

Main clinical takeaways.

More than 70 clinical studies, reports, and reviews investigated the **C-Leg** microprocessor controlled prosthetic knee. Compared with non-microprocessor knees (NMPKs), the **C-Leg** was shown to enhance safety, improve mobility, and increase patient confidence and satisfaction. The following paragraphs outline the clinical proven outcomes for **C-Leg** use compared to (NMPKs).

Safety.

Nearly 9 out of 10 *C-Leg* users reported reduced fear of falling. This confidence is well placed, considering **C-Leg** users experience up to 59 % fewer stumbles, up to 80 % fewer falls, and are up to 65% less likely to be injured by a fall.

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared to NMPKs	
Patient stumbles repeatedly	• Reduced number of stumbles (2, 12)	Number of stumbles: Up to 59 % less stumbles
Patient falls repeatedly	• Reduced falls (1-4, 7, 12) 80 %	Number of falls: Up to 80 % reduction in falls
Patients stumbles and falls repeatedly and has fear of falling	• Reduced injurious falls with C-Leg (13) -65 %	Injurious falls: Up to 65 % reduction in users with injurious falls, C-Leg was the best of the 4 MPKs tested

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared	to NMPKs
Patients stumbles and falls repeatedly and has fear of falling	Significant improvements in balance and invalid such as TUG, ABC, forces pertubations in gas -38 % -38 %	
	• Decreased fear of falling (6, 14)	Fear of falling: Up to 89 % of subjects reported decreased fear of falling

Functions and activities – level walking, stairs and ramps.

Compared to NMPKs, **C-Leg** users walk up to 25 % faster on level ground, up to 21% faster on uneven ground, and up to 40 % faster descending ramps. Most **C-Leg** users (95 %) improved their overall gait symmetry and 67% of users showed improvements in the quality of stair descending.

Level walking

Mobility needs or deficient of the patient	Evidence for benefits of the C-Leg compared to	to NMPKs
Patient has limited mobility	• Increased mobility level (1-4)	Mobility grade: Up to 50 % of subjects improved to MG3 from MG2 with MPKs (including C-Leg)
		Mobility grade: Up to 22 % of subjects improved to MG4 from MG3 with MPKs (including C-Leg)
	Improved walking velocity (2-4)	
	+25 %	Walking speed level ground: Up to 25 % faster walking speed on level ground
	• Up to 14% increase in walking distance du	uring 2-min walking test in MFCL2 subjects ⁽⁵⁾
Patient has gait asymmetry	• Improved gait symmetry (6)	Gait pattern: Up to 95 % of subjects improved gait symmetry

Stairs

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared t	o NMPKs
Patient has difficulties descending stairs with reciprocal gait (step-over-step)	• Improved mobility (1) and quality of stair desc	Quality stair descent: Up to 67 % of subjects improved their stair descent quality Improvements in quality of stair descent towards natural reciprocal gait pattern (from step-to to step-over-step)

Ramps

Mobility needs or deficient of the patient	Evidence for benefits of the C-Leg compared	to NMPKs
Patient has difficulties negotiating slopes/hills	• Improved walking velocity on ramps (1, 3, 7, 9, 10)	Walking speed ramp: Up to 40 % faster walking speed for ramp descent

Uneven Terrain/ Obstacles

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compa	red to NMPKs
Patient has difficulties negotiating uneven terrain and obstacles	• Improved walking velocity on uneven gro	Velocities uneven ground: Up to 21 % faster walking speed on uneven ground

Functions and activities – cognitive demand and energy.

With **C-Leg**, most users (94%) reported increased capability for divided attention and up to 88% of users experienced less effort during walking.

Cognitive demand

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared to NMPKs	
Patient has difficulties with dual task while walking	Improved multitasking while walking (6) Up to 28% decreased difficulty of multiple services brain activity while walking wal	_

Energy

Mobility needs or deficient of the patient	Evidence for benefits of the C-Leg com	pared to NMPKs
Patient has limitations with walking effort and energy consumption	 Reduced walking effort (6) Up to 7 % reduced oxygen consum (slow, medium and fast walking speed) 	Walking effort: Up to 88 % of C-Leg users reported reduced walking effort ption with various speeds d) (11, 16, 17)

Functions and activities – activity, mobility and ADLs.

Up to 23 % of the **C-Leg** users reported a reduced use of walking aids.

Further **C-Leg** users were able to complete ADLs 11% faster and improved the performance by 33%.

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared to NMPKs
Patient needs walking aids	• Up to 23 % of subjects reported reduction in walking aid use ⁽⁶⁾
Difficulties with performing activities of daily living	 Up to 11 % decreased time needed to complete ADLs including standing (18) Up to 33 % improved performance in ADLs (including standing, sitting down) (3, 18)

Participation – preference and satisfaction.

The **C-Leg** was preferred by 90 % of users over NMPKs.

Mobility needs or deficient of the patient	Evidence for benefits of the <i>C-Leg</i> compared to NMPKs
Patient is not satisfied with fitting	 Up to 38 % increased Prosthetic Evaluation Questionaire (PEQ) satisfaction score in MFCL3 and up to 21% improved in MFCL2 (1) Increased preference for C-Leg (7, 18-20) Preference: Up to 90 % of subjects prefer C-Leg over NMPKs

More details can be found in the study summaries



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