As a partner what is your role in the Vostars project?

We are responsible for the exploitation activity therefore of exploitation
of Vostars' results. In particular I am the exploitation manager of the project.
We entered the project because another partner came out because it was
bought by a big American company.
We entered the project and started a business for
identify what is the value proposition and the elements of innovation and products of the project. In this perspective we will build a
business plan and a strategy to enhance these products and bring them to market as soon as possible. In fact Vostars is producing more than one important asset which can be
interesting on the orthopedic surgical health market but also in other contexts.

What is Vostars' greatest potential for the orthopaedic sector?

As a company, we work primarily in the orthopaedic sector, where we work with major international centres. Vostars, in our opinion, has the possibility to open the way for new types of surgery that are not possible today, and so we always talk about an elective surgery and not an emergency surgery; a surgery in which the planning part and the complexity of the surgery is extremely high and for this reason it is essential to have support that allows for the integration of planning data with what the surgeon sees in the operating room to have greater accuracy and reach even anatomical areas that today are not easily accessible with the right safety margin. We have already interviewed a number of surgeons and are evaluating some areas of application in this domain.

As Orthokey, you have considerable experience with surgical navigators. What will be the advantages of a wearable navigator like Vostars?

Today we are witnessing a strong technological innovation in surgery. Robots to support the surgeon have already made an important entrance in the market a few years ago, and the number of surfers is growing, along with other technologies that have appeared. Surgeons certainly have an interest in having elements of innovation that simplify all the management of the operating room; having a wearable navigator without the complexity of having another trolley in the operating room and of the cameras that need to be in plain sight of the patient, certainly reduces complexity.
Wearability is an important thing. So it will be important to study, with all project partners, that the wearable helmet is really manageable during the phases in which it is required by the intervention because it is important that it is not perceived as an element of difficulty; a lot of work has been done on the ergonomics of wearability, so we are confident that it is a big advantage for surgeons to have this augmented reality system.

What studies should be implemented in the orthopaedic field to take full advantage of a device like Vostars?

We have not yet defined the specific orthopedic areas of application of Vostars, so we haven't even designed clinical trials yet.
Surely there may be various objectives of the studies, some related clinical outcome in terms of accuracy or less need for new surgery during the surgical phase on some details. Other studies will be more related to understanding when is important Vostars, in which phases, and therefore design of specific applications in which it is Vostars can intervene at key moments.

How do you think Vostars will improve surgery in the next ten years?

Assuming that we are involved in computer-assisted surgery by 25 years or so, and they're disciplines that when they're born are always very much promising. But it is also difficult to draw what will be the route and the objectives that these systems will achieve. Robotics, for example, also appeared in surgery twenty years ago and then afterwards and then developed slower. Having said that we are convinced that the reality augmented wearable as designed by Vostars with two modes of representation, can open various scenarios of applications that today we do not even think of, for example in the spinal, in arthroscopic techniques, in which it is important to have a field of view as, let's say, a virtual microscope in some surgery, a mode that today is not yet so much used and valued. There will be many difficulties to face but surely in ten years time we can count many applications in which Vostars has been used.