The PASTA Bridge technique simplifies PASTA repair while providing a secure bridging technique that enhances footprint compression to maximize contact between tendon and bone.

The technique allows for percutaneous transtendon anchor insertion through a 3.25 mm incision with no arthroscopic suture passing or knot tying, creating a simple reproducible technique.

The subacromial bursa must be thoroughly excised to easily locate the passed sutures in the subacromial space once the anchors have been inserted.

While viewing intraarticularly, use the 17-Gauge Spinal Needle to determine the optimal position and angle of approach for transtendon suture anchor placement.

Remove the inner trocar of the Spinal Needle and introduce the 1.1 mm guide wire through the needle.

Remove the Spinal Needle leaving the 1.1 mm guide wire in place. Insert the portal dilator over the guide wire, then introduce the spear over the dilator.

Through the spear, punch the bone socket until the punch laser line is flush with the back of the spear.

Insert the SutureTak® anchor through the spear and into bone by gentle impaction until the laser line on the inserter is flush with the back of the spear. Release the cleated sutures and remove the inserter handle and spear.

Repeat the previous steps and insert a second SutureTak anchor. Viewing subacromially, retrieve one limb of suture from each anchor out the lateral cannula. Tie the two sutures with a static Surgeon’s Knot over a rigid instrument outside the body and cut the remaining suture limbs.
Tension the free limbs of the suture to pull the knot into the subacromial space and down to the bursal surface of the tendon. Retrieve the free limbs of suture out the lateral cannula and preload them through the SwiveLock® C eyelet. Prepare a bone socket using the SwiveLock punch, 5-10 mm lateral to the edge of the tuberosity.

Bring the eyelet of the SwiveLock C to the edge of the bone socket and remove slack from each suture individually. Insert the SwiveLock C into the bone socket until the anchor body contacts the bone. Adjust tension if necessary.

Make sure the tip of the anchor body is in contact with bone. Hold the thumb pad steady and rotate the driver in a clockwise direction to insert the anchor body until it is flush with the bone.

Unwind and discard the #2 FiberWire® tip retention suture that holds the PEEK tip in place during anchor insertion. Remove the driver. Cut the FiberWire tails with an open-ended FiberWire cutter.
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.

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