Pullout Strength of Ciprofloxacin-Containing Polylactide-Polyglycolide Screws in Human Cadaver Parietal Bone

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The aim of this study was to compare the pullout forces of recently developed bioabsorbable ciprofloxacin-containing and plain self-reinforced polylactide/polyglycolide (SR-PLGA) miniscrews in human cadaver parietal bones. Parietal bone pieces (approximately 6 x 20 cm) were collected from five human male cadavers (44-75 years of age). Fifty plain SR-PLGA 80/20 miniscrews (diameter = 1.5 mm, length = 4.0 mm) and 50 ciprofloxacincontaining SR-PLGA $\frac{80}{20}$ miniscrews (diameter = 1.5 mm, length = 4.0 mm) were used in this study. The force needed to pull the screws from human parietal cadaver bones was measured using a tensile strength-testing machine. The screw pullout speed was 10 mm/min. Means and SDs were calculated and analyzed using the Student t test (SPSS version 10.0 for Windows). The pullout forces of the ciprofloxacin-containing and plain miniscrews were 66.8 +/- 4.9 N and 96.3 +/- 9.3 N (significant difference, P < 0.001), respectively. The most common cause of failure was screw-shaft breakage (60% in the case of ciprofloxacin-containing screws and 52% in the case of plain SR-PLGA screws). Scanning electron microscopy showed that the fibrillar strip-like microstructure of plain SR-PLGA miniscrews turns into a coarse, uniaxial, platelet-like morphology in antibiotic SR-PLGA miniscrews as a result of the addition of ciprofloxacin. Ciprofloxacin-containing SR-PLGA screws consequently have a lower pullout strength than corresponding plain conventional SR-PLGA screws. Nevertheless, it is evident that the ciprofloxacin-containing screws can be applied in craniomaxillofacial surgery in nonload-bearing or slightly load-bearing applications.