**Indications**

Hinge implants are most commonly indicated in cases with extreme flexion gap imbalance (greater than 15 to 20 mm) or where complete absence of the medial collateral ligament exists. Chronic extensor mechanism disruption or deficiency also requires a hinged device to resist the hyperextension instability that frequently develops in these cases. They are also useful in situations of massive bone loss.

**Summary**

As the volume and complexity of revision TKR cases continue to rise, surgeons are increasingly faced with cases involving severely compromised bone and soft tissue support. To address these situations, revision implants are required with varying degrees of inherent mechanical constraint. Experienced surgeons differ in their approach to constraint: some espouse a minimalist philosophy and advocate the use of the least constraint possible; others believe more is better. The author feels the correct answer lies somewhere between these extremes. The surgeon must...