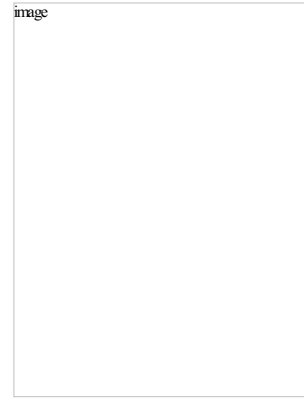


## Author's Accepted Manuscript

The Triflange Cup: Build It and They Will Wait

Michael D. Ries



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## The Triflange Cup: Build It and They Will Wait

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### Abstract:

The custom triflange is designed from CT images of the pelvis which delineate the remaining acetabular and pelvic bone. The design of the triflange involves both the manufacturing engineer and surgeon to determine the most appropriate implant shape, screw fixation pattern, and cup location and orientation. A wide surgical exposure is needed with identification of the sciatic nerve. Proximal dissection of the abductors above the sciatic notch to position the iliac flange can result in denervation of the abductor mechanism. Although the risk of complications with this technique is relatively high, satisfactory restoration of hip function can be achieved in most cases. The use of a custom triflange is indicated for massive bone loss and discontinuity in which other reconstructive options are not considered suitable.

### Introduction:

The goal of treatment of acetabular discontinuity after failed THA is generally to achieve stable fixation of a revision acetabular reconstruction with or without healing of the discontinuity (1). A number of surgical techniques have been proposed to treat this condition with variable results, including a cup alone with or without distraction, cup and posterior or dual column plating, allograft and cage, augment and cage, cup cage, and custom triflange (2-14). The results are influenced by many factors

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