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Prothetische Implantatplatte

Plaque prothétique implantable

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Description

[0001] This invention relates to a veritable prosthetic system and device and a method for implanting the device and, more particularly, to a spinal fusion system, [0002] Many types of prosthetic devices have been proposed in the past. For example, U.S. Patent 5,192,327 to Brantagan concerns a surgical prosthetic modular implant used singularly or stacked together to support and fuse together adjacent vertebrae or to totally or partially replace one or more vertebrae in a vertebral column. Other surgical implant devices and methods are shown in U.S. Patents 5,192,327; 5,261,911; 5,713,899; 5,776,196; 6,136,002; 6,159,245; 6,224,602; 6,258,089; 6,261,586; 6,264,655; 6,306,136; 6,328,738, 6,592,586. FR 2827150 and DE 4409833. Some or all of these devices have improved the success rate and have simplified the surgical techniques in inter-body veritable fusion.

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[0003] Among some of the problems associated with the prior art devices is that after the device is inserted into a patient during a surgical procedure, there was a possibility of retropulsion of the inter-body device and graft material into the spinal cord or other neurological element.

[0004] Another problem with the prior art devices is that grafting material, which was inserted into the devices during the surgical procedure, could not easily be inserted from an anterior direction.

[0005] Moreover, in some of the prior art devices, the cover, if any, was typically fastened directly to the device and to spinal bones, which prevented the cover from being capable of moving relative to the device. In addition, in devices that used a cover, the cover did not function to both retain the grafting material in the device and simultaneously fix the spinal bones relative to each other.

[0006] What is needed, therefore, is a system, which facilitates overcoming one or more of the aforementioned problems as well as other problems and to provide a device that has unique features that will facilitate reducing the risk associated with neurological surgeries and advance the present state of the art.

[0007] The invention comprises a prosthetic implant system according to claim 1.

[0008] This object and advantages of the invention will be apparent from the following description, the accompanying drawing and the appended claims.

Fig. 1 is a partial side view a human spine illustrating anteriorly discs between various spinal bones;

Fig. 2 is a partial side view of the spinal column shown in Fig. 1 illustrating several of the discs removed, for example, after surgical procedure;

Fig. 3 is a partial side view of the human spine with the housings according to one embodiment of the invention situated therein;

Fig. 4 is a partial side view of the human spinal column illustrating graft material being inserted anteriorly into the housing; Fig. 5 is a partial exploded side view of the embodiment shown in Fig. 1-4 illustrating a cover and a plurality of screws which will secure the cover to the spinal column;

Fig 6 is a side view similar to Fig. 5 illustrating after the cover has been mounted to the spinal column; Fig. 7 is a exploded view of the device shown in Fig. 6, illustrating a plurality of housings and a single cover for use with covering the plurality of housings;

Fig. 8 is partial side view illustrating an elongated housing and cover used during a vertebrectomy procedure:

Fig. 9 is a partial side view of the spinal column illustrated in Fig. 8 showing the elongated housing situated between adjacent spinal bones in a single cover to be affixed to those spinal bones;

Fig. 10 is an exploded view of the circle area shown in Fig. 8;

Fig. 11 is a exploded view of the elongated housing illustrated in Figs. 8 and 9 and the cover and screws associated therewith;

Fig. 12 is a partial fragmentary view of the cover and housing after the cover has been situated between a pair of rails associated with the housing;

Fig. 13 illustrates a partial side view of an embodiment showing a plurality of housings of different sizes used with a single cover;

Fig. 14 is a exploded view of the housings and cover illustrated in Fig. 13;

Fig. 15 is a partial anterior side view a human spine illustrating the discs between various spinal bones; Fig. 16 is a partial anterior view of the spinal column shown in Fig. 1 illustrating several of the discs removed, such as by surgical procedure;

Fig. 17 is a partial anterior view of the human spine with the housings according to one embodiment of the invention situated therein;

Fig. 18 is a partial anterior view of the human spinal column illustrating graft material being inserted anteriorly into the housing;

Fig. 19 is a partial exploded anterior view of the embodiment shown in Fig. 1-4 illustrating a cover and a plurality of screws for securing the cover to the spinal column;

Fig. 20 is a anterior view similar to Fig. 5 illustrating the cover mounted to the spinal column;

Fig. 21 is a fragmentary view illustrating various features of the cover;

Fig. 22 is another fragmentary view of the cover after the screws are mounted and the locking mechanism retains the screws therein;

Fig. 23 is a fragmentary sectional view of the embodiment shown in Fig. 22 illustrating various features of the locking mechanism;

Fig. 24 is a schematic view of a process or method for fusing spinal bones together;

Fig. 25 illustrations another example without crossbars or migration preventers;

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Fig. 26 is a view of another example showing the crossbars integrally formed in the housing and without migration preventers;

Fig. 27 is a view illustrating a plurality of migration preventers, without any crossbars;

Fig. 28 is a view illustrating a housing with a plurality of projections which cooperate with the cover to prevent the housing from migrating anteriorly;

Fig. 29 is another view of the housing illustrating a plurality of removable crossbars without any migration preventers; and

Fig. 30 illustrates another example, similar to the devices illustrated earlier relative to Fig. 1-20 showing details of the cross bars and notches for receiving them.

[0009] Referring now to Fig. 1, a partial side view of a patient or person P is shown having a spinal column S and a plurality of spinal bones, such as vertebrae, 10, 12, 14 and 16. Note that a disc, such as discs 18, 20 and 22 in Fig. 1, is located between adjacent pairs of spinal bones (e.g., between bones 10 and 12, 12 and 14, and 14 and 16). During a spinal fusion procedure, such as a discectomy, the discs 18, 20 and 22 may be removed so that adjacent vertebrae may be fused together

[0010] Fig. 2 illustrates a fragmentary view of the spinal column S shown in Fig. 1, with the discs 18, 20 and 22 removed. It should also be understood that during another surgical procedure, such as a vertebrectomy, it may be desired to remove part of all of one of the spinal bones 10-16, as illustrated in Fig. 13. In this type of neurological procedure, it may also be desired to fuse adjacent spinal bones together for reasons that are conventionally known. This invention provides means for facilitating and performing such procedures. For ease of illustration, Figs. 15 - 20 provide corresponding anterior views to the side views shown in Figs. 1-6, respectively.

[0011] In the embodiment being described, a spinal fusion system 24 is provided for use as a prosthetic implant during a neurological procedure such as the aforementioned vertebrectomy or discectomy. In general, after the discs 18, 20 and 22 (Fig. 1) are removed, as illustrated in Fig. 2, a plurality of receiving areas 26, 28 and 30 (Figs. 2 and 17) are defined by the areas between the surfaces of adjacent spinal bones 10, 12, 14 and 16. As illustrated in Fig. 2, the area 26 is bounded in part by the surface 10a of spinal bone 10 and surface 12a of spinal bone 12. Likewise, area 28 is partially bounded by surface 12b of spinal bone 12 and surface 14a of spinal bone 14, and area 30 is bounded by surface 14b of spinal bone 14 and surface 16a of spinal bone 16.

[0012] As illustrated in Figs. 3-7 and 11 and as will be described in more detail later herein, the spinal fusion system 24 comprises a housing 32 dimensioned to be situated or received between adjacent spinal bones, such as bones 10 and 12. A housing 32 is situated in each of the plurality of receiving areas 26, 28 and 30, as illustrated in Figs. 3-4. Each housing 32 cooperates with adjacent

spinal bones to define a graft area, such as areas 34, 35 and 36 in the view illustrated in Fig. 17, for receiving graft material 38 (Figs. 4 and 18). As illustrated in Figs. 4 and 18, the graft material 38 is situated in the areas 34, 35 and 36 after placement of the housing 32.

[0013] As illustrated in Fig. 11, the housing 32 is generally U-shaped as shown. In the embodiment being described, the housing 32 comprises a well 33 defining multiple sides and comprises a predetermined shape selected to cause the graft material to be formed into a multisided fused coupling between adjacent spinal bones, such as bones 10 and 12 in Fig. 3. Although not shown, the housing 32 could define a shape other than rectangular, such as semi-circular, oval or other suitable shape as may be desired. Note that the housing 32 comprises a first wall 32a, a second wall 32b and a third wall 32c joining the first wall 32a and the second wall 32b. One or more of the walls 32a-32c may comprise a plurality of holes or apertures 40 which facilitate the fusing process. The apertures 40 also permit visualization of graft material 30 on x-rays.

[0014] As mentioned later herein, the predetermined shape defined by the spinal fusion system 24 may provide a fused multi-sided plug of fusion material 32 having a height H (Figs. 14 and 16) of at least two millimeters, but typically less than approximately 180 millimeters. This height H may vary depending on the vertical size or height H (as viewed in Fig. 16) of the areas 26-30 to be filled. For example, in the area 26 illustrated in Figs. 2, 14 and 16, the height H of the area 26 generally corresponds to a height H1 (Fig. 1) of a disc, such as disc 18. Thus, the fusion material 38 (Fig. 18) would resultantly have a fused height H2 (Fig. 18) that generally corresponds to the height H (Fig. 16) and height H1 (Fig. 1). If, for example, a housing 32 having a longer height is required, such as height H3 in Fig. 14 and height H4 in Fig. 13, such as in the event of a vertebrectomy, then the fusion system 24 and housing 32 will define a height that generally corresponds to the dimension or height H (Fig. 9) to be traversed. Thus, it should be understood that the dimensions of the generally U-shaped housing 32 of the spinal fusion system 24 is selected depending on the size of the area 26-30 to be filled and the environment or application in which the spinal fusion system 24 is used. In general, the width and depth of the housing 32 will be approximately 9 - 20 millimeters and 7 - 20 millimeters, respectively.

[0015] As illustrated in Figs. 5-7, 11, 14 and 21-22, the spinal fusion system 24 further comprises a cover 42 comprising a plurality of apertures 44 that receive a plurality of screws 46, respectively, which are screwed directly into the spinal bones 10 and 16, as illustrated, for example, in Figs. 5-6.

[0016] As illustrated in Fig. 11, the housing 32 comprises a first rail, channel wall or wall portion 48 and a second rail, channel wall or wall portion 50 which cooperate to define a channel area 52 for receiving the cover 42. It should be understood that when the cover 42 is

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received in the channel 52, the sides 42a and 42b become associated with the sides 48a and 50a. It should be understood that the cover 42 is not directed permanently secured to the housing 32 after it is received in channel area 52. This feature permits the housing 32 secured to the housing 32 to migrate or float relative to the cover 42 even after the cover 42 is fixed to one or more of the spinal bones 10-16 as illustrated in Figs. 6 and 20. As illustrated in Fig. 23, the edges 42a and 42b of cover 42 and sides 48a and 50a may be beveled and complementary to facilitate locating and mating engagement between the cover 42 and housing 32.

[0017] As illustrated in Figs. 3-6 and 16-20, after the graft material 38 is placed in the housing 32 and the graft areas 35-36 (Fig. 17) defined by the housing 32 and adjacent spinal bones, then the cover 42 is situated between the walls or rails 48 and 50, as illustrated in Figs. 6 and 19. The screws 46 may then be used to secure the cover 42 to one or more of the spinal bones 10-16 as illustrated in Figs. 6 and 20. It should be understood that a feature of the invention is that the cover 42 facilitates aligning the housings 32 in a substantially co-lineal or relatively aligned position relative to each other and to the spinal bones 10-16, as illustrated in Figs. 6, 19 and 20. In the setting of multiple level discectomy, the floating cover 42 allows limited, controlled settling of the cages or housings 32 in the vertical plane with respect to the cover 42. As illustrated in Figs. 6, 8, 10 and 20, the cover 42 also provides means for providing a mechanical fixation of the adjacent spinal bones 10-16 relative to each other. Thus, while the housing 32 cooperates with adjacent spinal bones, such as spinal bones 10 and 12, to define a graft receiving area 34, the cover is multi-functional in that it not only covers the opening of any graft areas, such as area 34 (Fig. 17), but it also secures and retains the spinal bones 10-16 in a fixed spatial relationship relative to each other and relative to the housings 32. It should also be understood that the cover 42 may be fixed to one or more of the spinal bones 10-16 as may be desired to accomplish either of the aforementioned functions.

[0018] As illustrated in Fig. 11, note that the walls 48 and 50 further define projections 48b, 48c, 50b and 50c as shown. As illustrated in Figs. 3-6 and 17-20, the projections 48b, 48c, 50b and 50c provide a plurality of migration preventers for preventing the housing 32 from migrating posteriorly in the direction of arrow A (Fig. 3) toward the spinal cord S or other neurological elements after the housing 32 is situated between the adjacent spinal bones 10-16 as illustrated. Further, the migration preventers 48b, 48c, 50b and 50c enable a surgeon to locate each housing 32 between adjacent spinal bones, such as spinal bones 10-16 in Fig. 1, and move the housing 32 in the direction of arrow A in Fig. 3 until the migration preventers 48b, 48c, 50b and 50c engage the surface 10a of spinal bone 10 and migration preventers 48b, 48c, 50b and 50c engage the surface 12a of spinal bone 12. As illustrated in Fig. 3, after the housings 32 are situated between the spinal bones 10-16 as shown, the migration

preventers 48b, 48c, 50b and 50c facilitate preventing the wall 32c from being over-inserted by the surgeon or from being over-inserted to a point where it engages the spinal cord S or other neurological elements.

[0019] The spinal fusion system 24 further comprises at least one migration stop or crossbar 60 as illustrated in Figs. 11, 12, 29 and 30. The crossbar 60 may be either integrally formed in housing 32, as shown in Fig. 26, or separate as illustrated in Figs. 11, 29 and 30, as illustrated in Figs. 7, 12 and 14, for example. As illustrated in the exploded view in Figs. 10 and 11, the surface 60a of crossbar 60 engages and cooperates with surface 42c of cover 42 to prevent anterior migration in the direction of arrow B). Thus, the spinal fusion system 24 of the embodiment being described provides means for preventing insertion of the housing 32 to a point where it might engage the spinal cord S (Fig. 3) or other neurological elements, such as dura mater, thecal sac, and also means for facilitating prevention of migration of the housing 32 in an anterior direction or in the direction of arrow B in Fig. 10 after the housing 32 is situated as described herein and the cover 42 is mounted to one or more of the spinal bones 10-16.

[0020] It should be understood that a plurality of the migration stops or cross bars 60 may be used alone or in combination with the migration preventers 48b, 48c, 50b and 50c. It should be understood that the stops 60 could be detachable, as shown in Fig. 26, or they could be integrally formed in housing 32 (as shown in Fig. 26). Also, these cross bars 60 may be removably received in the notched receiving areas 94 (Figs. 29 - 30). For example, in anatomy that provided limited space, the surgeon may elect not to use a housing with cross bars 60 or use a housing that does not have integrally formed cross bars.

[0021] The system 24 further comprises a system or means for preventing retraction or back out of the screws 46 after they are screwed into the spinal bones 10-16 in order to secure the cover 42 thereto. The spinal fusion system 24 may be used with conventional screw lock devices or with the unique locking mechanism and system according to the present invention, which will now be described relative to Figs. 21-23.

[0022] As illustrated in Figs. 21-23, the spinal fusion system 24 and, more particularly, cover 42 may be provided with at least one or a plurality of resilient detents 62 which are generally L-shaped as shown and are resilient so that they can move laterally in the direction of double arrow C in Figs. 21-22 towards and away from a home position (Fig. 21) to permit the screws 46 first received in the apertures 44, and, second, locked into the cover 42. Thereafter, the screws 46 may be screwed into a spinal bone, such as spinal bone 10, and when a screw head 46a of the screw 46 engages a detent portion 62a of the resilient lock 62, the resilient lock 62 moves in a direction away from the apertures 44 until the screw head 46a clears the portion 62a. After a top surface 46b of the screw head 46a has cleared the bottom surface 62a1 (as

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viewed in Fig. 23) of portion 62a, the resilient lock 62 moves back toward aperture 44 to the home position until the portion 62a and surface 62a1 are operatively positioned over surface 46b of screw 46, thereby retaining and preventing the screws 46 from backing out of the cover 42 and thereby preventing the screws 46 from backing out of the spinal bone 10.

[0023] In the embodiment being described, the components of the spinal fusion system 24, such as the housing 32, first channel wall portion 48 and second channel wall portion 50, crossbar 60, cover 42 and screws 46 may be made of any desired composition or material such as a polymer, composite polymer, titanium, stainless steel, carbon fiber or other suitable material.

[0024] A method for fusing spinal bones together will now be described relative to Fig. 22. It should be understood that this procedure may be used during a vertebrectomy or discectomy or other neurological procedure during which it is desired to fuse spinal bones together. For ease of illustration, the example will be described as used during a discectomy procedure during which the discs 18-22 (Fig. 1) are removed so that spinal bones 10-16 may be fused together. The procedure begins by situating a patient P on an operating table (not shown) and providing an appropriate incision as conventionally known to expose the spinal bones such as the bones 10-16 illustrated in the side view shown in Fig. 1 and in the anterior view illustrated in Fig. 15. (Block 70 in Fig. 22). At Block 72, the vertebrae or discs, such as discs 18-22 in Figs. 1 and 15, are surgically removed revealing the areas 26-30 in Figs. 2 and 16. At Block 74, the housings 32 are inserted in the direction of arrow A (Fig. 3) into the areas 26, 28 and 30 until the migration preventers 40b, 48c, 50c and 50d engage the surfaces of the spinal bones 10-16, such as the surfaces 10a and 12a illustrated in Fig. 3. (Block 74 in Fig. 22). As mentioned earlier herein, the migration preventers facilitate preventing inserting the housing 32 to a point which would cause the wall 32c to engage the spinal column S.

[0025] As illustrated in Figs. 3 and 17, the housing 32 cooperates with adjacent spinal bones, such as bones 10 and 12 to define the graft receiving area or cavity 34 in which the graft material 38 (Fig. 4) may be inserted. As mentioned earlier herein, these graft areas 34-36 may comprise a shape which is generally rectangular, as defined by the shape of the housing 32, but it could comprise another shape by simply providing a housing 32 having a different predetermined shape. Thus, the housing 32 may be provided in a circular or arcuate shape in which case the graft area 34 would define a generally circular or arcuate area which would cause the graft material to form a similar shape. Other curved or multi-sided shapes may be defined by providing an appropriately or correspondingly shaped housing 32, depending on the selected or desired shape that the physician would like the fused graft material 38 to assume after it has fused to the adjacent spinal bones.

[0026] At Block 76, the graft material 48 is inserted and

at Block 78, the cover 42 is situated in the slot or area 52 defined by the walls 48 and 50. As mentioned earlier herein, the cover 42 facilitates covering the openings, such as openings 34a and 36a of the graft areas 34 and 36, respectively. The surgeon secures the cover 42 to one or more of the bones, as illustrated in Figs. 5-6 and 19-20 and then closes the patient (Block 80).

[0027] Again, and as mentioned earlier, a feature of the invention is that it provides a fixing system for fixing the location of the bones 12-16 relative to each other. Simultaneously, the system 24 permits the housing 32 to "float" between adjacent bones, such as bones 10 and 12 in Figs. 3 and 6. This is advantageous for reasons mentioned earlier herein. Another advantage on this feature of the invention is that if it is necessary to operate on the same patient at a later time (Block 82 in Fig. 24) and, for example, add one or more housings 32 in order to fuse other spinal bones together, then the cover 42 can simply be removed at a later time, another discectomy or vertebrectomy performed and another housing 32 inserted. Another cover 42, or perhaps a second cover may then be used to seal the additional housing 32 after it is situated in the manner described herein. Thus, this invention provides a system and method which is flexible and will permit the addition or insertion of additional housings 32 of the same or different sizes during a second operating procedure as illustrated in Block 82.

[0028] Figs. 1-8 and 15-20 illustrate the general procedure and use of the invention in an illustrative discectomy wherein three discs are removed, replaced with housing 32, and graft material 38 inserted as described and cover 42 situated and mounted as described herein. In the illustration shown in Figs. 1-8 and 15-20, three discs 18-22 are removed and the spinal bones 12-16 are fused together using the system and method as shown and described. It should be appreciated, however, that this system and method may be used with fewer or more housings 32 and with one or a plurality of covers 42 as may be desired or required. For example, if only one of the discs 18-22 needed to be excised and only two of the spinal bones 10-16 fused together, then only one housing 32 and cover 42 may be necessary. Likewise, as mentioned earlier herein, the housings 32 may comprise a different dimension or different height H (Fig. 14) to span a greater area, such as the area H4 illustrated in Figs. 13 and 14. For example, Figs. 13 and 14 illustrates a vertebrectomy wherein the spinal bone 12 has been removed along with the disc between spinal bones 14 and 16. This provides areas 80 and 81 in which an elongated housing 32', such as the housing 32' illustrated in Fig. 14 may be inserted. After the housings 32 and 32' are inserted between the spinal bones 10-14 and 14-16 as shown in Fig. 13, graft areas 82 and 84 are provided for receiving the graft material 38. As illustrated in Fig. 13, the cover 42 would have a corresponding elongated shape for fixing the bones 10 and 14 together and for covering both openings 82 and 84 or housings 32 and 32'. [0029] It is also anticipated that the invention may be

used in a multitude of procedures, such as a vertebrectomy (Figs. 8 and 9), discectomy (Figs. 1-7, 13-20, or even a combination of a vertebrectomy and discectomy as illustrated in Figs. 13-14. As mentioned and described earlier herein, a combination of different sizes of housings 32 and covers 42 may be used as shown. Although it is preferred that a single cover 42 be used, it may be desired in some applications to use multiple covers 42, such as where the removed discs are not adjacent.

[0030] In the illustrations being described, the housings 32 comprise the crossbar 60 which cooperate with the cover 42 to prevent anterior migration of the housing after the screws 46 are secured to the spinal bones as illustrated in Figs. 6, 9 and 13.

[0031] Figs. 25-30 illustrate other variants of housings. In Fig. 25, a generally U-shaped housing 32 is provided without the walls 48 and 50 or crossbar 60. This embodiment may be useful. This may be useful if it were desired to insert housing 32 in local anatomy so that it could be loaded from the side or laterally, rather than anteriorly, as previously described. In Fig. 26 a housing 32" is provided with the crossbars 60, but without the walls 48 and 50. In this embodiment it may be useful to use such a housing design when the local anatomy provides limited space.

[0032] Fig. 27 illustrates yet another housing 32 that is provided with a plurality of protrusion 86, 88, 90 and 92 that do not span completely between the walls 32b or 32a together but yet provide the protrusions 86-92 which will engage the cover 42 if the housing attempts to migrate anteriorly as described earlier herein. Figs. 1-24, 29 and 30 show housings where the crossbars 60 are not integrally formed with the housing 32, but received in the notched areas 90 as shown. As mentioned earlier, the crossbars 60 may be separate or may be integrally provided with the housing 32. Providing detachable crossbars 60, such as is shown in the embodiments illustrated in Figs. 25, 28 and 29, enable the walls 32a and 32b to flex towards and away from each other. The housing 32 may be provided with a malleable material in which case the surgeon can change the general U-shape of the housing 32 to accommodate the size or shape of the areas 34 and 36 (Fig. 17). In the embodiment described, housing 32 and cover 42 may be made of titanium, polymer or a bioresorbable material.

[0033] Fig. 31 illustrates the walls 48 and 50 having notched areas 49 and 51 for receiving the cover 42, thereby eliminating the need for cross bars 60. Advantageously, the various examples illustrated in Figs. 1, provide a system for inserting graft material 32 into a graft area 34 and 36 (Fig. 17) to fuse a plurality of bones such as bones 10-18 together. The system and method also provide means for fixing the bones 10-18 relative to each other, while permitting the housing 32 to cooperate with adjacent bones 10-18 to define a graft area 34 and 36 (Fig. 17) and to also float relative to the cover 42. The locking system illustrated in Figs. 21-23 further facilitates providing a locking system that does not require the use of any

tools, yet prevents back out of the screws 46.

[0034] While the apparatus described constitutes preferred embodiments of this invention, it is to be understood that the invention is not limited to this precise apparatus, and that changes may be made in either without departing from the scope of the invention, which is defined in the appended claims.

10 Claims

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- **1.** A prosthetic implant system comprising:
 - at least one screw (46),
 - a prosthestic implant plate (42), comprising a generally planar member; and

a lock (62) integral with the generally planar member for preventing withdrawal of said at least one screw (46) after said at least one screw (46) is screwed into a spinal bone (10-16)

wherein each lock (62) comprises a resilient member (62) associated with an opening for permitting said screw (46) to be situated in said opening (44) and screwed into a spinal bone (10-16), said at least one resilient member (62) preventing said screw (46) from withdrawing from said spinal bone (10-16), characterized in that the integral lock (62) comprises an elongated resilient arm for locking said screw (46) into said opening (44) when screwed into the spinal bone (10-16) comprising a detent portion (62a), the elongated resilient arm (62) being movable between:

- a home position wherein the detent portion (62a) is able to retain the screw (46) in the member (42); and
- a flexed position wherein the detent portion (62a) is moved away from its home position,

and in that the screw comprises:

- a screw head (46a) engaging the detent portion (62a) to elastically flex to the flexed position in response to the screw being screwed and moving the integral lock (62) away from said opening (44); and
- a surface (46b) over which the detent portion (62a) is positionned in the home position to prevent the screw from backing out from the member (42).
- 2. The prosthetic implant system as recited in claim 1, wherein said resilient member is generally L-shaped in cross-section.
- 3. The prosthetic implant system as recited in any previous claims, wherein said generally planar member

is selected within titanium, stainless steel, and a composite polymer.

4. The prosthetic implant system as recited in any previous claims, comprising openings (44) therein for respective screws (46).

Patentansprüche

- 1. Ein prothetisches Implantatsystem, aufweisend:
 - mindestens eine Schraube (46),
 - eine prothetische Implantatplatte (42), die ein im Allgemeinen ebenes Element (42) aufweist, und
 - ein Schloss (62), das integral mit dem im Allgemeinen ebenen Element ausgebildet ist, zum Verhindern eines Entfernens von zumindest einer Schraube (46), nachdem die zumindest eine Schraube in einen Wirbelsäulenknochen (10 -16) hineingeschraubt ist, wobei iedes Schloss (62) ein federndes Element

wobei jedes Schloss (62) ein federndes Element (62) aufweist, welches mit einer dazugehörigen Öffnung assoziiert ist, und welches erlaubt, dass sich die Schraube (46) in der Öffnung (44) befindet und in einen Wirbelsäulenknochen (10 - 16) hineingeschraubt ist, wobei das mindestens eine federnde Element (62) ein Entfernen der Schraube (46) aus dem Wirbelsäulenknochen (10 - 16) verhindert,

dadurch gekennzeichnet, dass das integrale Schloss (62) einen länglichen federnden Arm zum Verriegeln der Schraube (46) in der Öffnung (44) aufweist, wenn sie in den Wirbelsäulenknochen (10 - 16) eingeschraubt ist; wobei der Arm einen Rastbereich (62a) aufweist, und wobei der längliche federnde Arm (62) bewegbar ist zwischen:

- einer Ausgangsposition, in welcher der Rastbereich (62a) in der Lage ist, die Schraube (46) im Element (42) zu halten; und
- einer gebogenen Position, in welcher der Rastbereich (62a) von der Ausgangsposition weg bewegt ist; und

dass die Schraube aufweist:

- einen Schraubenkopf (46a), welcher in den Rastbereich (62a) eingreift, um diesen in Reaktion auf die sich eindrehende Schraube elastisch in die gebogene Position zu verbiegen und das integrale Schloss (62) von der Öffnung (44) wegzubewegen; und
- eine Oberfläche (46b), über welcher der Rastbereich (62a) in der Ausgangsposition positioniert ist, um ein Herausbewegen der Schraube aus dem Element (42) zu verhindern.

- Das prothetische Implantatsystem gemäß Anspruch
 , wobei das federnde Element im Querschnitt im Allgemeinen L-förmig ist.
- Das prothetische Implantatsystem gemäß einem der vorhergehenden Ansprüche, wobei das im Allgemeinen ebene Element aus Titan, Edelstahl oder einem Verbundpolymer ist.
- 4. Das prothetische Implantatsystem gemäß einem der vorhergehenden Ansprüche, aufweisend darin Öffnungen (44) für entsprechende Schrauben (46).

15 Revendications

- 1. Système d'implant prothétique comportant :
 - au moins une vis (46),
 - une plaque d'implant prothétique (42) comportant un élément généralement plan, et
 - un élément de blocage (62) monobloc avec l'élément généralement plan pour empêcher un retrait de ladite au moins une vis (46) après que ladite au moins une vis (46) ait été vissée dans un os vertébral (10 à 16),

dans lequel chaque élément de blocage (62) comporte un élément élastique (62) associé à une ouverture pour que ladite visse (46) soit située dans ladite ouverture (44) et vissée dans un os vertébral (10 à 16), ledit au moins un élément élastique (62) empêchant ladite vis (46) de se retirer dudit os vertébral (10 à 16),

caractérisé en ce que l'élément de blocage monobloc (62) comporte un bras élastique allongé pour bloquer ladite vis (46) dans ladite ouverture (44) lorsqu'elle est vissée dans l'os vertébral (10 à 16), comportant une partie de maintien (62a), le bras élastique allongé (62) étant mobile entre:

- une position de repos dans laquelle la partie de maintien (62a) peut retenir la vis (46) dans l'élément (42), et
- une position fléchie dans laquelle la partie de maintien (62a) est écartée de sa position de renos

et en ce que la vis comporte :

- une tête de vis (46a) en prise avec la partie de maintien (62a) pour fléchir élastiquement jusqu'à la position fléchie en réponse au vissage de la vis et à l'écartement de l'élément de blocage monobloc (62) de ladite ouverture (44), et une surface (46b) sur laquelle la partie de maintien (62a) est positionnée dans la position de repos pour empêcher la vis de ressortir de l'élément (42).
- 2. Système d'implant prothétique tel qu'énoncé dans

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la revendication 1, dans lequel ledit élément élastique a généralement une section transversale en forme de L.

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3. Système d'implant prothétique tel qu'énoncé dans l'une quelconque des revendications précédentes, dans lequel ledit élément généralement plan est choisi parmi le titane, l'acier inoxydable et un polymère composite.

4. Système d'implant prothétique tel qu'énoncé dans l'une quelconque des revendications précédentes, comportant des ouvertures (44) dans celui-ci pour des vis (46) respectives.

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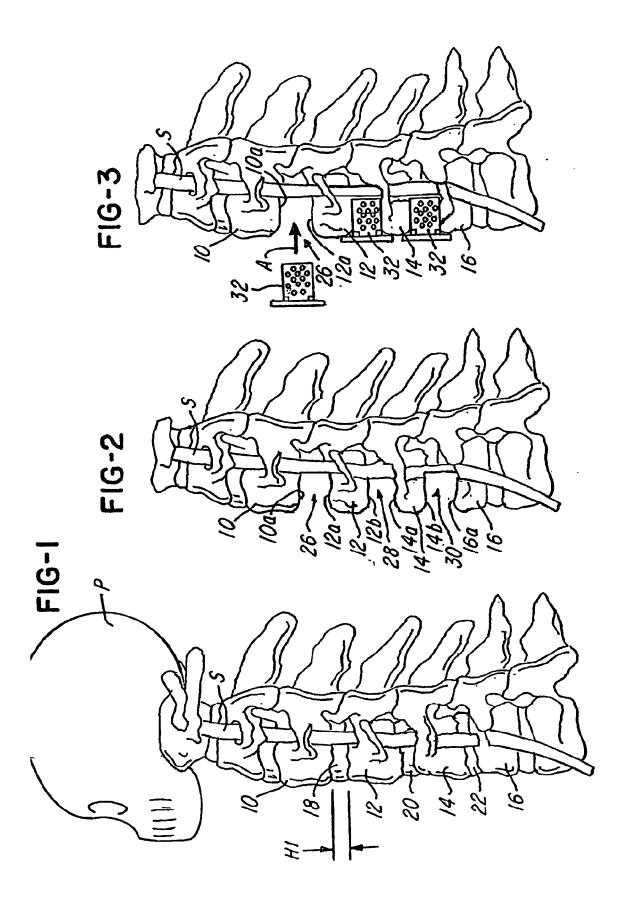
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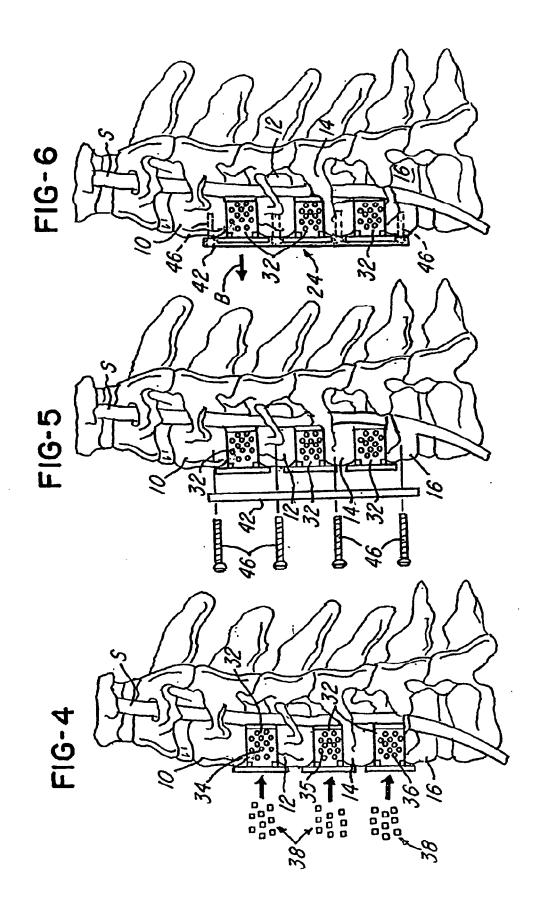
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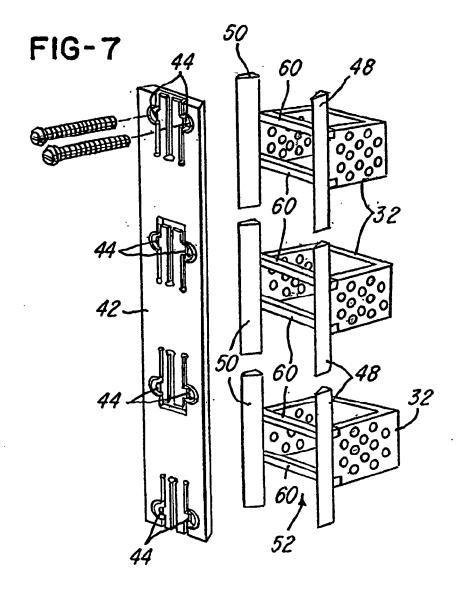
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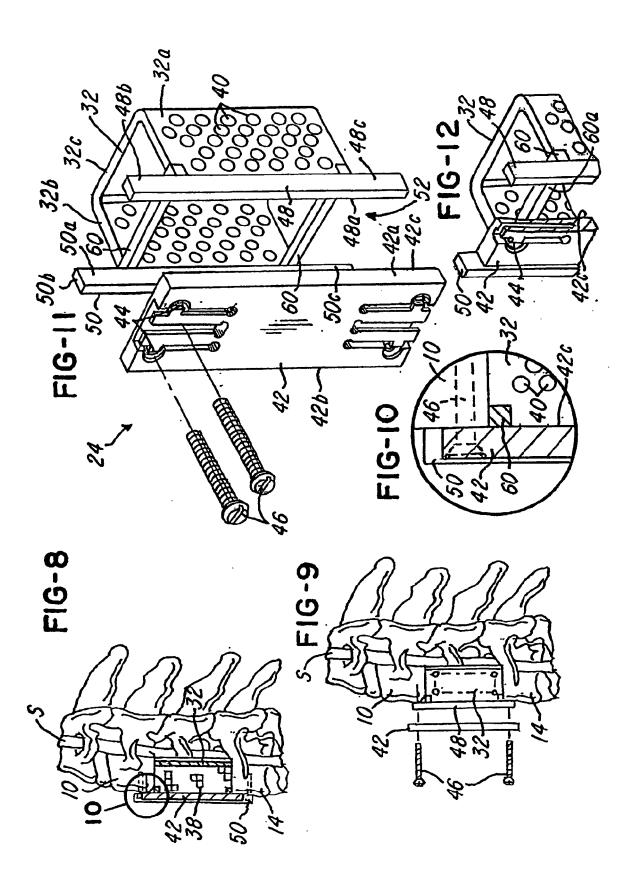
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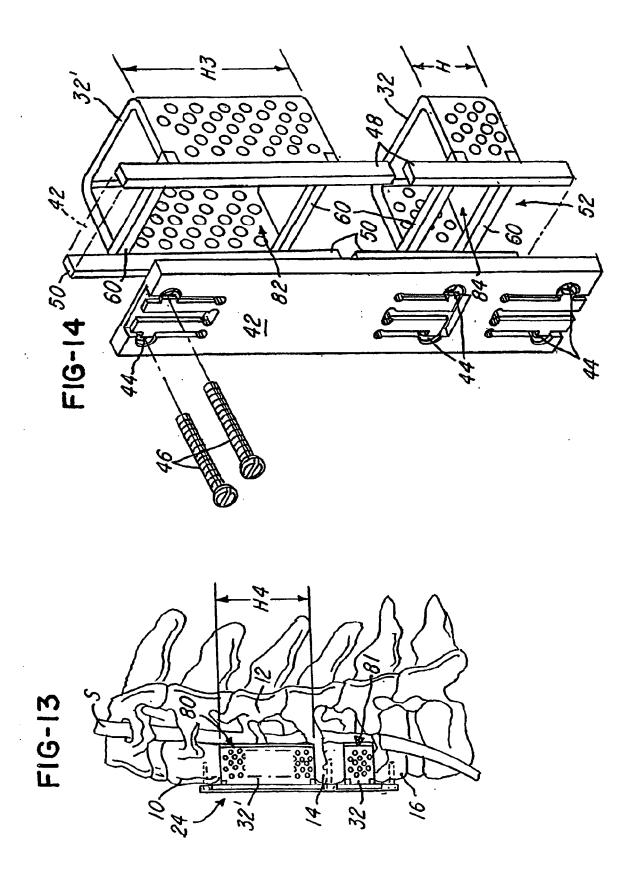
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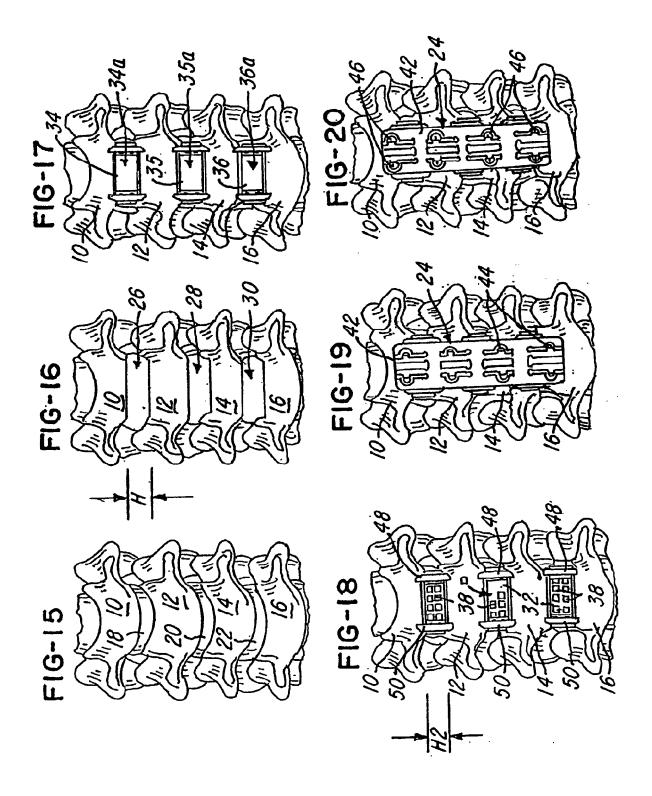


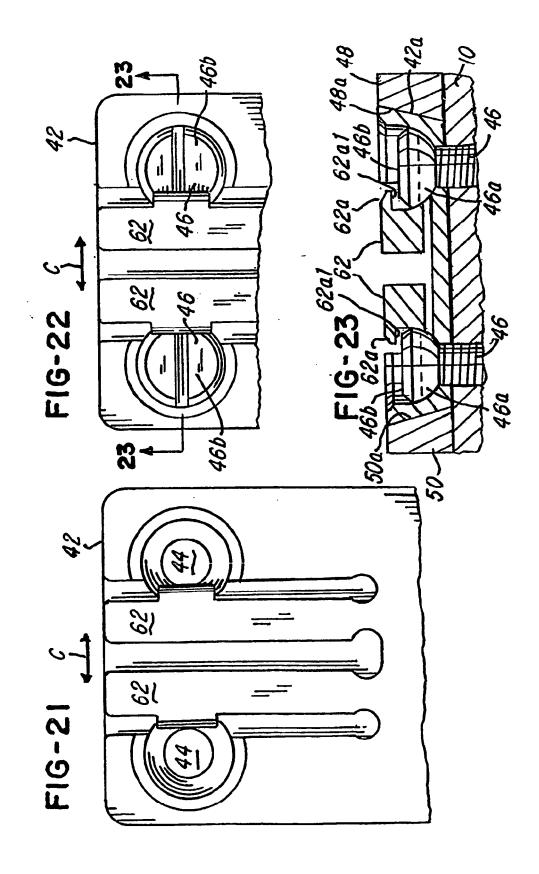


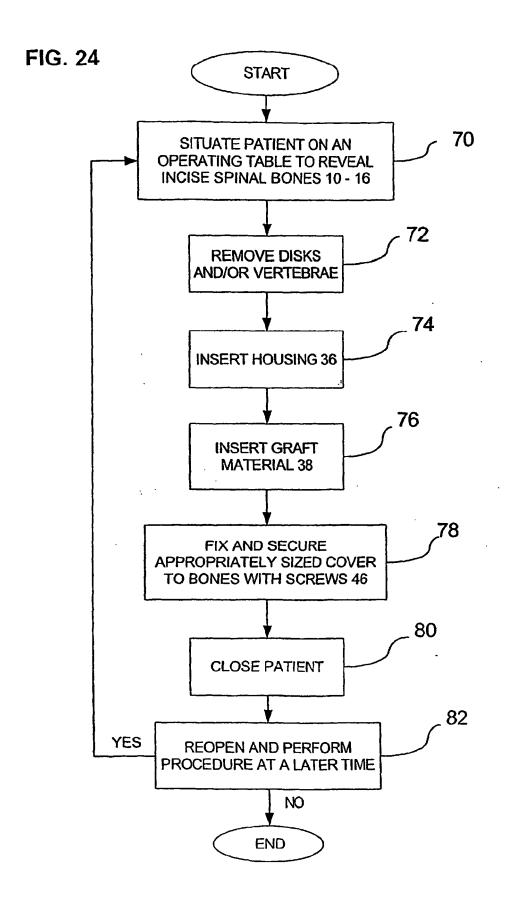


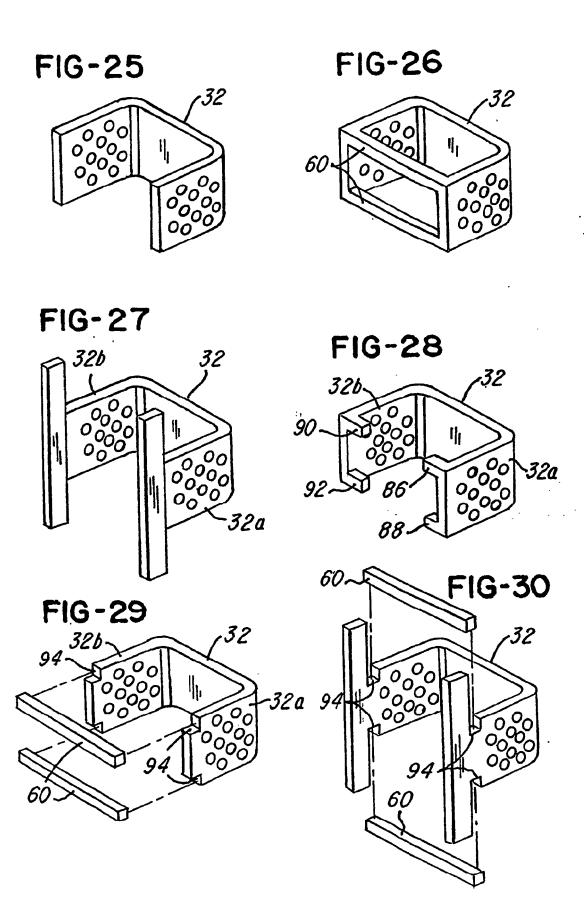












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REFERENCES CITED IN THE DESCRIPTION

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