System featuring OXINIUM technology.



Fig 2: EuroQol 5D Visual Analog Scale scores at pre-operative and follow up visits.

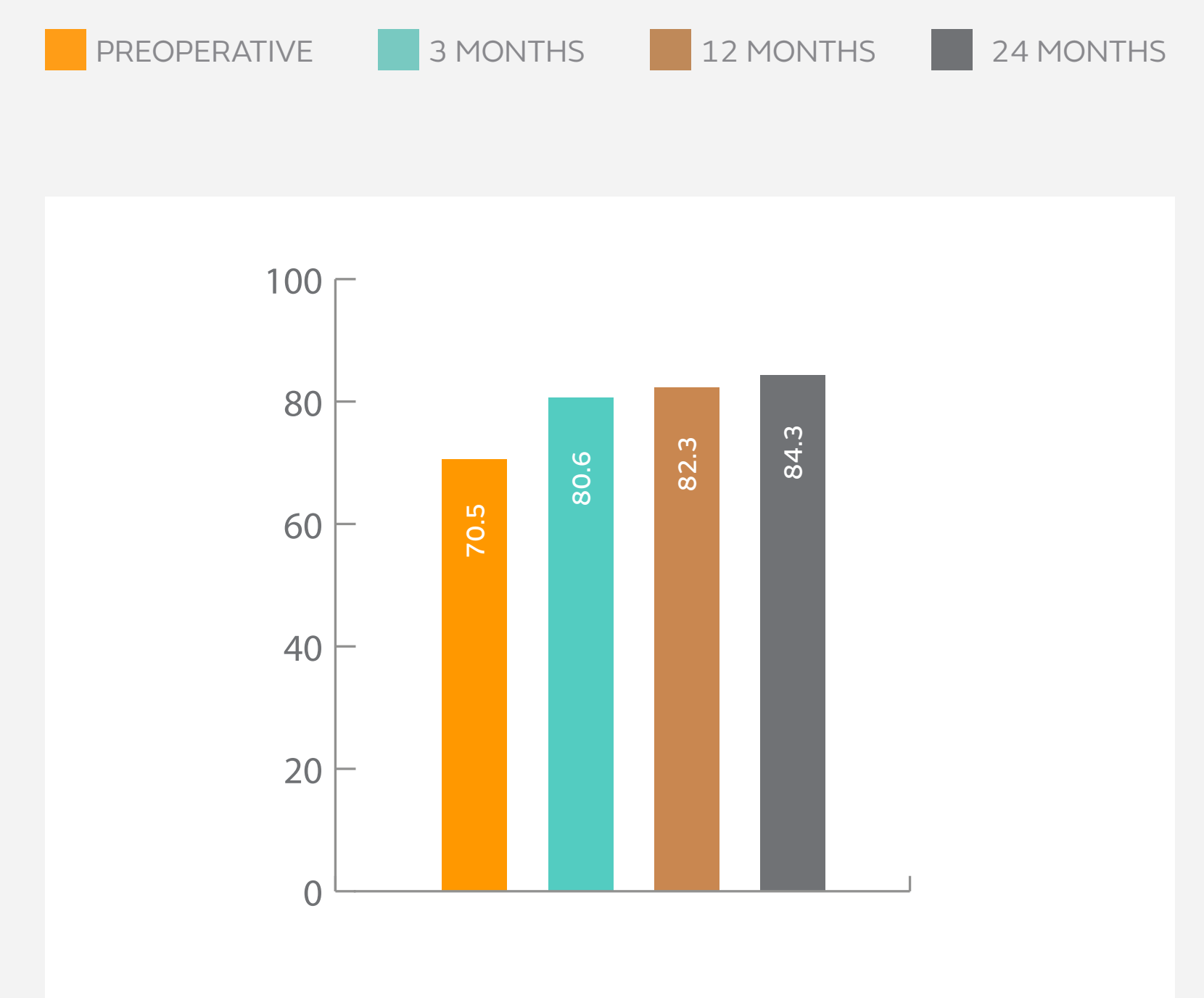
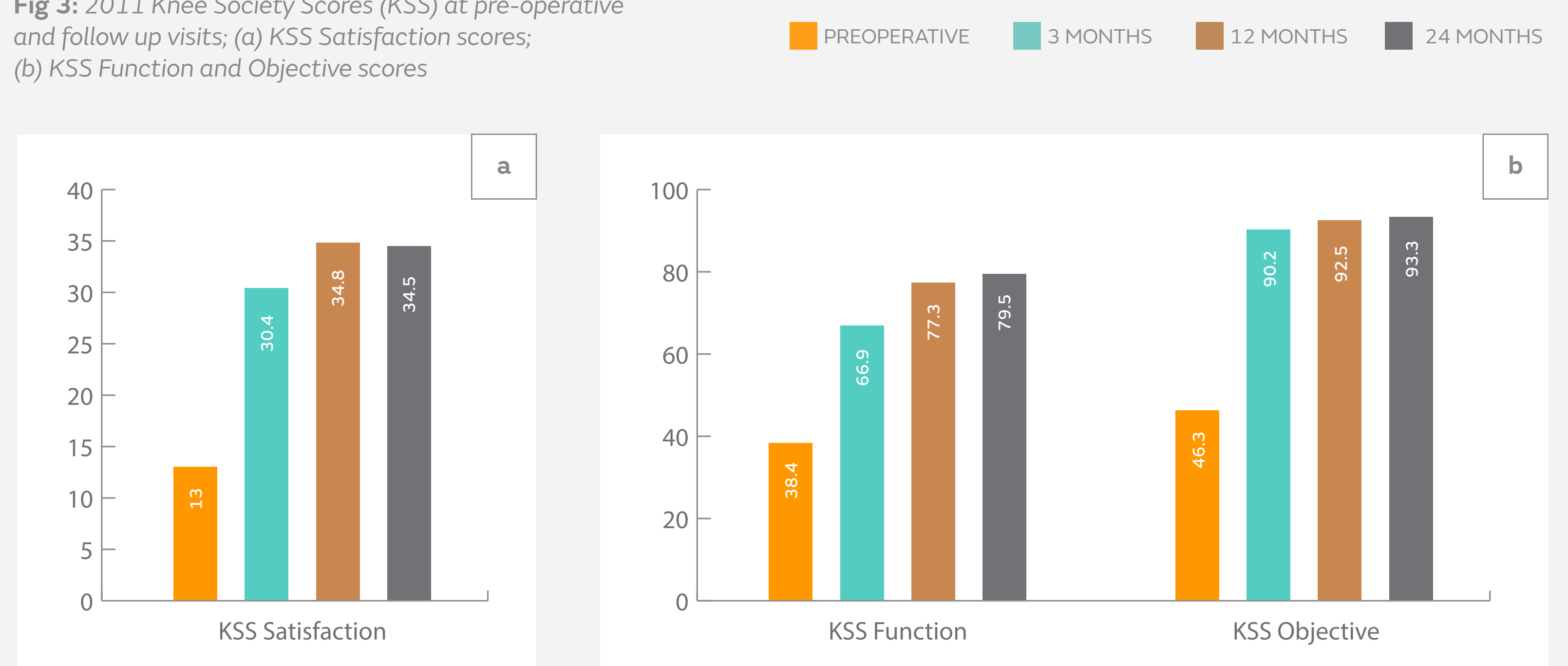


Fig 3: 2011 Knee Society Scores (KSS) at pre-operative and follow up visits; (a) KSS Satisfaction scores; (b) KSS Function and Objective scores



References

1. Choi YJ, Ra HJ. Patient Satisfaction after Total Knee Arthroplasty. Knee Surg Relat Res. 2016;28(1-15); 2. Scott CEH, Howie CR, MacDonald D, Biant LC. Predicting dissatisfaction following total knee replacement. J Bone Joint Surg Am. 2010;92-B(9):1253-1258; 3. Di Benedetto P, Vidi D, Colombo, Buttironi MM, Cainero V, Causero A. Pre-operative and post-operative kinematic analysis in total knee arthroplasty. A pilot study. Acta Biomed. 2019;90:91-97; 4. Parikh A, Hill P, Pawar V, Sprague J. Long-term Simulator Wear Performance of an Advanced Bearing Technology for THA. Poster presented at: 2013 Annual Meeting of the Orthopaedic Research Society. Poster no. 1028; 5. Papannagari R, Hines G, Sprague J, Morrison M. Long-term wear performance of an advanced bearing technology for TKA. Poster presented at: 2011 Annual Meeting of the Orthopaedic Research Society. Poster no. 1141; 6. Parikh A, Hill P, Hines G, Pawar V. Wear of conventional and highly crosslinked polyethylene liners during simulated fast walking/jogging. Poster presented at: 55th Annual Meeting of the Orthopaedic Research Society, 2009. Poster no. 2340.

E-poster presented at the British Orthopaedic Association Meeting (21st-24th September 2021).

©Trademark of Smith and Nephew.