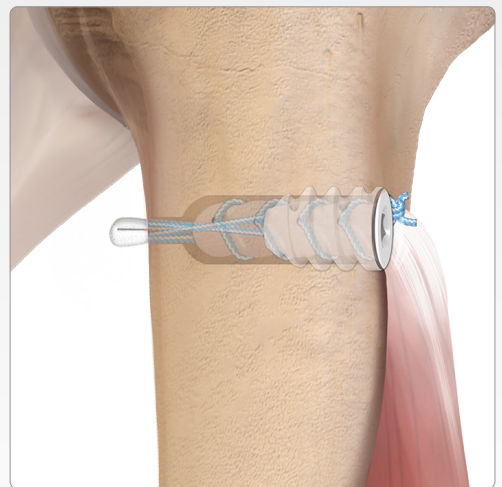
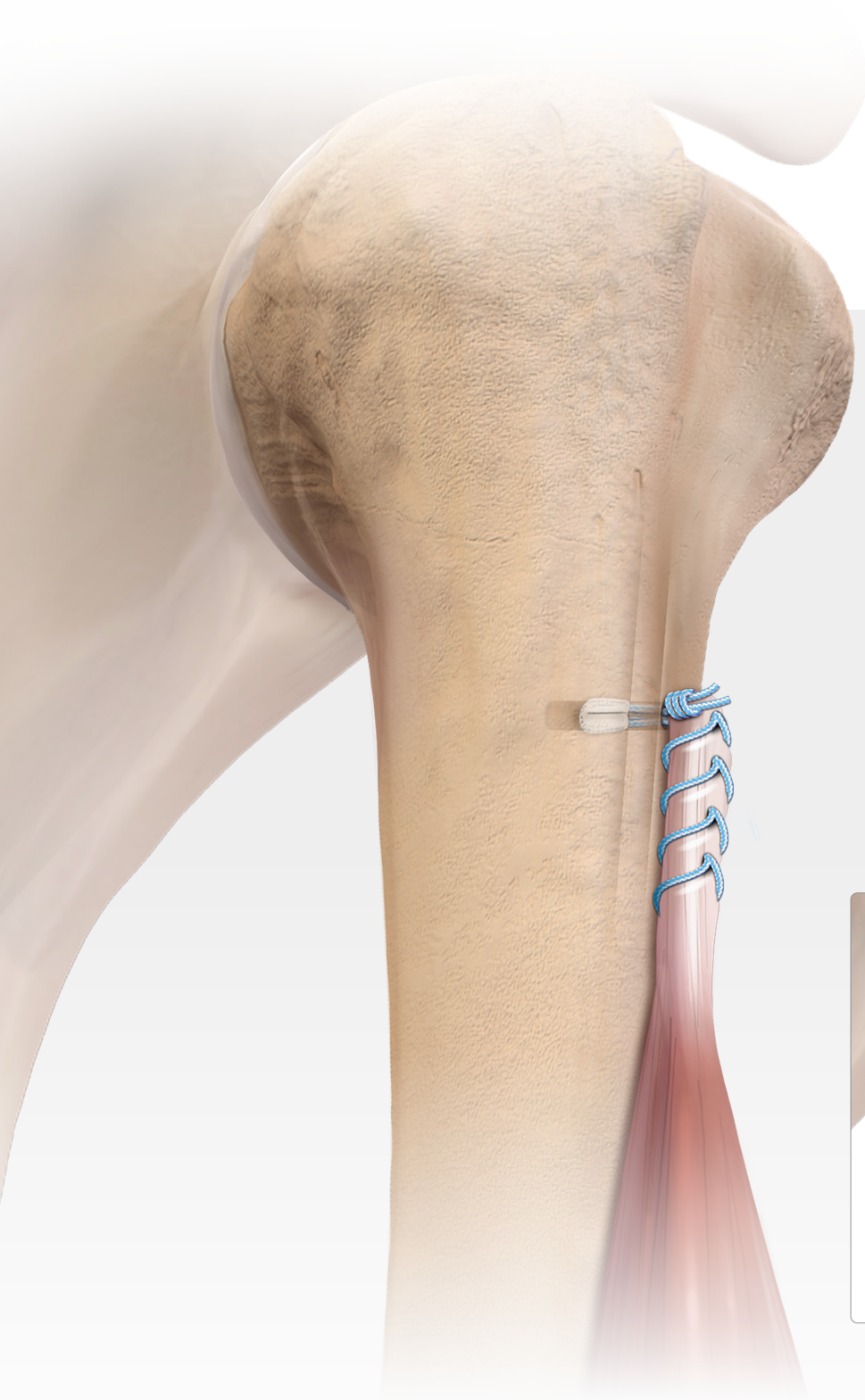


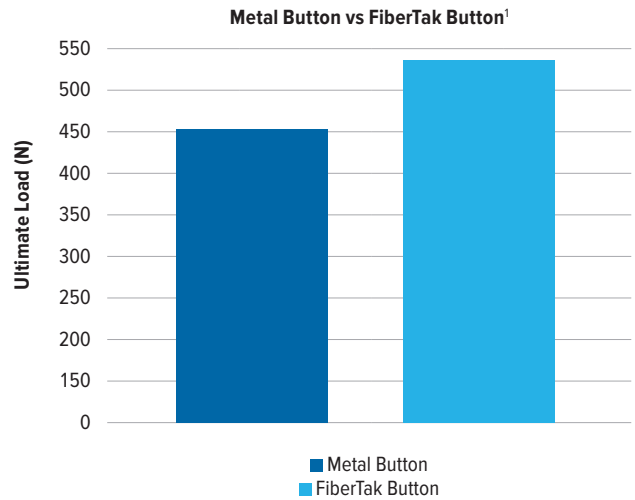
# Subpectoral Biceps Tenodesis Using the FiberTak® Button

Surgical Technique



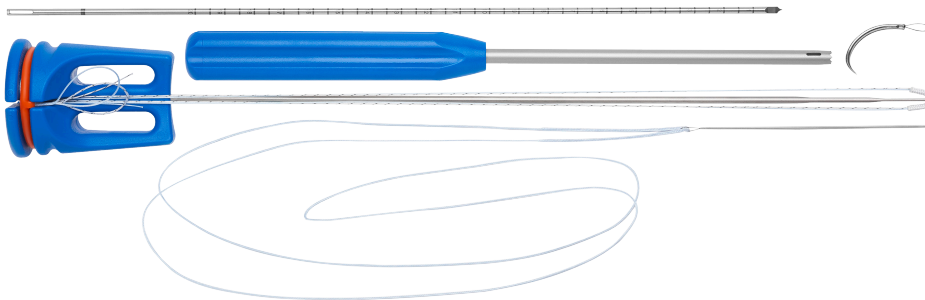
# Subpectoral Biceps Tenodesis Using the FiberTak<sup>®</sup> Button

The 2.6 mm drill reduces the implant socket diameter by 19% compared to the traditional 3.2 mm drill used with metal buttons. The all-suture construction of the FiberTak button is not visible on x-ray and has tested to be 17% stronger than metal buttons.<sup>1</sup>

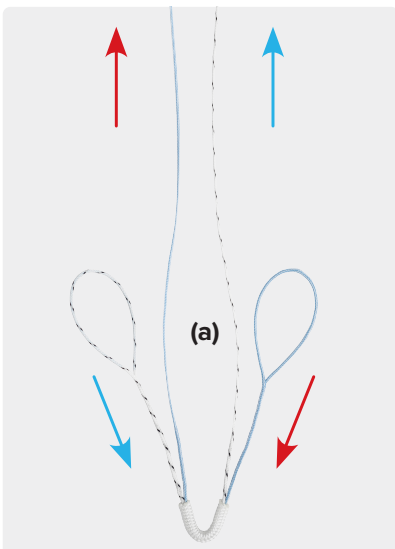


The all-suture button is preloaded with two 2-0 FiberLink<sup>™</sup> sutures that are used to shuttle the #2 FiberWire<sup>®</sup> suture or SutureTape whipstitch limbs through the sheath. The implant system includes the FiberTak button, 2.6 mm drill, drill guide, FiberLoop<sup>®</sup> suture, and a free needle.

The button-first technique eliminates the need to find the tunnel after drilling. The FiberLink sutures are loaded in opposite directions and are used to shuttle the whipstitch limbs through the button, allowing for a tension-slide reduction technique.



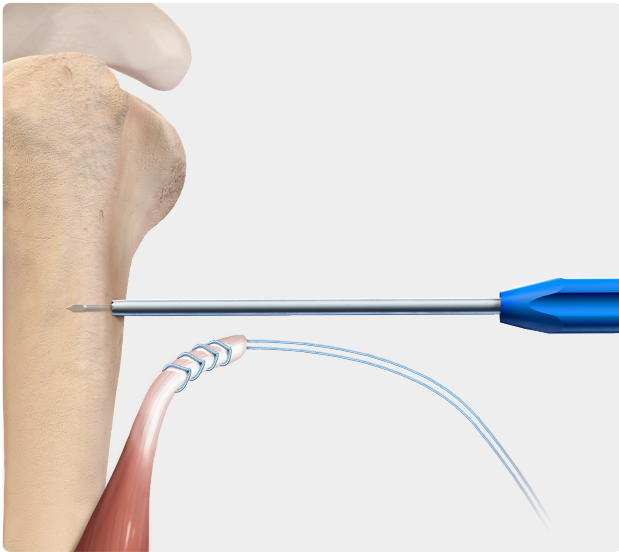
## Surgical Technique



Place the patient in the beach chair or lateral decubitus position with the arm in 90° of abduction and 60°-90° of external rotation. Make a 2 cm to 3 cm incision in the axilla at the inferior border of the pectoralis major. Bluntly dissect to identify the pectoralis major and the long head of the biceps. Whipstitch the biceps tendon using the FiberLoop suture.

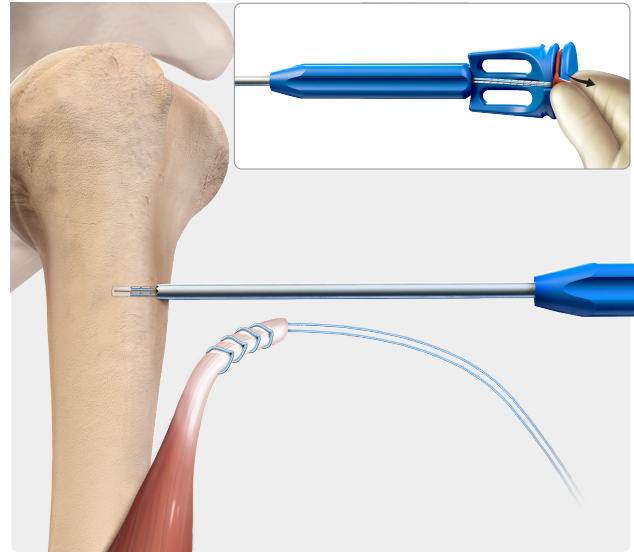
Load the FiberLink sutures in opposite directions to allow for a tension-slide reduction technique **(a)**.

## Unicortical Onlay Subpectoral Biceps Tenodesis



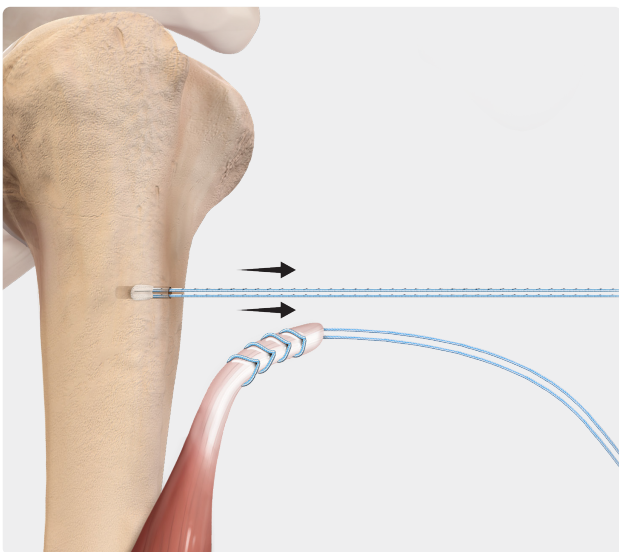
1

Place the drill guide at the desired location and drill the first cortex using the 2.6 mm drill. Chucking the drill pin at the black line allows the drill to extend 20 mm out of the drill guide.



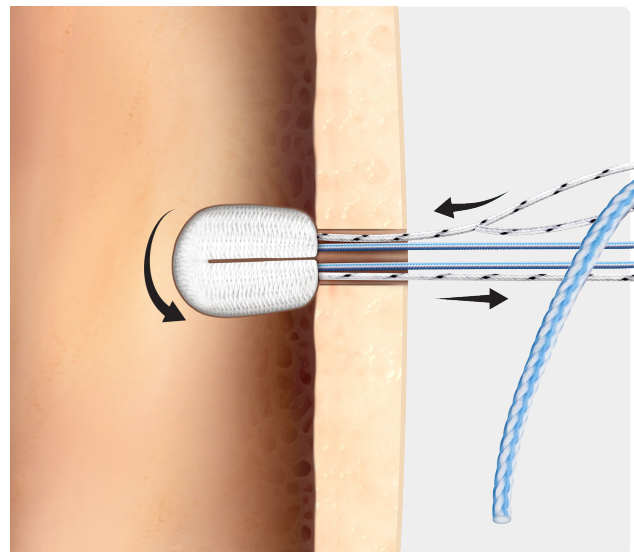
2

Leave the guide in place and insert the button through the guide. Tap on the handle until the inserter is flush with the drill guide. Remove the orange tab.



3

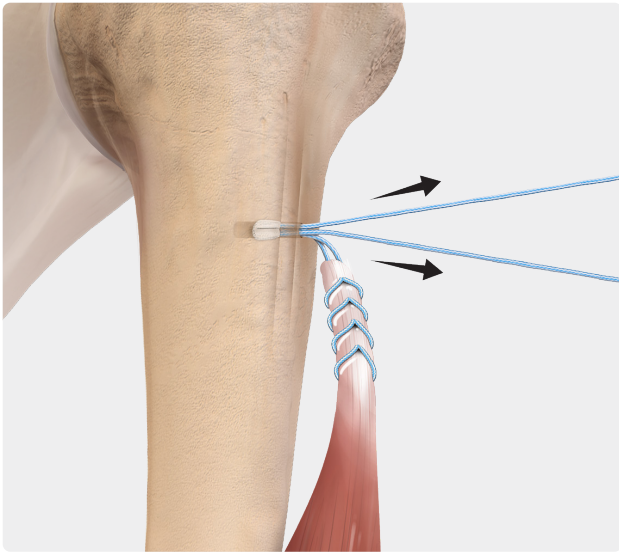
Remove the inserter and guide. Lightly pull evenly on the FiberLink™ sutures to ensure that the button is deployed. Separate the FiberLink sutures (blue and white/black on each side) and pull on each link to ensure it slides easily.



4

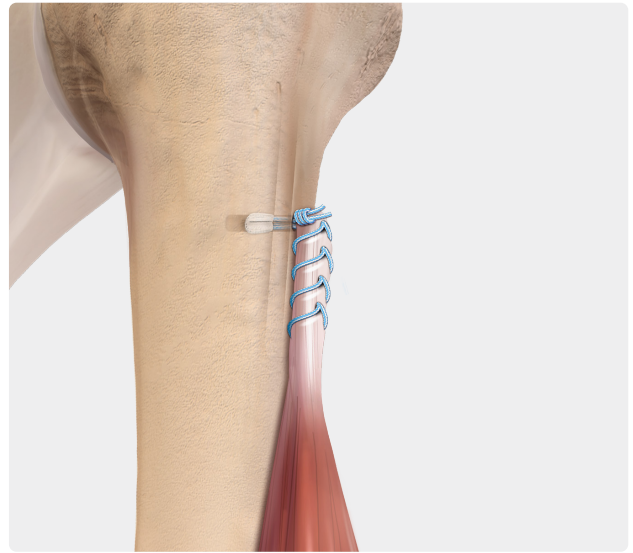
Shuttle a whipstitch limb through the button using one of the FiberLink sutures. Be sure not to shuttle the thickened portion of the FiberLoop® suture through the button. Use slight tugs once the suture meets the button sheath. Discard the FiberLink shuttle suture once the whipstitch limb has been passed through the button.

Pull lightly on the remaining shuttle link to verify that the button is set. Shuttle the second whipstitch limb through the sheath in the opposite direction using the remaining link.



**5**

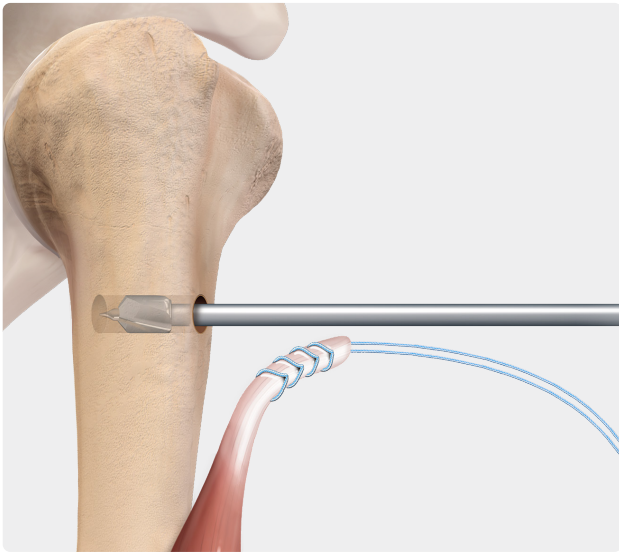
Use the tension-slide technique to reduce the tendon onto the bone.



**6**

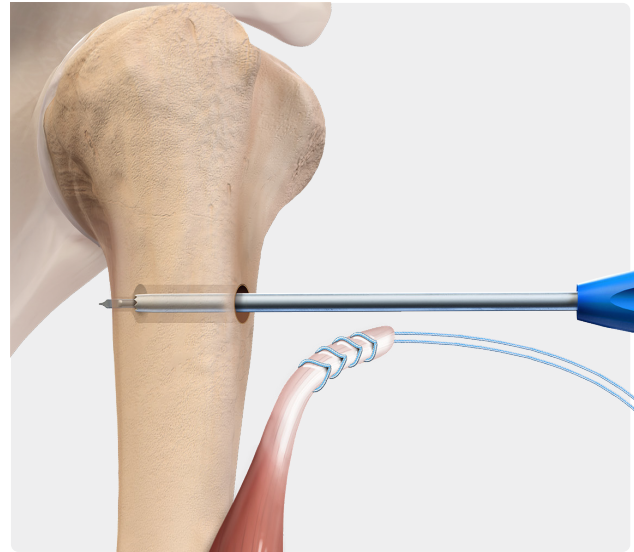
Pass one limb back through the tendon using the free needle and tie a knot to complete the repair.

## Bicortical Inlay Subpectoral Biceps Tenodesis



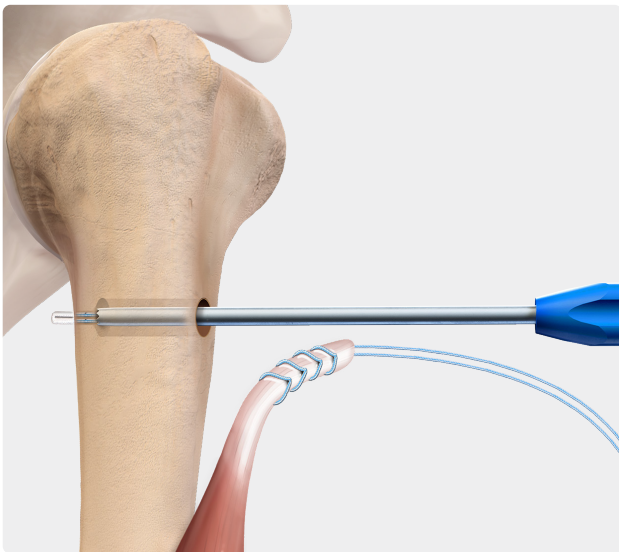
**1**

Drill a unicortical socket using the appropriate size pilot-headed reamer.



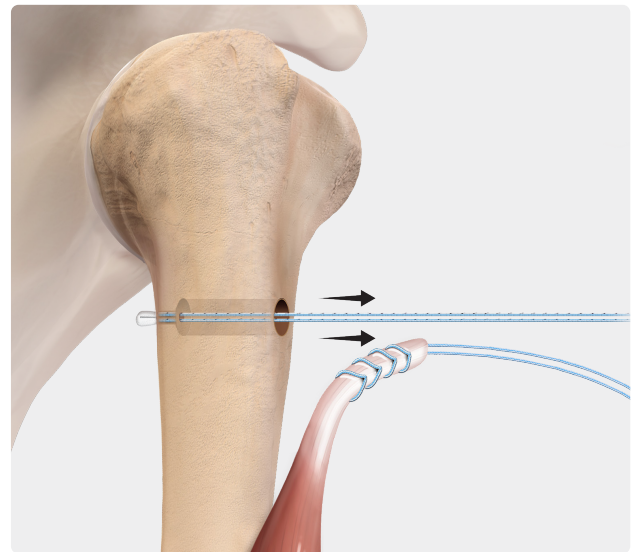
**2**

Insert the drill guide into the socket and drill through the far cortex using the 2.6 mm drill. Chucking the drill pin at the black line allows the drill to extend 20 mm out of the drill guide.



**3**

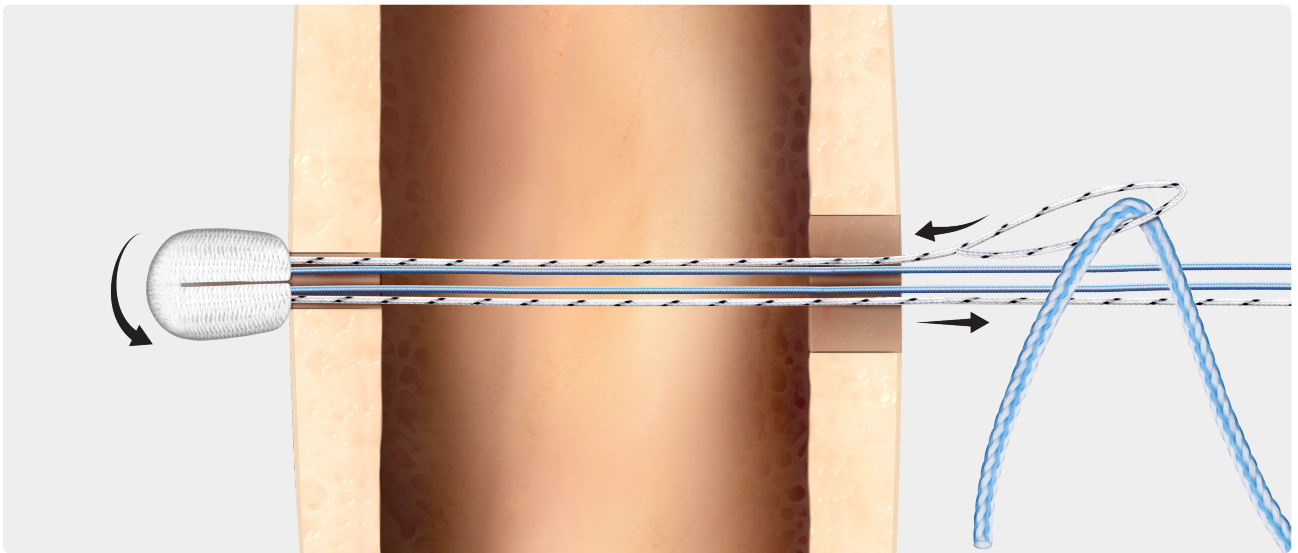
Leave the guide in place and insert the button through the guide. Lightly tap on the handle until the button is inserted across the far cortex. Remove the orange tab.



**4**

Remove the inserter and guide. Lightly and evenly pull on the FiberLink™ sutures to ensure that the button is deployed on the far cortex.

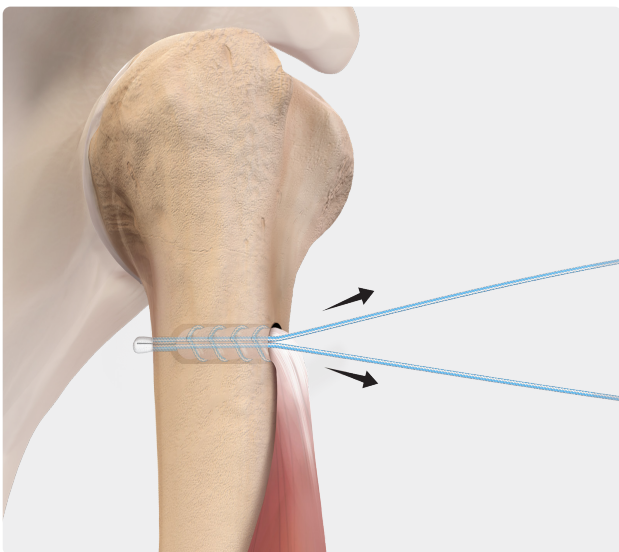
Separate the FiberLink sutures (blue and white/black on each side) and pull on each link to ensure it slides easily.



**5**

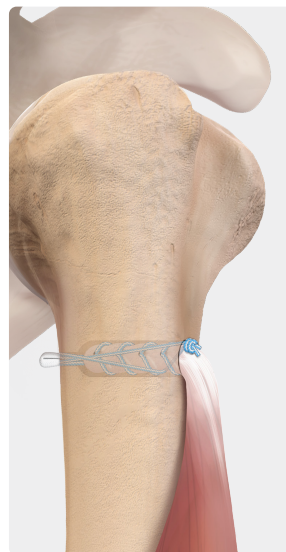
Shuttle a whipstitch limb through the button using one of the FiberLink™ sutures. Be sure not to shuttle the thickened, spliced portion of the FiberLoop® suture through the button. Use slight tugs once the suture meets the button sheath. Discard the FiberLink shuttle suture once the whipstitch limb has been passed through the button.

Pull lightly on the remaining shuttle link to verify that the button is set. Shuttle the second whipstitch limb through the button in the opposite direction using the remaining link.

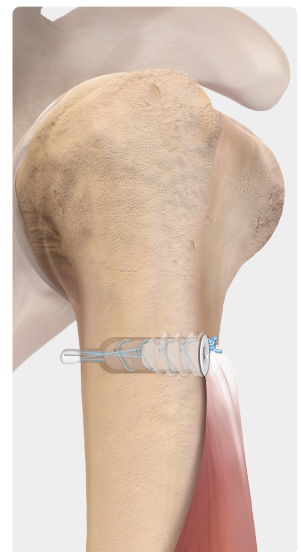


**6**

Use the tension-slide technique to reduce the tendon into the bone socket.



**7a**



**7b**

Pass one limb back through the tendon using a free needle and tie a knot. If desired, insert a tenodesis screw into the socket to complete the repair (**7b**).

## Ordering Information

FiberTak® Button Implant System	AR-3680
› FiberTak button	
› Drill guide	
› 2.6 mm spade-tip drill	
› FiberLoop® suture	
› Free needle	
FiberTak button	AR-3681
2.6 mm Spade-tip drill	AR-3682
Drill guide with circumferential teeth for FiberTak button	AR-3683
<b>Optional Instruments and Implants for Bicortical Tenodesis Option</b>	
7 mm Pilot-headed reamer	AR-1452
Biocomposite SwiveLock® biceps tenodesis screw, 7 mm × 10 mm	AR-1662BCS-710

### Reference

1. Arthrex, Inc. Data on file (APT-04066). Naples, FL; 2019.

This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's directions for use. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level or outcomes.



Arthrex manufacturer, authorized representative, and importer information (Arthrex eIFUs)



US patent information