Mobi-C[®] Cervical Disc Compared to ProDisc[®] C Total Disc Replacement

Selling Mobi-C vs. ProDisc C

Mobi-C has two-level indications, ProDisc C does not

- Mobi-C has been studied and is superior to ACDF at two levels¹
- ProDisc C was only studied at one level
- Despite being on the US market since 2007, no additional clinical investigations have been initiated by the legal manufacturer for two-level indications or otherwise

Mobi-C was designed to improve upon 1st generation technologies like ProDisc C

- 1st generation discs rely upon a fixed core design that forces the patient's biomechanics to adapt to the implant
- Mobi-C relies upon an adaptive, mobile bearing core that adapts to the patient's natural movement
- Keel cuts require additional operative time and grossly violate the integrity of the disc endplate. Mobi-C uses teeth designed to fixate the device without the need for keel cuts





Mobi-C Cervical Disc	ProDisc C Total Disc Replacement Motion Technology: Fixed Core (Ball & Socket) • Is not able to adapt to IAR	
 Motion Technology: Mobile Bearing Core Designed to adjust to the instantaneous axis of rotation (IAR) 		
Technology Attributes	Technology Attributes	
 Mobile core adapts to the patient's natural movement through a 3 piece design designed to allow independent and coupled motion 	 Forces patient's biomechanics to adapt to implant positioning 	
 Domed surface designed to articulate angularly with the superior endplate 		
 Flat bottom designed to translate up to 1 mm and rotate on the inferior endplate 		
Fixation Technology = Bone Sparing Lateral Teeth	Fixation Technology = Central Keels	
• Teeth designed not to violate integrity of endplate	• Endplate cuts of 2 mm required to insert cage	

Mobi-C's clinical studies were substantially more robust than that for ProDisc C.

- ProDisc C's claims compared to ACDF are limited to 2-year data as patient fallout at 5-years left their data underpowered for extending claims
- In addition, long-term data for adjacent segment disease and heterotopic ossification (HO) is available for Mobi-C and not reported for ProDisc C



1 Level Results Reported at 5 Years for Mobi-C and ProDisc C ²⁻³		
	Mobi-C	ProDisc C
Follow Up	85.5%	72.7%
Mean ROM (F/E) Improvement from Baseline	2.12 Degrees	.035 Degrees
Progression of Adjacent Segment Degeneration	Above Level: 14.7% Below Level: 2.4%	Not Reported
0% HO Progression Stable	92.2%	Not Reported
Mean NDI Scores	18.0	20.0
Key Findings at 5 Years	 Comparison to Control Adjacent Segment Disease Range of Motion Adjacent Segment Disease Heterotopic Ossification 	 Comparison to Control* Adjacent Segment Disease* Range of Motion Adjacent Segment Disease* Heterotopic Ossification*

References

- 1. Mobi-C Summary of Safety and Effectiveness Data (PMA 110009) at www.fda.gov for complete Mobi-C study results.
- 2. ProDisc 5 year data is from: Spine 38(3):203-209, 2013.
- 3. Mobi-C 1L 5 year data is from: Int J Spine Surg DOI:10.14444/3010

For more information, visit ZimVie.com

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