SuperCable Grip Design Rationale

We are sometimes asked by surgeons and distributors about the design of the SuperCable Trochanteric Grips. Specifically, they ask about the difference between the placement of our claws and those of the competitor’s systems. Grip systems from other companies were designed to go “over the top” of the superior margin of the greater trochanter, while the tines of the SuperCable Grip System were instead designed to penetrate the superior lateral aspect of the trochanter. When surgeons who are used the older designs first see our system, this naturally creates questions.

Below is some useful information if and when questions arise regarding our grip design.

Background

When the Kinamed SuperCable Grip System was initially developed, Kinamed’s (and our surgeon design teams) objective was to avoid “over the top” requirement by achieving fixation laterally. The design goal was to prevent trochanteric escapes without requiring the metal bulk over the top of the trochanter, which violates the abductors. To accomplish this objective we designed a grip with sharp hooks that bite into the side and a proximal locking screw to lock the grip and trochanter together.

There are several advantages to the SuperCable Grip design.

1) **SuperCable Grips often require no bending and shaping to achieve a good fit.** This is because the “plate” portion of the grip can be matched up to the lateral cortex of the femur distally, and the tines can then be allowed to simply penetrate the trochanter at whatever place this distal fit dictates. Competitors grip design’s almost always requires complex bending and shaping to prevent a condition where the grip projects too far laterally into the soft tissue, or does not hook over the trochanter. Intra-operative grip bending can be time consuming and difficult to accomplish.

2) The SuperCable Grip design also provides the additional benefit of providing **better clearance** for the insertions of the gluteus medius and gluteus minimus muscles (abductors) on the superior lateral aspect of the greater trochanter. If you look at the photos (below) of a SuperCable grip and a competitor’s, and also the images of the muscle attachments (below), the competitors grip design essentially fills the entire muscle insertion area.

3) **SuperCable Grip tines (claws) are longer and sharper.**

4) The proximal locking screw hole on SuperCable Grips provides a **solid attachment** to the “floating” island of proximal trochanter (bone).

5) **SuperCable Grips are designed to be used with Kinamed’s Iso-Elastic, Polymer Cerclage System.** When used together the SuperCable Grip, Plate and Cerclage System provides surgeons a **versatile, biologic and comprehensive** solution.

6) The SuperCable Grip design approach has been validated by **several years of clinical use** (since 2008).

For more information, click the following links to download a [study](#) and [clinical history presentation](#) that illustrate some of the clinical experience in complex cases with our grip system. Visit our [website](#) for videos, case vignettes, and more.