The New Mitchell Adjustable Spring-Assisted Bar



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Dr. Dobbs set out to increase patient compliance by making a foot abduction brace that is easier to wear, allows the child to kick and crawl, and still maintains abduction.

Parents of clubfoot children everywhere are praising his new brace, patented as the "Dobbs Bar."

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Mitchell Adjustable Spring Assist Bar



www.c-prodirect.com

A Revolution in Clubfoot Treatment

- Quick release mechanism allows Ponseti® AFO's to slide on and off for diapering, carseats, and high chairs.
- The spring assist provides a dynamic stretch on the calf, allowing patients to

build calf muscle strength while moving and playing in the brace. This helps mitigate the calf atrophy commonly seen in clubfoot patients.

- A spring reset brings the child's feet back to neutral in a resting position. The spring maintains an active dorsiflexion stretch while still allowing the child to play and crawl in the brace.
- Clear easy dial degree settings with a simple turn of a screw.



- Lets children kick and move their legs independently while maintaining abduction.
- Independent motion makes it harder to pull out of AFO's and reduces irritation.

In a recent study 95 percent of parents used the Dobbs Brace as prescribed, compared to 60 percent compliance with traditional bracing.

Setting Up The Dobbs Bar

• Setting the bar width. The Dobbs Bar should be set so that the width of the bar is equal to the shoulder width of the child. Measure the shoulder width of the child from the left outside shoulder to the right outside shoulder. Adjust the length of the Dobbs Bar so that the length of the bar



is equal to your shoulder width measurement from mid-heel of the left footplate to midheel of the right foot plate. It is better to have the bar a little wider than shoulder width rather than too

narrow. It is uncomfortable for the child if the bar length is too narrow.

• Setting external rotation. The clubfoot should be set at about 60 degrees of external rotation, which should match the degree of rotation of the foot in the last cast. If the foot was externally rotated only 50 degrees in the last cast the brace should also be at 50 degrees. A normal, nonaffected foot should be fixed on the bar in about 40 degrees of external rotation. Loosen screw in center hole. Position and fasten to quick clip. Locate indicator hole to set degree. Fasten bar with second screw in appropriate hole. • Setting active spring tension. Locate the number dial in the back of the spring housing, this will be your first adjustment. Unscrew the rear adjustment screw until the dial is released. Turn the green dial to the appropriate setting. Tighten this screw all the way to set the rear spring setting. Turn the bar over so you can see the Dobbs Logo. You will need to do the same set of steps to the front adjustment screw to set one side of the bar. Both the back setting dial and the front setting dial need to set to the same number. Repeat these steps on the opposite side of the bar to complete setting up the new Dobbs Bar.

• Attaching Ponseti AFOs. To attach the Ponseti AFOs you will need to locate the opening in the back of the AFOs. You will then slide each Ponseti Adapter into the opening in the back of each AFO. Each AFO will be correctly attached after you hear a "click" indicating the tongue and groove system are conjoined correctly.

Instructions for Use

The Dobbs Bar should be worn 23 hours a day for the first 3 months and then at nighttime and naps for 3 to 4 years. Bracing is critical in maintaining the correction of clubfeet. If the brace is not worn as prescribed, there is a near 100 percent recurrence rate.

Warning: Never use Loctite or other superglue based thread lock on the screws in the Dobbs Bar. The superglue/ Loctite will react with the polycarbonate plastic and cause the plastic to weaken and break.

