



# GENUDYN® OA

Knee brace for relief and stabilization of the medial or lateral compartments

# **INSTRUCTIONS FOR USE (GB)**

Dear Customer.

we would like to ask you to follow these Instructions with care. If you should have any questions, please consult your doctor, orthotist, or contact us directly.

#### **Indications**

- \_ Conservative/post-operative
- For pain reduction and relief of the medial or lateral compartment in cases of knee arthrosis
- \_ Mild varus / valgus deformities
- All indications and symptoms requiring unicompartmental reduction in weight-bearing (e.g. pre and post-operatively for: degenerative meniscal tears, stable tibial head fractures, lateral ligament injuries)

#### Side effect

If used properly and placed correctly, no serious general adverse effects, consequential incompatibilities, or allergic reactions have been reported to date. Pressure effects on skin and nerves and impaired circulation can be prevented safely in each individual taking into consideration possible contraindications by placing the product in a non-constricting and form-fitting manner.

#### Contra-Indications

Generally speaking, you should consult your doctor regarding the indication and method of wearing any orthopaedic aid and if you have the following conditions:

- \_ Allergic, inflammatory or lesion-specific skin alterations (e.g. swelling, reddening) of the body areas being treated.
- \_ Impaired circulation or lymphatic soft tissue swelling.
- Neurogenically caused disorders impairing sensation or abnormal trophic skin conditions with and without pathologic skin leasons in the body area being treated.

# Important general information

GENUDYN® OA is supplied with a correct sequence of straps for dynamic stabilisation to achieve unicompartmental relief. The fit, joint position and strapping must always be checked for correctness, including when the patient is standing.

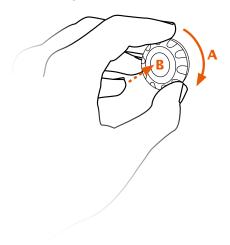
The front straps remain closed while putting it on and taking it off, and the rear straps are opened and closed via the quick fasteners. All straps must be tightly closed, but must not cause constriction.

The orthotic frame is made from aluminium and can be bent to fit by the orthopaedic technician. All strap lengths are adjusted during customisation and should later only be changed by the patient in the event of problems, such as changes in the circumference of the leg.

# NOVEL cinching dial for adjustment

The innovative NOVEL system allows easy readjustment of the strap tension - even through clothing.

- A. Turning clockwise tightens the straps.
- **B.** Pressing the central button releases the tension.



## FITTING OF GENUDYN® OA



Open the click fasteners

Loosen the straps by pressing the click fastener on the inside of the orthosis. Do this with all four straps.



#### Releasing the strap tension

Press on the number of the Novel button and pull on the strap to extend it. Do this with all four straps.

Next, sit on the edge of a chair and place the orthosis around the leg with the leg in around 30° of flexion. The middle of the hinge should be at the level of the top edge of the kneecap (patella). Close the shin strap so that the hinge lies in the middle of the knee (A-P).



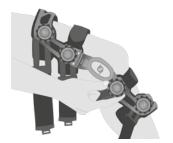
#### Front Velcro fasteners

The front tibial and femoral strap have Velcro fasteners instead of click fasteners. Loosen both straps only during the initial adjustment. The patient should not readjust these straps.



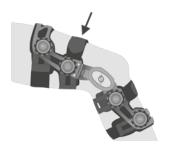
#### Closing strap 1

Pull strap 1 taut and ensure that the strap is not twisted. Guide the strap behind the lower thigh and close it with the click fastener on the medial side of the orthosis. Ensure that strap 1 runs above the belly of the calf.



Straps 2, 3 and 4

Repeat the steps from strap 1.



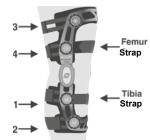
# Close the front Velcro fasteners

Close the straps so that they lie comfortably and in line with the body, and are well stabilised.



Check the position of the orthosis while standing and with the leg extended. The centre of the orthosis hinge should lie at the top edge of the kneecap (patella).





## Note

All of the straps, apart from the tibial and femoral straps, are numbered consecutively. Ensure that you always close the straps in the correct sequence. Normally, the tibial and femoral straps do not need to be readjusted after the initial customisation.

# ADJUSTMENT OF PADDING AND STRAPS



## Adjusting pad length

For optimal fit and comfort, ensure Strap Pads are centered on the leg when straps are tightened. If a Strap Pad is too long, remove the pad from the

strap and trim excess with

using a pair of scissors.

Adjusting strap length To adjust the length of a strap, depress the Quick Release Button.

With the strap laid flat, open the hook and loop fastener at the tail end, adjust the length and reattach the strap.

# Condylar padding

The medial and lateral condylar padding is exchangeable and should be adjusted according to the indication.

For example, if the medial compartment is to be relieved, the condylar padding should be positioned laterally in line with the body and have a little room for manoeuvre medially.

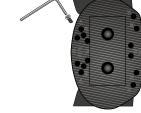


# **ADJUSTING THE HINGE LIMITATION**









Insert screws FLEX Insert screws

In its new state, the orthosis is already set to 0° of extension.
Further screws and an Allen key for adjusting the extension (EXT) and flexion (FLEX) are included in the scope of delivery.

# Folgende Gelenkanschläge sind möglich:

EXT: 20°, 30°, 40° FLEX: 45°, 60°, 75°, 90°

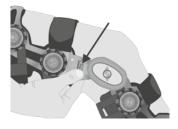
## 1. Remove the condylar padding

Remove the condylar padding by detaching it from the inside of the orthosis (medially and laterally).

#### 2. Insert screws

Determine the required degree of extension and/or flexion / stop and screw the enclosed screws into the corresponding hole using the Allen key supplied.

Important: Screw the screws medially and laterally into the same EXT and/or FLEX holes. Do not tighten the screws too tightly.



The wheel on the side allows the corrective force of the orthosis to be set and finely adjusted according to the degree of knee arthrosis, pain, activity and patient's form on the day.



### **Quality Management System**

All SPORLASTIC GmbH products undergo product testing as part of our Quality Management System. However, should you have any complaints about our product, please get in touch with your stockist or directly with us.

#### **General Note**

The use of products involving direct exposure of the skin to an elastomer (e.g. a silicone pad) might possibly lead to blisters on the skin if the product is applied too tightly or if it is shifted on the skin at high friction. In this case, we recommend to discontinue the use of the product. Sweat may be generated under the silicone and, in rare cases, this can lead to the body reacting to its own sweat and cause corresponding allergic skin changes. Sporlastic is not aware of any allergic reactions related to the materials. If you experience any problems, please contact your doctor or the supplier of the medical aid.

#### **Brace Care**

Padding and condyle pads should be removed and cleaned regularly depending upon your activity level and perspiration. All padding is removably installed by hook and loop fasteners and can easily be removed from the frames, hinges and straps. Wipe or HAND WASH with a MILD anti-bacterial soap, rinse well, then AIR DRY. Replace and position properly by pressing firmly against the fasteners.

## **Cleaning Hinges**

The hinges of your brace are pre-lubricated. If sand, dirt or water gets inside the hinges, they may require cleaning and lubrication. Remove the condyle pads and rinse the hinges thoroughly with tap water. If the joints don't move smoothly, please see your orthotist for cleaning and/or additional lubrication.

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