

Oscar Morgan: Getting My Life Back.



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After months of serious concern about my medical condition, few words could have relieved my mind more than these five words from my doctor: **“I got a solid closure.”**

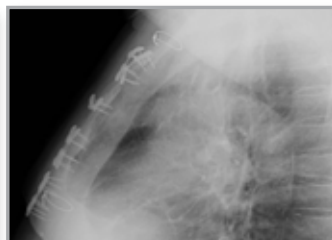
At 82, I had experienced heart problems and two serious episodes of syncope, for which I was rushed to the ER for treatment. Then after many diagnostic tests, I was diagnosed

with Coronary Artery Disease. Surgery was needed to correct the problem. I had become so weak I could hardly walk, so I had little hope that I could withstand the surgery.

My recovery from bypass surgery was a long, hard battle. After 10 days, I was discharged from the hospital. At home again, I began feeling alarming movement and pain in my rib cage and chest. Several doctors examined me and ran scans and tests, but assured me that I was “healing nicely.” One doctor wrote a letter to tell me the scans showed everything normal. I knew they were wrong; I was not mistaken about the excruciating pain and the rubbing and grating inside my chest. I saw a third doctor who simply felt my chest and told me I had a “big problem” and I would have to go back to the doctor who did the surgery to have my sternum closed again. I hadn’t fully recovered from the bypass surgery; how could I live through anesthesia and another surgery? I couldn’t answer that question, but I knew I couldn’t live the way I was.



CT of Oscar's chest with wire.



CT scan of Oscar's chest with Sternalock Rigid Fixation.

The bypass surgeon confirmed that my sternum was open from top to bottom, the closure wires and bone fragments were moving around in my chest and that I was at a high risk of infection. He gave me very little hope that he could repair my sternum. He said “I have never seen anything like it. You’ve got a real mess!” He said he might be able to get two or three wires

in the top of my sternum but could not repair any of the bottom of my sternum. Having lost confidence in this doctor, I looked for another doctor to repair the “big problem,” unsure that any other doctor would consider the attempt.

My daughter works with a doctor who was able to facilitate an appointment for me to see Dr. Edward Garrett, Jr. He was considerate enough to be willing to try to help me and repair my sternum. Obviously, I was not looking forward to a second surgery at my age but the pain was getting worse by the day and it was affecting my sleeping and breathing. I immediately trusted him, and was grateful that he was willing to help me. Dr. Garrett told me that he would possibly use a new procedure to stabilize my sternum called The Biomet Microfixation Sternalock® system, rather than the traditional closure wires that were used on my initial sternum closure. The Sternalock system is a sternal closure system that is intended for use in the stabilization and fixation of fractures of the anterior chest wall. The benefits of rigid fixation vs. wire sternal closure are increased stability^{1,2}, greater strength¹ and reduced sternal separation.¹ I was then shown pictures of the plates and screws that would be used during this procedure.

I appreciated Dr. Garrett’s forthright attitude as he said he was not sure how well he would be able to close the sternum, considering my condition. Neither could he promise that he could find and remove all the loose closure wires. Still, I had no choice about having the surgery; it had to be done.

Dr. Garrett removed all the loose sternum wires, and made a solid closure of my sternum. In two days, I was discharged, and in five days, I was making the 11-hour trip back to my home in West Virginia...with peace of mind and profound gratefulness for Dr. Garrett and the surgical devices he used to “fix” a big problem.

I have returned to activities I enjoy, and I have hope that each day will bring more and more opportunity to enjoy my life. Just a short time ago, I thought I was at the end of my life. Dr. Garrett made sure that wasn’t so.

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This article is meant solely as a human-interest story and is not meant to constitute medical advice. While the patient in this story is a Sternalock® recipient, his results are not necessarily typical, indicative, or representative of all sternal patients. The Sternalock system has been used successfully in achieving restored mobility to many patients. However, as with any implanted device, there are factors affecting performance, which ultimately result in variable outcomes, including levels of mobility and pain. These factors include, but are not limited to, the patient’s pre and post-operative health conditions, weight, activity level, and adherence to instructions regarding the procedure. Due to these variables, it is not possible to predict specific results or patient satisfaction. For additional patient risk information please see appropriate package insert information on our website at www.biometmicrofixation.com This is actual recipient of the Sternalock rigid fixation system. The patient in this story was not compensated. The patient in this article has consented to be named and has given Biomet, Inc. the exclusive right to use their personal and medical information for educational purposes. As the manufacturer of this device, Biomet Microfixation does not practice medicine and does not recommend this product for use on a specific patient. The surgeon who performs any implant procedure must determine the appropriate device and surgical procedure for each individual patient. All surgeries carry risks. For additional information, and information on these risks and warnings, please see package insert or visit our web site at www.biometmicrofixation.com or call 1-800-874-7711. Sternalock® is a registered trademark of Biomet Microfixation.

1. Pai S, Najmuddin J, Dupak EL, McMahon NL, Roth TP, Lalikos JF, Dunn RM, Francalancia N, Pinns GD, Billiar KL. In Vitro Comparison of Wire and Plate Fixation for Midline Sternotomies. Ann Thoracic Surgery 2005;80:962-8. Bench studies are not necessarily indicative of clinical performance. 2. Greater Stability and Earlier Bone Healing Song, HD. Agarwal JP, Jeevanadam V. Rigid Sternal fixation in the Cardiac Transplant Population. J. thoracic Cardiovascular Surg 2003; 12(3):896-7. Sargent LA, Seyfer AE, Hollinger J, Hinson RM, Graeber GM. The healing Sternum: A Comparison of Osseous Healing with Wire Verses Rigid Fixation. Ann Thoracic Surge 1991;52(3)490-4.