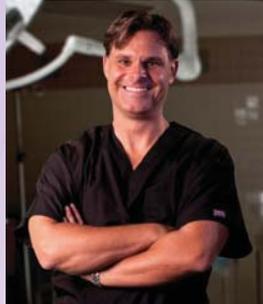


The MiToe™ implant is manufactured by Wright Medical, the recognized leader of surgical solutions for foot and ankle. Wright has been in business for more than 60 years and markets products in over 60 countries, worldwide.



John M. Sigle, DPM, FACFAS

For more information about Wright, we invite you to visit our website at www.wmt.com.

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Does The
Pain of Hammertoes
Limit More Than Your
Shoe Choices?

MiToe.™ Mi Solution from Pain.



Two Convenient Locations:
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• 1900 E. Lake Shore Drive, Ste 210 at
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If you're like many women, the problem of hammertoes goes beyond your wardrobe frustrations.

You may be muddling through daily life in pain or skipping activities you once loved. Perhaps the photo of the trek across the airport (above) has you thinking about adding an extra layer of padding to your shoes?

In your heart you may know it is time to take action, but you're just too busy to take time off for surgery and recovery. Plus, you've heard the horror stories about the traditional wire treatment that requires you to put your life on hold: the weeks of metal pins protruding from your toes, restrictions on activities like driving, limitations of footwear, risks of infection or dislodging of the wire, torn bed sheets, and the fear of wire removal in the doctor's office. All these hassles, plus the possibility that the hammertoe can come back, probably make you think, "Never mind, I'll just suffer through the pain."*

* Coughlin M. Lesser toe deformities. In: Surgery of the Foot and Ankle, ed 9, pp. 363-464, edited by M Coughlin, R Mann, C Saltzman, Mosby, Philadelphia, 2007.



Don't let hammertoes cramp
your style.

Mi Toe™ .
Mi Solution from pain.

There is no reason to delay hammertoe surgery any longer. The MiToe™ implant is designed to correct your hammertoe – reducing the associated pain and improving the appearance of your feet – all without external wires.

Depending on your doctor's advice, you may be back to many of your usual daily activities within a few weeks.

There will be some normal post-surgical bandages and restrictions, but after healing, the goal is a natural-looking toe that restores function without the pain.



How can little toes mean big problems?

Tell someone your toe hurts and watch them tune out. Face it, people who don't have hammertoes cannot comprehend how debilitating it is.

Toes play an important role in balancing your body while walking or standing still. They bend and straighten to effectively grip the ground and push your feet forward.

Hammertoes, as you probably know, occur when one or more toes remain bent or curled, causing an unnatural appearance. These crooked toes drastically change the shape of your foot, causing excruciating pain which is often worsened by footwear. This makes walking, jogging, or simply standing very difficult.





What causes hammertoes?

Foot problems, such as hammertoes, often develop in early adulthood and worsen with aging. There are many contributing factors, some of which you cannot help:

- Heredity
- Toe muscle or tendon imbalance
- Prior trauma, such as a broken toe
- Arthritis
- Excessive pronation (inward rolling) of the foot
- Excessive flattening of the foot
- Tight calf muscles and a very high arch

However, women are more affected by hammertoes because their shoes, which can look oh-so-good when worn, cause the toes to be in an unnatural, bent position. This is worsened by:

- Wearing tight, poorly fitting shoes, especially high-heeled and pointed shoes
- Excessive use of open-back/strapless shoes, requiring toes to grab
- Wearing shoes that gradually squeeze the foot bones into an unnatural shape

While there are non-surgical treatments, such as splints and padding, in the early stages of the condition, the toe eventually becomes so painful and rigid that the only option is surgical correction of the toe. If you are investigating the MiToe™ solution, chances are you have reached this point and must speak to your doctor.

How will my doctor assess my toes?



Your doctor can best determine the appropriate treatment for your hammertoes.

During your first office visit, your doctor will want to determine the underlying cause of your foot problems, confirming that it is or is not hammertoes. He or she may do this by:

- Assessing the frequency and intensity of the pain associated with your hammertoes
- Examining how far and how smoothly the affected joint moves
- Watching how your feet rotate and flatten as you walk
- X-raying to check for bone problems or to rule out other causes of pain and swelling.
- Conducting blood tests or arthrocentesis (removal of fluid from a joint to test for existing problems such as gout, rheumatoid arthritis, or joint infection.)

With this information, your surgeon will ask about your goals for treatment, and help guide you in determining the best treatment options specifically for you.



X-rays are a valuable tool for determining the source of your foot pain.

What are my treatment options?



Your doctor may recommend padding for your footwear.

Depending on several factors, such as the presence or severity of pain, your surgeon may simply recommend a change in footwear, padding for your corns and calluses, splinting, or he/she may prescribe custom-made shoe inserts to correct your foot mechanics. Additionally, medication may be prescribed to control the pain associated with hammertoes.

However, when medications and shoe modifications fail to control the problem, your surgeon may recommend surgery. Surgery is often a last resort measure, but it can provide significant relief by addressing the cause of hammertoes. Only your surgeon will know when surgery is the best option for you.



If your pain is severe, your doctor may recommend foot surgery.

When surgery is right for you

When your pain is severe and conservative treatments fail to correct your hammertoe, your surgeon may determine that surgery is your best treatment option. Every patient is different, and there is no “best” surgical treatment for everyone. Instead, your doctor may “mix-and-match” several common surgical procedures to specifically tailor the treatment to best correct your hammertoes. There are many surgical options, and each procedure accomplishes a slightly different result, but some of the most common types of hammertoe surgical treatments include:

Resection – Removal and reshaping of bone from the PIP (proximal interphalangeal) joint.

- As the PIP joint is often the main culprit of hammertoes, this procedure allows the surgeon to remove the rigid bony build up at the PIP joint that prevented the toe from straightening.

Arthrodesis – Fusion of the PIP joint to minimize motion and pain.

- To prevent the PIP joint from returning to its crooked appearance, the PIP joint is often positioned so that bone will fill the joint. This permanently restricts the hammertoe from reappearing, and eases pain associated with the deformity.
- Your toe is unique, in that it can be fused with minimal impact to your everyday activities, unlike other joints like your knees, shoulders and fingers. In fact, you may not even notice any difference in function compared with your normal toes.

Tendon transfer – The tendon that flexes your toe is re-routed from under your toe to the top, so that it pulls your toe down into proper alignment.

- The bend at the PIP joint in your hammertoe is often caused by an unbalanced tendon that has begun pulling your toe in an unnatural position. Over time,



this unbalanced state may become permanent, and your surgeon will have to move the tendon into a more balanced position through a tendon transfer.

Tendon lengthening/capsule release – The tendons that pull the toe up and/or down may be partially cut to relax and straighten the toe.

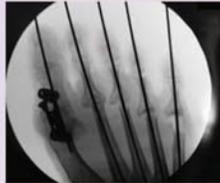
- When surgery is required, the tissue around your hammertoe has begun to act as if the deformed position is normal, creating a very rigid and painful toe. To restore alignment and ease the tension on the PIP joint, this tissue may need to be trimmed through some very minor cuts of the capsule that surrounds your joint.

Metatarsal shortening – A portion of the long bone near the base of the toe is removed, giving the toe more space to extend itself.

- Most shoe manufacturers design their shoes to accommodate a “normal” waterfall appearance of the toes, with the big toe being the longest, and each smaller toe being slightly shorter. However, everyone is different, and not all toes match this appearance. In fact, hammertoes are often created when a toe that is naturally longer than the surrounding toes is shoved into a shoe with a restrictive toe box, causing it to buckle.
- Over time, this longer toe permanently maintains this crooked appearance, becoming a rigid and painful hammertoe.
- Metatarsal shortening corrects this underlying cause of hammertoes by shortening the problematic longer toe, thereby allowing your foot to better accommodate most footwear.

Many of these procedures require the implantation of a variety of orthopaedic products to make sure the procedure works. Your surgeon may select from a variety of products, from pins to screws to a new style of implant which ensures joint fixation and stabilization. As with surgical procedures, there is no “best” product for every patient.

Traditional K-wire treatment involves wires that are exposed at the end of the patient's toe for several weeks



A possible complication with those exposed wires is infection

The MiToe™ Alternative



Unlike traditional K-wire treatment, the MiToe™ implant remains completely within the toe

The old way of treating hammertoes

For years, wire pins (also known as “K-wires”) were the standard implant for treating hammertoes. For the surgeon, wires provide an easy and reliable method for quickly treating hammertoes. They would straighten the toe during surgery, and fixate it with a wire placed through the bone and out the tip of the toe. The wire would remain in while the bone fused and the tissue healed. After several weeks, the wire would be removed at the surgeons’ office, and the patient would be sent on her way with a straightened toe.

However, the experience for the patient was very different. You likely know of someone who was treated with wires, and have heard the stories. Many patients complain about the inconveniences that come with the wires being exposed out the end of the toe for several weeks – from limitations in activities and footwear to breakage and dislodgement of the wires. They are also often queasy about the wires’ removal in the surgeon’s office.

Finally, as the wire is removed several weeks after surgery, several patients have experienced their hammertoes returning.* Because of this, many surgeons recognized that there needed to be a better solution — an implant designed to correct the hammertoe that would remain completely within the toe. We believe that the MiToe™ implant is that solution.

* Coughlin M. Lesser toe deformities. In: Surgery of the Foot and Ankle, ed 9, pp. 363-464, edited by M Coughlin, R Mann, C Saltzman, Mosby, Philadelphia, 2007.

MiToe™. Mi Benefits.

Depending on your specific condition, your surgeon may recommend the MiToe™ implant for several reasons that will benefit you.

A Lasting Solution

With a wire treatment, nothing remains in the toe once the wire pins are removed. Hammertoes can then recur, especially if the bones in the toe were not able to fully heal.* As an alternative to traditional wire treatment, the MiToe™ implant is implanted within the bone and remains there, within the toe.

More Comfortable

The one-piece, internal design of the MiToe™ implant eliminates the discomfort and inconvenience of exposed and protruding wires commonly associated with traditional hammertoe implants.

Fewer Complications Compared to K-Wires

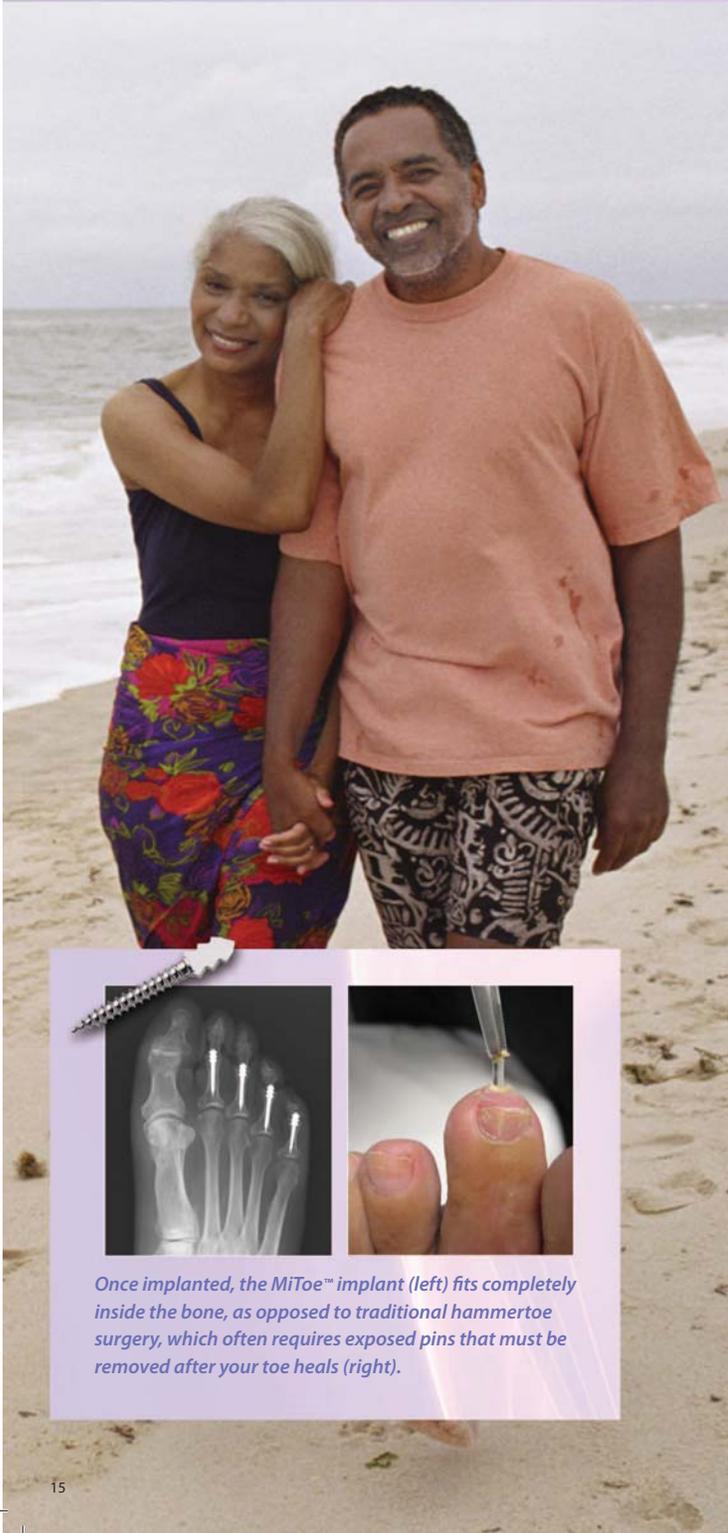
Ordinary hammertoe procedures often use exposed wires which extend outside the end of toes for 4-6 weeks. Common problems associated with wires include infection where the wires come out of the toe, breakage, pain from hitting the wire, and lack of rotational stability causing the toe to look crooked. In addition, wires require a second in-office procedure to remove them, which can cause a lot of anxiety for many patients.

Once inserted, the MiToe™ implant remains within the bone, correcting the pain and deformity of hammertoes while eliminating many of the complications specific to wires.

Simple Recovery

Any surgery requires a period of healing and rehabilitation. However, by eliminating many of the complications and hassles associated with wires, the MiToe™ implant was designed to simplify your recovery to get you back on your feet quickly.

* Coughlin M. Lesser toe deformities. In: Surgery of the Foot and Ankle, ed 9, pp. 363-464, edited by M Coughlin, R Mann, C Saltzman, Mosby, Philadelphia, 2007.



Once implanted, the MiToe™ implant (left) fits completely inside the bone, as opposed to traditional hammertoe surgery, which often requires exposed pins that must be removed after your toe heals (right).

What are the risks?



Your doctor can best determine if surgery and the MiToe™ Implant are right for you.

As with any surgical procedure, there are risks associated with foot surgery that you should discuss with your surgeon. These potential risks and complications with products used to treat hammertoes include implant breakage, infection at the incision site, pain, inflammation and swelling at implant site, allergic reaction to implant material(s), loosening or dislocation of implant resulting in revision surgery, deterioration or loss of bone, over-production of bone, blood vessel blockage, and negative bodily response due to implant rejection and/or implant wear debris.



We invite you to learn more about the MiToe™ implant at www.mitoe.com

In addition, your weight, age, and medical history determine your specific risks and your results.

Ask your doctor if foot surgery is right for you.

What should I tell my doctor?

Tell your doctor if you have diabetes or have been diagnosed with bone loss or weak bones. Also, tell your doctor about all other treatments you have had to fix your toes, even if they were done a long time ago.

What can I expect after surgery?

Hammertoe surgery can both reduce pain and improve the function and appearance of your toe. Your surgeon will create a recovery specific to you and your surgery, so post-operative routines may differ. For best results, see your doctor as scheduled and follow all recovery instructions carefully.

While the MiToe™ implant was designed to eliminate many of the hassles and complications of traditional wires, there will be a recovery period after surgery that will allow your foot to heal. During this time, your activity and footwear may be restricted, providing the best opportunity for the bone and tissue to rebuild your toe into a normal alignment. This rebuilding and healing may occur over the course of several weeks and months. However, the restrictions are often limited to the first few weeks after surgery, when the toe is most sensitive to disruptions.

Typical limitations involve bandaging and footwear immediately after surgery, lasting only a few weeks:

- Immediately after surgery, your foot will be bandaged until the incisions heal, typically one to two weeks.
- If soft tissues were shifted during surgery, you may be given a splint to limit foot movement for a while. In such cases, the majority of healing should occur within a few weeks.
- Depending on other procedures performed, your foot may be placed in a surgical shoe, boot or cast for several weeks.
- Also, it is possible that you may experience problems with healing due to infection which may require additional surgery to remove the MiToe™ implant

Your doctor can also tell you of any pain medications, wound care, and rehabilitation routines to get you back on your feet and living life faster.