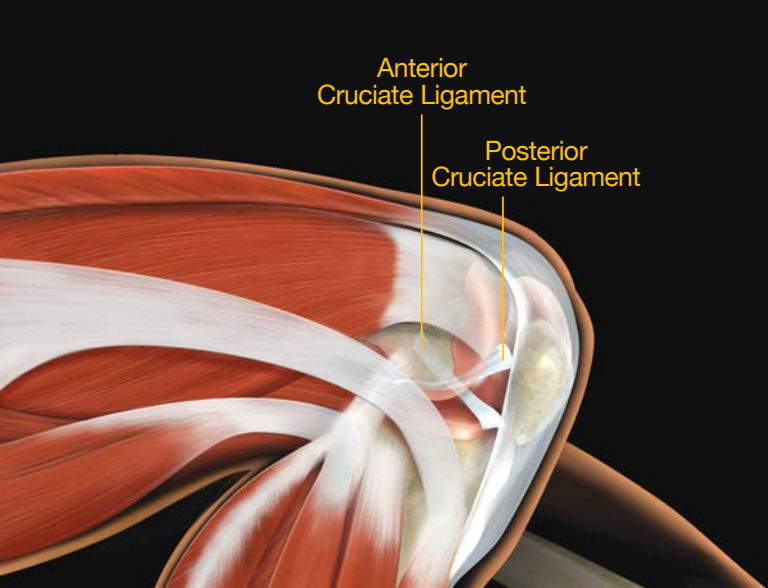




YOUR GUIDE TO  
UNDERSTANDING ANTERIOR  
CRUCIATE LIGAMENT  
TREATMENT OPTIONS.

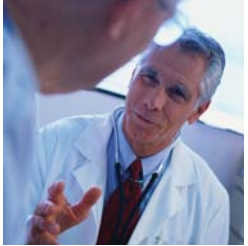




# WHAT TYPES OF ACL GRAFTS ARE AVAILABLE SHOULD I DECIDE TO HAVE ANTERIOR CRUCIATE LIGAMENT RECONSTRUCTION?

There are two main types of anterior cruciate ligament grafts: autografts and allografts. Autografts come from your own tissue. Autografts can be harvested from several places including your own patella tendon, quadriceps tendon, or hamstring tendons.

Allografts, on the other hand, come from a giving donor. Donor patella tendon, Achilles tendon, quadriceps tendon, anterior tibial tendon, and posterior tibial tendon are some of the potential



sources for allograft ligaments. Allograft reconstruction has been widely performed for over 20 years. In fact, the American Association of Tissue Banks (AATB) reports that accredited tissue banks distribute 1.5 million allografts annually.

## WHAT IS AN ANTERIOR CRUCIATE LIGAMENT?

The Anterior Cruciate Ligament (ACL) is a structure inside the knee that enhances stability and overall function.

## WHAT ARE MY TREATMENT OPTIONS IF THE ANTERIOR CRUCIATE LIGAMENT IS TORN?

Individuals who injure their ACL can be treated nonoperatively or with surgery. Your doctor will discuss these two options with you and make a recommendation based on the severity of your injury, your symptoms, and your activity level.





## WHICH TYPE OF GRAFT SHOULD I HAVE?

Since an autograft reconstruction utilizes your own tissue, it does not have to be processed in any manner before it is used to reconstruct your ACL. However, the harvest procedure itself can result in increased pain at



the donor site and more pain post operatively, a larger scar, increased operating time under anesthesia, and with some techniques, increased pain under your knee cap.

Studies show that anterior cruciate ligament reconstruction with an allograft tendon results in less pain, better function, and fewer activity limitations after surgery when compared to an autograft tendon.<sup>1</sup> The pain and scarring associated with autograft harvesting is also greatly reduced.<sup>2</sup>

Additionally, the operative time is decreased, which results in less time under anesthesia. While long-term clinical results have shown allograft ACL reconstruction to be very successful, concern



over potential disease transmission has been raised. As a result, the CLEARANT PROCESS<sup>®</sup> was developed to improve the safety of allograft ACL reconstruction, so patients can take advantage of this less invasive surgical procedure and get back to their regular lifestyle sooner.



## DOES THE CLEARANT PROCESS ALTER THE STRENGTH OF THE ALLOGRAFT?

A large degree of testing has been performed on the CLEARANT PROCESS. Lab tests show the CLEARANT PROCESS is effective in eliminating bacteria, viruses, fungi, and protozoa without compromising the allograft tendon strength, bone strength, or impeding the incorporation of the graft into the surrounding bone.<sup>4</sup>



## WHAT IS THE CLEARANT PROCESS®?

The CLEARANT PROCESS® is a groundbreaking sterilization technology that dramatically reduces risk of infection in allograft tissue.

## WHAT ARE THE BENEFITS OF A CLEARANT PROCESS ALLOGRAFT TENDON OVER A TRADITIONAL ALLOGRAFT TENDON?

While traditional allograft tendons are processed to remove potential infecting agents, there are still reported cases of disease transmission. The CLEARANT PROCESS significantly inactivates every known agent that can cause infection transmission to patients, making the graft much safer.<sup>3</sup> Grafts processed with the CLEARANT PROCESS are considered “sterile” to the same level as a medical device, with the risk of infection virtually eliminated.

## THE ADVANTAGES OF ALLOGRAFTS TREATED WITH THE CLEARANT PROCESS.

- Reduces recovery time and discomfort due to only one surgical procedure vs. two.
- Ensures safety and sterility of tissue to virtually eliminate risk of infection.
- Protects strength and effectiveness of tissue for better results.

For safer anterior cruciate ligament reconstruction using allografts, ask your doctor about the CLEARANT PROCESS.

*References:*

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2. Strickland SM, MacGillivray JD, Warren RF. "Anterior cruciate ligament reconstruction with allograft tendons." *Orthop Clin North Am*. 2003 Jan;34(1):41-7.
3. Grieb TA, Forng RY, Stafford RE, Lin J, Almeida J, Bogdansky S, Ronholdt C, Drohan WN, Burgess WH, "Effective use of optimized, high-dose (50 kGy) gamma irradiation for pathogen inactivation of human bone allografts." *Biomaterials* 26:2033-2042,2005.
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