
**Implants for surgery — Wear of total
knee-joint prostheses —**

Part 3:

**Loading and displacement
parameters for wear-testing
machines with displacement control
and corresponding environmental
conditions for test**

*Implants chirurgicaux — Usure des prothèses totales de l'articulation
du genou —*

*Partie 3: Paramètres de charge et de déplacement pour machines
d'essai d'usure avec contrôle de déplacement et conditions
environnementales correspondantes d'essai*



iTeh Standards
(<https://standards.iteh.ai>)
Document Preview

[ISO 14243-3:2014](https://standards.iteh.ai/catalog/standards/iso/1e653d5f-e8c5-41b8-9553-1aef32f570df/iso-14243-3-2014)

<https://standards.iteh.ai/catalog/standards/iso/1e653d5f-e8c5-41b8-9553-1aef32f570df/iso-14243-3-2014>



COPYRIGHT PROTECTED DOCUMENT

© ISO 2014

All rights reserved. Unless otherwise specified, no part of this publication may be reproduced or utilized otherwise in any form or by any means, electronic or mechanical, including photocopying, or posting on the internet or an intranet, without prior written permission. Permission can be requested from either ISO at the address below or ISO's member body in the country of the requester.

ISO copyright office
Case postale 56 • CH-1211 Geneva 20
Tel. + 41 22 749 01 11
Fax + 41 22 749 09 47
E-mail copyright@iso.org
Web www.iso.org

Published in Switzerland

Contents

	Page
Foreword	iv
1 Scope	1
2 Normative references	1
3 Terms and definitions	1
4 Principle	4
5 Specimens, lubricants, and sample size	5
5.1 Fluid test medium	5
5.2 Test specimen	5
5.3 Control specimen	5
5.4 Number of test specimens	5
6 Apparatus	6
7 Procedure	7
7.1 Initial Measurements	7
8 Test report	12
9 Disposal of test specimen	13
Annex A (informative) Details of load and displacement parameters for the test cycle described in Figures 2 to 5	14

iTech Standards
(<https://standards.itih.ai>)
Document Preview

[ISO 14243-3:2014](#)

<https://standards.itih.ai/catalog/standards/iso/1e653d5f-e8c5-41b8-9553-1aef32f570df/iso-14243-3-2014>

Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation on the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the WTO principles in the Technical Barriers to Trade (TBT) see the following URL: Foreword – Supplementary information.

The committee responsible for this document is ISO/TC 150, *Implants for surgery*, Subcommittee SC 4, *Bone and joint replacement*.

This second edition cancels and replaces the first edition (ISO 14243-3:2004) which has been technically revised. It incorporates also the Technical corrigendum ISO 14243-3:2004/Cor 1: 2006.

ISO 14243 consists of the following parts, under the general title *Implants for surgery — Wear of total knee-joint prostheses*:

- *Part 1: Loading and displacement parameters for wear-testing machines with load control and corresponding environmental conditions for test*
- *Part 2: Methods of measurement*
- *Part 3: Loading and displacement parameters for wear-testing machines with displacement control and corresponding environmental conditions for test*

Implants for surgery — Wear of total knee-joint prostheses —

Part 3:

Loading and displacement parameters for wear-testing machines with displacement control and corresponding environmental conditions for test

1 Scope

This part of ISO 14243 describes a test method that specifies flexion/extension relative angular movement between articulating components, the pattern of the applied force, speed and duration of testing, sample configuration and test environment to be used for the wear testing of total knee-joint prostheses in wear-testing machines having axial load control, flexion/extension angular motion control, AP displacement control and tibial rotation control.

The kinematics of this part of ISO 14243 may not be applicable to knee designs with a high degree of constraint, which could result in damage to the articulating components in the early stages of the test that would not be representative of clinical service.

2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 7207-1, *Implants for surgery — Components for partial and total knee joint prostheses — Part 1: Classification, definitions and designation of dimensions*

ISO 14243-2:2009, *Implants for surgery — Wear of total knee-joint prostheses — Part 2: Methods of measurement*

3 Terms and definitions

For the purposes of this document, the terms and definitions given in ISO 14243-1 and the following apply.

3.1

Anterior/Posterior (AP) displacement

offset between the femoral component and the tibial component, measured in a direction which is perpendicular to both the force and flexion/extension axes

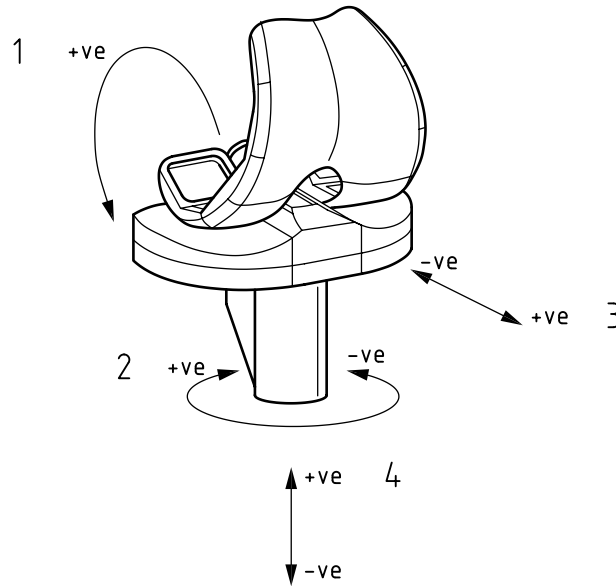
Note 1 to entry: The AP displacement is considered to be zero when the total knee-joint prosthesis is in the *reference position* (3.7) and is considered to be positive when the tibial component is anterior to its position with the total knee-joint prosthesis in the reference position.

3.2

AP force

shear force applied by the tibial on the femoral component along a line of action which is perpendicular to both the tibial axis and the flexion/extension axis and which passes through the axial force axis.

Note 1 to entry: The AP force is considered to be positive when it acts in a posterior-to-anterior direction.



Key

- 1 flexion (of femoral component)
- 2 tibial rotation
- 3 AP displacement by the tibial component
- 4 axial force

Figure 1 — Sign convention for the forces and motions, shown for a left total knee replacement system

3.3 axial force

force applied by the tibial component of the knee-joint prosthesis on the femoral component in a direction parallel to the tibial axis

Note 1 to entry: It is considered to be positive when it acts in an inferior-to-superior direction. (See [Figures 1 and 2](#)).

3.4 axial force axis

line of action of the axial force taken to pass through a point on the tibial component of the knee-joint prosthesis which is offset by $0,07 w \pm 0,01 w$ in the medial direction from the tibial axis, where w is the overall width of the tibial component, measured in accordance with ISO 7207-1

Note 1 to entry: The value of $0,07 w$ offset equals 5 mm offset for a tibial component of average width, i.e. 74 mm. See [Figure 2](#).

3.5 flexion/extension axis

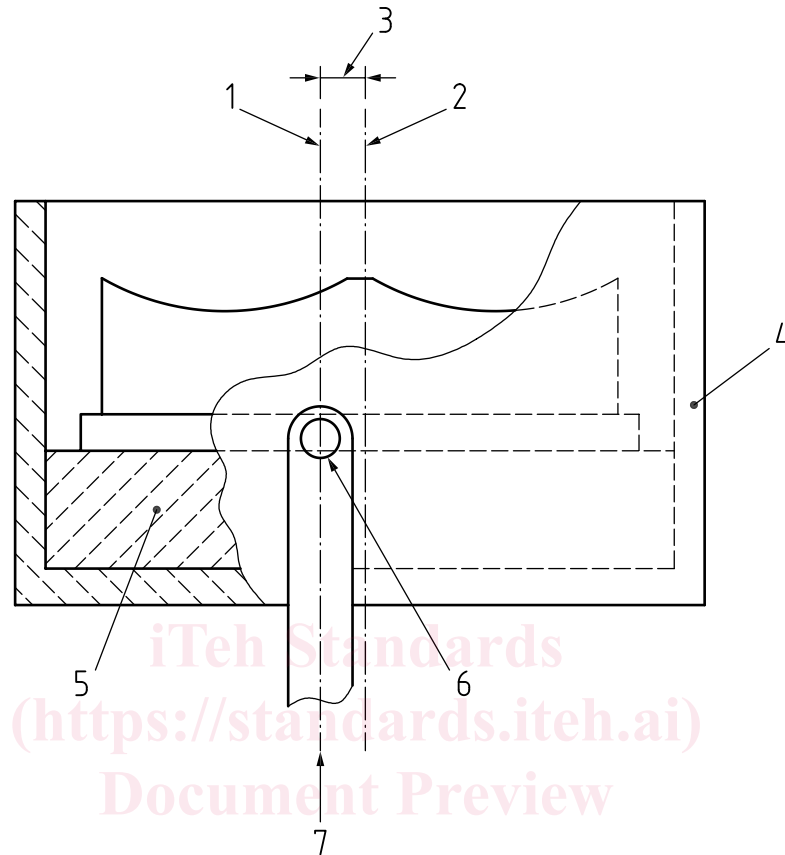
nominal axis of rotation of the femoral component relative to the tibial component

Note 1 to entry: For condylar and meniscal knees, the flexion/extension axis can be estimated by considering the condyles of the femoral component in contact with an imaginary plane perpendicular to the tibial axis when the femoral component is at 30° and 60° of flexion, and then visualizing four lines (contact normals) perpendicular to the imaginary plane running through the points where the two femoral condyles would contact the imaginary plane at each of these flexion angles. The flexion/extension axis is then the line that would intersect all four of the contact normals.

Note 2 to entry: The axis of rotation of the femoral component in the test will not exactly match the theoretical flexion/extension axis. The coincidence of the flexion/extension axis and the axis of rotation of the test machine should be as close as possible within reasonable laboratory practice.

3.6 load and displacement control wear-testing machine

wear-testing machine having axial load control, flexion/extension angular motion control, AP displacement control and tibial rotation control as its control parameters



Key

- 1 axial force axis
- 2 tibial axis
- 3 0,07w offset
- 4 holder of tibial component
- 5 cement mounting for tibial component
- 6 axial force applied through free-turning pivot(s)
- 7 force

Figure 2 — Test specimen configuration

3.7 reference position

angular and linear alignment of the tibial component relative to the femoral component which gives static equilibrium of the tibial component when it is loaded against the femoral component by a positive axial force applied along the axial force axis, with the most distal points on the femoral bearing surface resting on the lowest points on the tibial bearing surface

Note 1 to entry: The reference position is equivalent to the position of 0° flexion (i.e. full extension) *in vivo*.

Note 2 to entry: For the purpose of determining the reference position, the effect of friction between the tibial and femoral components is ignored.

Note 3 to entry: The reference position can be determined by geometrical calculations based on the three-dimensional form of the tibial and femoral surfaces. For the purpose of these calculations, the form of the tibial and femoral surfaces can be taken either from design data or from coordinate measurements of an unworn total knee-joint prosthesis.

Note 4 to entry: In a moderately constrained or flat design of tibial component, and/or installation of the tibial component with a large posterior slope (see 7.4), the lowest points on the tibial bearing surface may span a large (flat) range of anterior-posterior positions, or be the most posterior edge of the tibial component (no dish effect). In such a situation, the above definition of reference position cannot apply. In such situations, the prosthesis manufacturer is consulted to decide what neutral position should be forced/set, and this should be noted in detail in the test report.

**3.8
tibial axis**

nominal longitudinal axis of the tibia, corresponding to the central axis of the medullary cavity of the proximal tibia

**3.9
tibial rotation**

rotation of the tibial component of the knee-joint prosthesis about an axis parallel to the tibial axis

Note 1 to entry: The rotation is considered to be zero when the total knee-joint prosthesis is in the *reference position* (3.7). For a right-sided total knee-joint prosthesis, the tibial rotation is positive when a view from a superior position onto the tibial component shows the tibial component rotated anti-clockwise from its position with the total knee-joint prosthesis in the *reference position* (3.7).

**3.10
tibial rotation torque**

torque applied by the tibial component on the femoral component of the total knee-joint prosthesis about an axis parallel to the tibial axis

Note 1 to entry: When seen from a position superior to the tibial component, the axial torque is positive when it acts clockwise on a left-sided total knee-joint prosthesis and positive when it acts anti-clockwise on a right-sided total knee-joint prosthesis.

**3.11
passive soak control specimen**

samples of the same polymer articulating components used in wear test will be immersed in the same fluid test medium at the same temperature for the same time as the wear test duration

**3.12
loaded control specimen**

sample(s) of the same polymer articulating components used in wear test will be immersed in the same fluid test medium at the same temperature for the same time with the same time varying axial force as the wear test, but without any articulating motions

**3.13
tibial base plate**

component of a modular tibial knee in contact with the tibia that supports the tibial polyethylene bearing component

4 Principle

The total knee-joint prosthesis is mounted in an apparatus that applies cyclic variations of flexion/extension angle, tibial rotation angle, AP displacement and axial force to the interface between tibial and femoral components, simulating normal human walking. The tibial component moves relative to the femoral component under the influence of the applied flexion/extension rotation, tibial rotation, AP displacement, and axial forces. The applied contact force/displacement actions are axial force, flexion/extension rotation, AP displacement and tibial rotation. All the applied force/displacement actions follow a specified cyclic variation, with a fixed relationship between the phases of the actions.

The contacting surfaces of the femoral and tibial components are immersed in a fluid test medium simulating human synovial fluid. A control specimen is subjected to the fluid medium and optionally to the same time-varying axial force to determine the creep of the test specimen and/or the amount of mass change due to fluid transfer. The test takes place in a controlled environment simulating physiological conditions.

5 Specimens, lubricants, and sample size

5.1 Fluid test medium

The fluid test medium shall be constituted by:

- Bovine serum diluted with deionized water to have a protein mass concentration of 20 g/l;
- Normally the fluid test medium is filtered through a 2 µm filter;
- To minimize microbial contamination, the fluid test medium should be stored frozen until required for test. An anti-microbial reagent (such as sodium azide) may be added. Such reagents can be potentially hazardous;
- Routine monitoring of the pH of the fluid test medium may be undertaken. If it is, the measured values should be included in the test report (see [Clause 8](#)).

5.2 Test specimen

Femoral and tibial components should be chosen so that their size combination and design detail represent the worst expected case for wear of the Total Knee Replacement system being tested. The tibial component should have the articulating surface attached by its normal immediate backing (for example bone cement or a machined replica of the inner surface of the tibial base plate) unless this is impractical due to physical features of the implant system. If the component forming the articulating surface is fixed to the tibial base plate by a rim/snap-fit system the machined replica shall provide the same fixation conditions.

If it is not practical to use the normal backing or cement fixation due to physical features of the implant system, the support system for the tibial component should represent normal design features and conditions of use but should allow removal of the component for measurement of wear (if required) without destruction.

The components shall be sterilized in the same way as for clinical use because this might affect the wear properties of the materials. Sterilization of all test and control components within a specific test group should be done simultaneously (in a single container) when possible, to minimize variation.

5.3 Control specimen

These components should be chosen so that their size combination and design are identical to the test specimen.

5.4 Number of test specimens

A minimum of three test specimens and a minimum of two control shall be tested to represent the wear of each type of prosthesis.

The control specimens may be used both for passive soak control or one as a passive soak control and the other for load control.

6 Apparatus

6.1 Testing machine, capable of applying the forces specified ([Figure 3](#)) in association with corresponding displacements, and operating at a frequency of $1 \text{ Hz} \pm 0,1 \text{ Hz}$.

6.2 Means of mounting and enclosing the test specimen, using a corrosion-resistant material, capable of holding femoral and tibial components using attachment methods comparable to the intended anatomical fixation.

An enclosure shall be provided that is capable of isolating the test specimen to prevent third-body contamination from the test machine and the atmosphere.

6.3 Means of aligning and positioning the femoral component of the test specimen in the reference position, so that the same position and orientation can be reproduced following the removal of the tibial component for measurement.

6.4 Means of aligning and positioning the tibial component of the test specimen in the inferior position, so that the same position and orientation can be reproduced after its removal for measurement.

6.5 Axial force control system, capable of generating an axial force following the cycle given in [Figure 3](#) and maintaining the magnitude of this force to a tolerance of $\pm 5 \%$ of the maximum value and $\pm 3 \%$ of the full cycle time for phasing.

The axial force is applied along the axial-force axis to the tibial component of the total knee-joint prosthesis through freely turning pivots which are offset from the tibial axis (see [Figure 3](#) and [Table 1](#)).

6.6 Flexion/extension rotation control system, capable of generating the flexion/extension motion as shown in [Table 2](#) and [Figure 4](#) and maintaining the magnitude of this motion to a tolerance of $\pm 5 \%$ of the maximum value and $\pm 3 \%$ of the full cycle time for phasing.

The flexion/extension motion is measured about the flexion/extension axis as a relative angular motion between the femoral and tibial components.

Provision shall be included for the adjustment of the reference position of the motion control system to coincide with the reference position so that when the applied flexion/extension motion reaches zero flexion angle, as shown in [Figure 4](#), the total knee-joint prosthesis is at the designed reference position.

For total knee-joint prostheses which include a positive extension stop, a device may be included to limit the extension moment which can be applied by over-extension.

6.7 AP displacement control system, capable of generating an AP motion following the cycle given in [Table 3](#) and [Figure 5](#) and maintaining the magnitude of this motion to a tolerance of $\pm 5 \%$ of the maximum value and $\pm 3 \%$ of the full cycle time for phasing.

The AP displacement is applied along the line of action which is perpendicular to both the tibial axis and the flexion/extension axis, and which passes through the axial-force axis.

6.8 Tibial-rotation control system, capable of generating a tibial rotation following the cycle given in [Table 4](#) and [Figure 6](#) and maintaining the magnitude of this rotation to a tolerance of $\pm 5 \%$ of the maximum value and $\pm 3 \%$ of the full cycle time for phasing.

The signs of the tibial rotation extremes are disregarded in determining the tolerance. The tibial rotation is applied about an axis parallel to the tibial axis and the positive direction is defined in [3.9](#).