UNITED Oncology System.
A COMPLETE SOLUTION TO YOUR PATIENTS

Shoulder System

Hip System

Knee System (Distal Femur)

Knee System (Proximal Tibia)
The UNITED Oncology joint system has been developed for more than 15 years. Through the modification done by the manufacturers and major designers, the major design of these prostheses is completely competitive to others in the market. The purpose of designing these prostheses is to meet the requirement of those patients who need a special prosthesis for their particular indication. Therefore, being able to provide fast delivery as well as custom-made shape and size for individual patient is most important. The UNITED Oncology System is based on modular combinations of the implants that keep most of components on shaft, and if, it is necessary to customize the critical parts to meet different patients' situation. The first patient underwent surgery in 1996. Until now, there have been over seven hundred patients who benefited from the UNITED Oncology System for the actual sizing and efficient delivery.

With fast custom ability of the UNITED Oncology System, surgeons can adapt in their ideas or modifications for the patients who need special attention in a very short delivery time. The modular feature of the prostheses allows surgeons to choose various components depending upon the need of patient and full interchangeability, thus makes no surprise during the surgery.

In order to reduce the osteolysis, the polyethylene of the tibia insert and locking bushing were both increased in thickness to enhance resistance to polyethylene wear. The modularity, maximum range of motion, patented proprietary locking mechanism, are some of the advantages that the UNITED Oncology System provides to make the surgery much more complied to the surgeons' requirements.

Precise instruments to conduct an accuracy surgery are of much important to the UNITED Oncology System. The correct design of instruments can help surgeons to make the surgical procedure more accurate, simpler and faster. To obtain the minimum bone cut, to keep long term stable fixation, and special instruments for special requirement are all considerable in the design of the system.
Case 1:
male, 40 yr. right proximal femur severe bone deficiency secondary AVN, post-op 3 yr.

Case 2:
female, 65 yr. ovarian cancer, right proximal femur metastasis, post-op 1 yr.
Cap Sizes Available from 41 to 56 mm in 1 mm Size Increments

One - Piece Assembly

Four offsets available
Can be suitable for bipolar II & acetabular cup operative flexibility

Suture holes for soft tissue attachment enhances prostheses fixation

15° anatomical anteversion angle, left and right

Modular design with different lengths of segment available for operative flexibility
Length selections from 25, 30 mm~120 mm

Circumferential porous coated implant-bone interface enhances bone ingrowth and prosthesis fixation, prevent osteolysis

Large size range available for operative flexibility
3 sizes, 11 mm, 13 mm, 15 mm

Anatomic bow angle matching the anatomy of femur reduces stress of concentration

12 locking position, 10° overhooded

44~70 mm sizes, increment in 2 mm
Large size range available for operative flexibility

Anatomic bow angle matching the anatomy of femur reduces stress concentration
3 sizes, 11 mm, 13 mm, 15 mm

Circumferential porous coated implant-bone interface enhances bone ingrowth and prosthesis fixation, prevents osteolysis

Modular design with different lengths of segment available for operative flexibility
Length selections from 25, 30 mm~120 mm

Raised anterior slope prevents hyperextension

Locking mechanism design makes assembly easier

Spherical contact surface reduces stress concentration, specific stop mechanism allows ±20° rotational freedom

Three different sizes selection, for maximum bone coverage
Case 1:
male, 17 yr, malignant fibrosarcoma, post-op 3 yr.

Case 2:
male, 13 yr, malignant osteosarcoma, post-op 3 yr.

Case 3:
male, 44 yr, MFH, left distal femur, post-op 1 yr.
UNITED Oncology Knee System (Proximal Tibial)

Case 1:
female, 16 yr, malignant
Giant-cell tumor, post-op 3 yr.

Case 2:
male, 34 yr, malignant
fibrosarcoma, post-op 2 yr.
7° anatomically valgus angle restores normal knee weight-bearing characteristics. 2 sizes, small, medium.

Porous coated area enhances ingrowth of soft tissue.

Locking mechanism design makes assembly easier.

Raised anterior slope prevents hyperextension.

Spherical contact surface reduces stress concentration, specific stop mechanism allows ±20° rotational freedom.

Circumferential porous coated implant-bone interface enhances bone ingrowth and prosthesis fixation, prevents osteolysis.

Large size range available for operative flexibility, 3 sizes, 11mm, 13mm, 15mm.

Fluted design to enhance cement fixation.
Three different sizes, 40 mm, 42 mm, 44 mm for optimum fixation of the patients.

Suture holes for soft tissue attachment enhances prostheses fixation

Modular design with different lengths of segment available for operative flexibility
Length selections from 25~80 mm

Circmferential porous coated implant-bone interface enhances bone ingrowth and prosthesis fixation, prevents osteolysis

Large size range available for operative flexibility
2 sizes, 7 mm, 9 mm

Fluted design to enhance cement fixation
Case 1: female, 18 yr, malignant condrosacoma, post-op 1 yr.

Case 2: male, 15 yr, MFH, post-op 3 yr.

Case 3: female, 16 yr, malignant osteosacoma, post-op 2 yr.
Each Step We Care

Contact Us

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