

HyProCure Q&A's

1. What Is HyProCure And Do I Need It?

HyProCure is specifically designed to fix misaligned feet - a condition where the ankle bone slides off the heel bone (talotarsal dislocation): the two biggest symptoms of this condition are hyper pronation (where your feet roll inwards) and flat feet.

2. Is The EOTTS-HyProCure Procedure Covered By My Insurance?

The HyProCure procedure may be covered by your insurance plan. Check with your foot and ankle specialist or with your insurance carrier for specific coverage details. Coverage terms can vary among the different insurance plans and regions. Since the EOTTS-HyProCure is not covered by all health insurance plans, we at Atlas-FAI do what we can to keep the costs affordable.

3. Is There Drilling Or Screwing Involved In The EOTTS-HyProCure Procedure?

There is no drilling or screwing involved with the HyProCure procedure. A small incision is made in the skin above the sinus tarsi and the stent simply slides into the natural space inside the foot. The threads on the stent are only to allow for the scar tissue to form around the grooves and lock the device in place during the normal healing process.

4. Are There Any Limitations, As Far As Sports Go, After The EOTTS-HyProCure Procedure?

Once the tissues surrounding the stent are healed, there should be no limitation. The abnormal motion is no longer present and normal motion will occur. Usually, there is a significant improvement in running, jumping -& any activity involving propulsion from the foot.

5. Can I Still Get MRIs, CT Scans, Etc. With HyProCure In My Foot?

HyProCure stents are made from medical grade titanium which is not reactive to imaging modalities. However, as with any procedural implant, you should inform your doctors of the implant and follow their recommendation.

6. Do I Need HyProCure Even Though I Don't Have Any Symptoms?

If a deformity is present, the sooner it is treated the less damage will occur. You don't want to wait for pain. At that point there may be irreversible damage. We don't wait until our car tires are worn to balance them!

7. If HyProCure Is Performed On A Child, Does It Have To Be Replaced Later In Life?

The short answer is likely no, but this is not a guarantee. Normally, once the stent is inserted into the foot it never has to be changed. The bones will continue to grow peripherally around HyProCure.

8. What Are The Chances Of Having An Allergic Reaction To The HyProCure Implant?

Titanium is the choice material used in the body since it is the least reactive. HyProCure is made entirely of medical grade titanium.

9. Do I Need HyProCure Even If I Have A Mild Case Of Hyperpronation?

If you have symptoms and other forms of conservative therapy, including orthotics, haven't been able to provide you with relief, then this procedure would be helpful.

10. Will I Feel HyProCure In My Foot?

As long as the implant does not displace, you should not be able to feel HyProCure after the procedure. Sometimes for the first few months a hard substance may be felt in the area of the surgery. This is scar tissue and should dissipate after several months, if present at all.

11. If I Get HyProCure Will There Be A Visible Scar?

The incision is less than an inch long and slender and this part of the skin heals remarkably well. With time, the scar should become virtually invisible, in most cases.

12. After The HyProCure Procedure, Will I Need To Be Pre-Medicated Prior To Dental Treatment Or Other Future Surgical Procedures?

You will not need to premedicate prior to dental or other surgical procedures because the HyProCure stent is not embedded into the bone.

13. Will This HyProCure Get Rid Of All Of The Pains In My Body?

No one can completely predict the outcome of any surgical procedure, but this solution will improve your entire body's alignment, and in many cases it will even fully correct it, provided there are no other skeletal defects in other parts of the body. As a consequence, reduction and relief of many pains caused by the foot imbalance will also be reduced or eliminated. However, it is possible that some of the joints and soft tissues in the body may have already suffered irreversible wear and tear, and in those cases other treatments or procedures might be necessary. In either case, correcting the root of the problem is still essential to stopping any further damage and to allowing for any additional therapies (if necessary) to be long lasting.

14. Will I Still Have To Wear My Orthotics After Getting The HyProCure Procedure?

If the orthotics were dispensed to treat hyperpronation then you will no longer need them. However, there are other reasons for orthotics to be worn. Orthotics can be used to off-weight prominent areas to the bottom of the foot. If those areas are not surgically addressed, then orthotics may still be required after the procedure.

15. What Causes Talotarsal Displacement?

It is most commonly caused by hereditary or genetic factors.

16. Are There Limitations To The HyProCure Procedure?

Yes, every surgical procedure has its limitations. In very severe cases of talotarsal displacement, other surgical procedures may be necessary to achieve optimum correction.

17. Who Uses HyProCure? DPM's Or MD's?

Within the United States, as surgeons who specialize in foot and ankle procedures, typically more DPM's use HyProCure than any other type of physician. Internationally however, HyProCure is used by a number of orthopedic surgeons.

18. Does The HyProCure Procedure Make Your Arch Visible As Well?

HyProCure is designed to fix a condition where the ankle bone slides off the heel bone (talotarsal dislocation): the two biggest symptoms of this condition are hyperpronation (where your feet roll inwards) and flat feet (no visible arch). So yes, a HyProCure procedure usually creates a visible arch, as a result of correcting the underlying displacement problem.

19. How Long Has The HyProCure Procedure Been Available To The General Public?

HyProCure is a well-researched, innovative product that has provided a lasting solution for many people with flexible talotarsal displacement. As a Class II sinus tarsi stent, HyProCure preserves full foot motion and has a far lower removal rate than subtalar Arthroereisis devices. HyProCure is both FDA and CE cleared and has been used in over 50,000 procedures globally since 2004.

20. Does A Person's Size Or Weight Determine Who Is An Ideal HyProCure Candidate?

A patient's size and weight are not contraindications for the HyProCure procedure. Since the stent repositions the ankle bones, nearly all of the body's weight is correctly realigned on the articular facets and not on the stent. Research studies indicate that only about 3% of a patient's weight is focused on

the HyProCure stent; this weight is safely supported by the integrity and strength of the stent's medical grade titanium; 6AL-4VELI per ASTM-F136.

21. Does HyProCure Help Arthritis?

Arthritis does NOT prevent patients from having the HyProCure procedure; often the source of the arthritis can be the talus on the calcaneus grinding, caused by hyper-pronation. There is a possibility that a HyProCure procedure will reduce or eliminate arthritis pain.

22. Am I Too Old Or Too Young For HyProCure?

The HyProCure procedure is being performed all over the world, in nearly 50 countries, in patients as young as 3 and as old as 96. Because everyone's feet are different we recommend consulting your foot doctor.