

عنوان مقاله:

Comparative Evaluation of Carbon Reinforced Polyetherketone Acetabular Cup using Finite Element Analysis

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نویسندگان: A Abdal - *MSc, Department of Mechanical Engineering, Loyola Marymount University, Los Angeles, USA*

R Noorani - PhD, Department of Mechanical Engineering, Loyola Marymount University, Los Angeles, USA

G Cha - PhD, The Aerospace Corporation, YTI: E. El Segundo Blvd., El Segundo, CA 1. YFA, USA

خلاصه مقاله:

Background: Patients suffering from osteoarthritis undergo surgery to replace hip joints with hip prosthesis implants. Today most acetabular cups of hip prostheses are made of Ultra-High-Molecular-Weight-Polyethylene. However, these materials acting as acetabular cups of the implant have been recalled since patients have been feeling uncomfortable and abstained from physical activities. A newly introduced material, **Wo**% Carbon Reinforced Polyetherketone, possess better isotropic mechanical properties and lower wear rates. Objective: The research aims to compare the von-Mises stresses and deformation in static and dynamic loading of Ultra-High Molecular-Weight-Polyethylene to ۳۰% Reinforced Carbon Fiber Polyetherketone using Finite Element Analysis.Material and Methods: An analytical study was performed to evaluate material selection and their contact performances of acetabular cups. Four pairs have been analyzed under loading conditions following ASTM FY995-IT and ISO YY05-F standards. The acetabular cups options are made of Wo% Carbon Reinforced Fiber Polyetherketone or Ultra-High-Molecular-Weight-Polyethylene. Besides, the femoral head and steam options are either Alumina Ceramic or Cobalt Chrome Molybdenum. Results: The yield strength of Ultra-High-Molecular-Weight-Polyethylene is considerably small, resulting in the acetabular cup to fail when applied to high loading conditions. Carbon Reinforced Polyetherketone with Alumina Ceramic yielded ۶۵% lower deformation at stumbling phase. Conclusion: Since the study focuses on linear isotropic material properties, Alumina Ceramic dominates a higher elastic modulus than Cobalt Chrome Molybdenum, nominating it the best fit .combination for lower von-Mises stresses, acting on the Carbon Reinforced Polyetherketone acetabular cup

کلمات کلیدی:

Hip Prosthesis, Carbon Fiber, Acetabular Cup, Dynamic and Static Contact, Finite Element Analysis, Acetabulum

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