The Knotless SutureTak suture anchor simplifies arthroscopic glenohumeral joint instability repair by combining a proven and reproducible suture anchor design and insertion procedure with knotless soft tissue fixation. The guide and drill are used to create a pilot hole precisely on the glenoid rim and the suture anchor is inserted through the guide maintaining the same portal and drill trajectory. The suture is passed and then shuttled into the locking mechanism allowing the user to control the tension of the suture repair for knotless fixation of the soft tissue under direct visualization.

The body of the anchor is available in a BioComposite™ material that combines PLLA with β-TCP, and a nonabsorbable thermoplastic material, polyetheretherketone (PEEK). Both are strong, revisable and radiolucent implants, with no MRI artifact.

**Advantages**

- 57 lbs of secure, low profile knotless suture fixation
- No risk of knot impingement or knot loosening
- Cannulated design minimizes anchor material volume
- Simple, reproducible percutaneous insertion techniques
- Easily maintain the guide trajectory while drilling and inserting the anchor for six o’clock position

**Knotless SutureTak Self-Locking Technology**

*Data on file*
Insert the anchor through the spear and into bone by gentle impaction until the inserter handle is flush with the back of the spear. Then, remove the suture release tab and pull out the inserter and spear.

Retrieve the repair suture through the anterosuperior portal using a KingFisher® retriever. Insert a curved SutureLasso™ suture passer (right curve for right shoulder) into the anteroinferior cannula and pass it through the capsulolabral tissue inferior to the anchor. Advance the Nitinol wire loop into the joint. Retrieve the wire loop through the anterosuperior portal using a KingFisher.

Load the repair suture through the Nitinol wire loop. Retract the wire loop through the SutureLasso to pull the suture to the distal end of the SutureLasso inside the joint. Remove the SutureLasso and wire loop together to shuttle the repair suture through the labral tissue.

Mobilize the labrum and create a bleeding bed to enhance tissue healing to bone. Pass the spear through the cannula and place it on the glenoid rim. Create a bone socket for the anchor by advancing the drill through the spear until its collar contacts the spear’s handle. Cycle the drill 2-3 times in hard bone to allow the drill flutes to clear debris from the bottom of the hole.

If desired, an Offset Guide can be used to place the Knotless SutureTak® suture anchor 1.5 mm onto the face of the glenoid to help create a larger labral bumper.

Retrieve the repair suture through the anterosuperior portal using a KingFisher® retriever. Insert a curved SutureLasso™ suture passer (right curve for right shoulder) into the anteroinferior cannula and pass it through the capsulolabral tissue inferior to the anchor. Advance the Nitinol wire loop into the joint. Retrieve the wire loop through the anterosuperior portal using a KingFisher.
Load the repair suture through the loop of the shuttling suture. *Fold the white section of the repair suture in half* and crease the suture with your fingers. Pull the free end of the shuttling suture to shuttle the repair suture back into the anchor. Advance the shuttle suture with repeated light tugs until the suture is passed through the suture splice locking mechanism and back out the cannula.

3 mm SutureTak® Percutaneous Insertion Kit AR-1934PI-30 includes:
- 17-gauge Spinal Needle
- 1.1 mm Guide Wire
- Portal Dilator
- 3 mm SutureTak Drill (2.4 mm OD)
- Disposable Spear (4.5 mm OD)

Precise Anchor Placement
*Using the Percutaneous Insertion Kit*

Pull the free end of the repair suture until the desired tension on the repair is achieved. A tissue grasper can be used to position the labrum to its desired location while applying tension on the repair. Cut the suture flush using a Mini Suture Cutter.
## Ordering Information

**Knotless SutureTak® Suture Anchor, 3 mm x 12.7 mm, #2 FiberWire® CL**

<table>
<thead>
<tr>
<th>Material</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>BioComposite®</td>
<td>AR-1938BC</td>
</tr>
<tr>
<td>PEEK</td>
<td>AR-1938PS</td>
</tr>
</tbody>
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### Required Instruments

- Spear, Trocar and Blunt Tip Obturator, for 3 mm SutureTak: AR-1949
- 2.4 mm Drill, for 3 mm SutureTak: AR-1250LT
- 2.6 mm Drill, for 3 mm SutureTak (hard bone): AR-1938D

### Optional Instruments

- SutureTak® Disposables Kit *(includes: Spear/Trocar, AR-1949S and Drill, AR-1250LT)*: AR-1934DS-2
- Disposable Spear, Trocar Tip Obturator, for 3 mm SutureTak: AR-1949S
- Offset Guide, for 3 mm SutureTak: AR-1934R
- Disposable Offset Guide, for 3 mm SutureTak: AR-1934GS
- Spear w/Circumferential Teeth, Trocar Tip Obturator, for 3 mm SutureTak: AR-1946
- 3 mm SutureTak Punch: AR-1934P
- Portal Dilator for 3 mm SutureTak Spear: AR-1949PD
- Needle for Portal Dilator: AR-6521
- SutureTak Instrumentation Case: AR-1934C
This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product’s Directions For Use.