

Trinity™

The evidence base



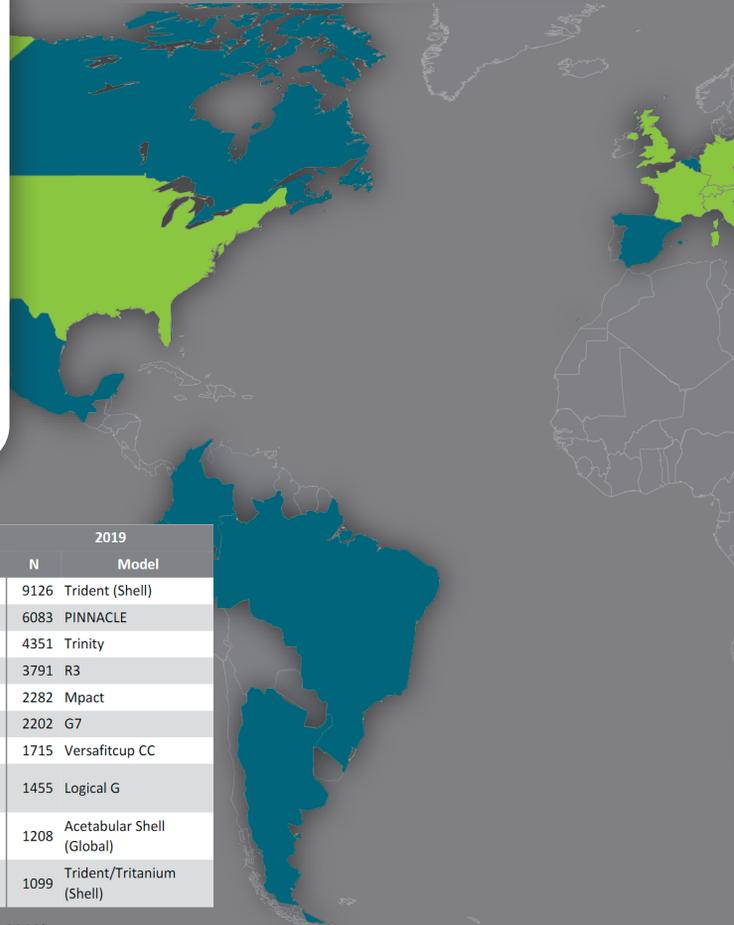
Corin

Connected Orthopaedic Insight

Trinity™

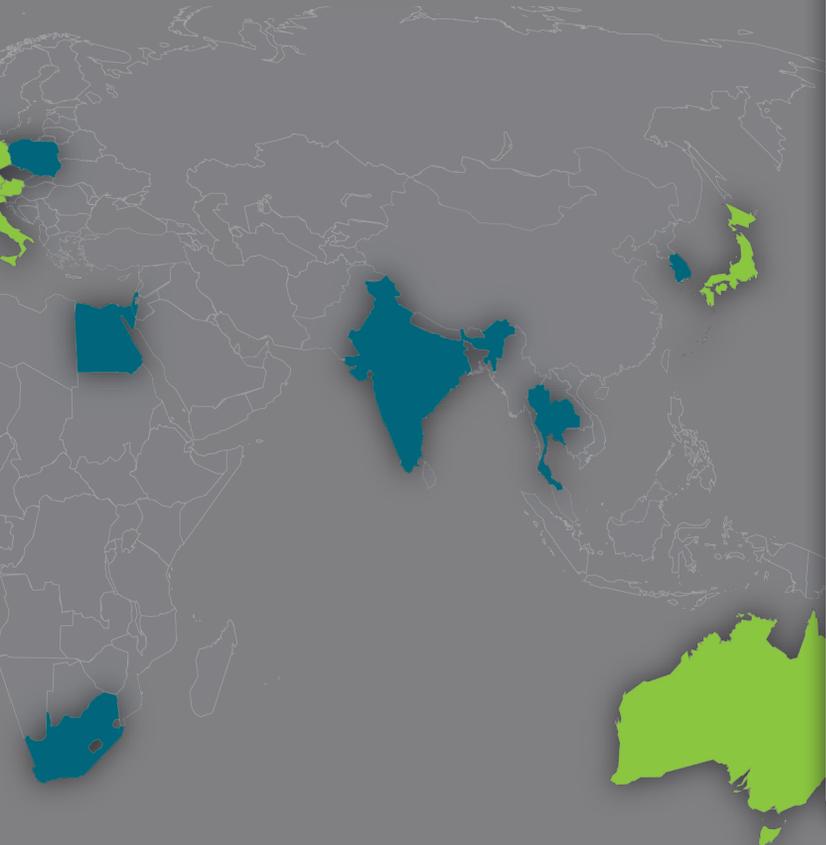
A truly global system

- Over 165,000 global implantations and supplied in 25 countries worldwide¹
- Australia's 3rd most used acetabular component in primary total conventional hip replacement²
- Trinity-MetaFix is the 9th most used shell-stem combination in the National Joint Registry (NJR)³



2003		2016		2017		2018		2019	
N	Model	N	Model	N	Model	N	Model	N	Model
3986	Trident (Shell)	7837	Trident (Shell)	8128	Trident (Shell)	8546	Trident (Shell)	9126	Trident (Shell)
1748	Reflection (Shell)	6938	PINNACLE	6590	PINNACLE	6377	PINNACLE	6083	PINNACLE
1524	Trilogy	3766	R3	3813	R3	3863	R3	4351	Trinity
955	Vitalock	2751	Versafitcup CC	2955	Trinity	3689	Trinity	3791	R3
907	Duraloc	1987	Trinity	2069	Versafitcup CC	1908	Mpact	2282	Mpact
827	ABGII	1327	Continuum	1402	Mpact	1836	Versafitcup CC	2202	G7
793	Allofit	1134	Mpact	1293	Continuum	1491	G7	1715	Versafitcup CC
729	Mallory-Head	1107	Trident/Tritanium (Shell)	1254	Logical G	1443	Logical G	1455	Logical G
539	Contemporary	801	Logical G	1143	Trident/Tritanium (Shell)	1319	Acetabular Shell (Global)	1208	Acetabular Shell (Global)
537	PINNACLE	759	Acetabular Shell (Global)	1051	G7	1196	Continuum	1099	Trident/Tritanium (Shell)

Table HT7 10 most used acetabular components in primary total conventional hip replacement. AOANJRR 2020²



Very strong evidence rated by independent review

Trinity* has been awarded ratings by the Orthopaedic Data Evaluation Panel (ODEP)⁴.



The latest ratings, what they mean and more information about ODEP can be found at www.ODEP.org.uk.

*Trinity non-occluded, non-coated shells, Trinity PLUS shells and Trinity Dual Mobility liners are not covered by this rating.

Superior clinical performance

1.4% cumulative percent revision (CPR) at 1yr
17% lower than other total conventional hips
at the equivalent time period⁵.

1.44% revision rate at 5yrs

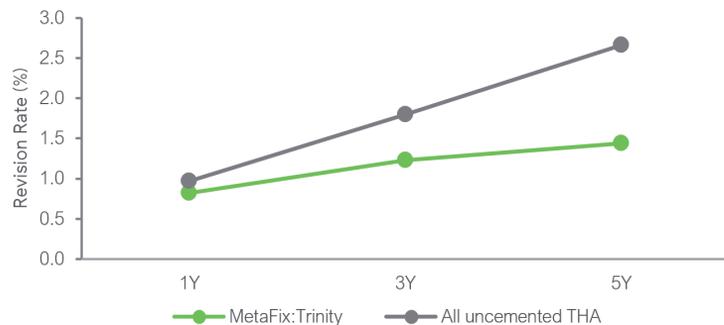
MetaFix™:Trinity combine for a 55% lower
revision rate than all uncemented hips at the
equivalent time period³.

2.8% CPR at 8yrs

36% lower than other total conventional hips
at the equivalent time period⁵.

Reduced failure through dislocation

0.4 yearly cumulative incidence revision
diagnosis for dislocation, compared to 0.8
for other total conventional hips at 5yrs⁵.



According to Table 3.H7 KM estimates of cumulative revision (95% CI) of primary hip replacement by fixation, and stem / cup brand. NJR 17th Annual Report 2020³

CPR	1 Yr	2 Yrs	3 Yrs	4 Yrs	5 Yrs
Trinity	1.4 (1.2, 1.6)	1.8 (1.6, 2.1)	2.1 (1.9, 2.4)	2.4 (2.1, 2.7)	2.5 (2.2, 2.9)
Other Total Conventional Hip	1.7 (1.7, 1.8)	2.2 (2.2, 2.3)	2.6 (2.6, 2.7)	2.9 (2.9, 3.0)	3.3 (3.2, 3.3)

CPR	6 Yrs	7 Yrs	8 Yrs	9 Yrs	10 Yrs	11 Yrs
Trinity	2.6 (2.3, 3.0)	2.8 (2.3, 3.4)	2.8 (2.3, 3.4)			
Other Total Conventional Hip	3.6 (3.6, 3.7)	4.0 (3.9, 4.1)	4.4 (4.3, 4.4)	4.8 (4.7, 4.9)	5.2 (5.1, 5.3)	5.7 (5.6, 5.8)

Table 11: Yearly Cumulative Percent Revision of Primary Total Conventional Hip Replacement by Model (All Diagnoses). AOANJRR. 20 Aug 2019⁵

Model	Event	N Events	1 Yr	2 Yrs	3 Yrs	5 Yrs	10 Yrs	15 Yrs	
Trinity	Loosening	80	0.4 (0.3, 0.5)	0.6 (0.5, 0.7)	0.6 (0.5, 0.8)	0.7 (0.5, 0.8)			
	Fracture	55	0.3 (0.2, 0.4)	0.3 (0.2, 0.4)	0.4 (0.3, 0.5)	0.5 (0.4, 0.7)			
	Prosthesis Dislocation	51	0.3 (0.2, 0.4)	0.3 (0.2, 0.4)	0.4 (0.3, 0.5)	0.4 (0.3, 0.6)			
	Infection	44	0.3 (0.2, 0.4)	0.3 (0.2, 0.4)	0.3 (0.2, 0.4)	0.3 (0.2, 0.5)			
	Pain	9	0.0 (0.0, 0.1)	0.0 (0.0, 0.1)	0.1 (0.1, 0.2)	0.1 (0.1, 0.2)			
	Other	44	0.2 (0.1, 0.3)	0.3 (0.2, 0.4)	0.3 (0.2, 0.5)	0.5 (0.3, 0.7)			
	Deceased	304	0.5 (0.4, 0.6)	1.2 (1.0, 1.4)	2.0 (1.7, 2.3)	4.0 (3.5, 4.6)			
	All Revision	283	1.4 (1.2, 1.6)	1.8 (1.6, 2.1)	2.1 (1.9, 2.4)	2.5 (2.2, 2.9)			
	Other Total Conventional Hip	Loosening	4348	0.3 (0.2, 0.3)	0.4 (0.4, 0.4)	0.5 (0.5, 0.5)	0.7 (0.7, 0.7)	1.2 (1.2, 1.2)	1.8 (1.7, 1.8)
		Fracture	3732	0.4 (0.3, 0.4)	0.4 (0.4, 0.4)	0.5 (0.5, 0.5)	0.6 (0.6, 0.6)	1.0 (1.0, 1.0)	1.4 (1.4, 1.5)
Prosthesis Dislocation		4026	0.5 (0.5, 0.5)	0.6 (0.6, 0.7)	0.7 (0.7, 0.7)	0.8 (0.8, 0.8)	1.0 (1.0, 1.0)	1.2 (1.2, 1.3)	
Infection		3361	0.4 (0.4, 0.5)	0.5 (0.5, 0.6)	0.6 (0.6, 0.6)	0.7 (0.7, 0.7)	0.9 (0.8, 0.9)	1.0 (1.0, 1.0)	
Pain		333	0.0 (0.0, 0.0)	0.0 (0.0, 0.0)	0.0 (0.0, 0.1)	0.1 (0.1, 0.1)	0.1 (0.1, 0.1)	0.1 (0.1, 0.1)	
Other		2454	0.1 (0.1, 0.1)	0.2 (0.2, 0.2)	0.3 (0.2, 0.3)	0.4 (0.3, 0.4)	0.7 (0.6, 0.7)	1.1 (1.0, 1.1)	
Deceased		78766	1.5 (1.5, 1.5)	3.0 (3.0, 3.1)	4.8 (4.7, 4.8)	9.0 (8.9, 9.1)	23.2 (23.0, 23.4)	39.0 (38.7, 39.2)	
All Revision		18254	1.7 (1.7, 1.8)	2.2 (2.2, 2.3)	2.6 (2.5, 2.6)	3.2 (3.1, 3.3)	4.8 (4.7, 4.9)	6.6 (6.5, 6.7)	

Note: Excludes procedures using metal/metal prostheses with head size larger than 32mm.

Table 13: Yearly Cumulative Incidence Revision Diagnosis of Primary Total Conventional Hip Replacement by Model (All Diagnoses). AOANJRR. 20 Aug 2019⁵



Powerful insights

Trinity is fully compatible with Corin OPS™ technology and this is often cited by clinicians as a key benefit to using the Trinity system. Over 10,000 OPS cases in Australia have now been performed, with Trinity being selected in 94% of cases⁶. Certainly some of Trinity's success in Australia can be attributed to its compatibility with OPS, through which patient-specific positioning and delivery can be achieved.

Surgeon testimonials

"The Trinity cup's versatility with the ability to use ECI Ma polyethylene or ceramic in 28, 32, 36 and 40mm bearings gives me confidence that I can deliver an optimal solution for each of my patients using OPS technology. The range of bearing options is critical in optimising patient outcomes."

Dr Michael Solomon, Sydney, Australia

"In my experience, Trinity provides a superior 'scratch fit'. This means that with so many DDH cases in the Japanese market, Trinity has high primary stability and is often achieved with minimal auxiliary screwing."

Dr Mitsunari Kim, Osaka, Japan

"I find Trinity is an easy and efficient system to use. Insertion and seating of the Trinity liners, even ceramics, is particularly easy and surgeon friendly."

Mr Harvey Sandhu, Bath, UK

"Improving joint stability and reducing the risk of dislocation are very important to my practice. Trinity dual mobility liners present a solution for this, either planned for at risk patients or coming to the rescue intraoperatively if I find unforeseen issues."

Dr Stephen Raterman, Florida, USA

"The Trinity system has a terrific head-to-shell ratio. It allows me to use a 36mm head in a 50mm shell, while still providing adequate liner thickness."

Dr Michael Bradley, Rhode Island, USA



Trinity™

*Ceramic-on-ceramic bearing available in USA for evaluation only.

References

1. Data on file (Internal sales data). Corin Group Ltd. Accessed Nov 2020.
2. Australian Orthopaedic Association National Joint Replacement Registry (AOANJRR). Hip, Knee & Shoulder Arthroplasty: 2020 Annual Report, Adelaide; AOA, 2020: 1-474. [Accessed from: <https://aoanjrr.sahmri.com/annual-reports-2020>].
3. National Joint Registry (NJR). 17th Annual Report 2020: Surgical data to 31 December 2019, NJR, 2020: 1-312. [Accessed from: <https://reports.njrcentre.org.uk>].
4. Orthopaedic Data Evaluation Panel (ODEP) product ratings. [Accessed from: www.odep.org.uk; May 2021].
5. Australian Orthopaedic Association National Joint Replacement Registry (AOANJRR), Automated Industry Report System (AIRS), ID No.1514 for Corin Australia, Trinity Total Conventional Hip (Procedures from 1 September 1999-19 August 2019). Generated 20 August 2019. AOA, Adelaide: 1-18. Disclaimer: The AOANJRR has taken every care to ensure that the data supplied are accurate but does not warrant that the data are error free and does not accept any liability for errors or omissions in the data.
6. Data on file. Corin Group Ltd. Accessed Nov 2020.

Corin

Connected Orthopaedic Insight

DISCLAIMER: Not all products are available or cleared for distribution in all markets. For more details please contact Corin.

©2021 Corin P No. 11608 Rev03 04/2021 ECC183