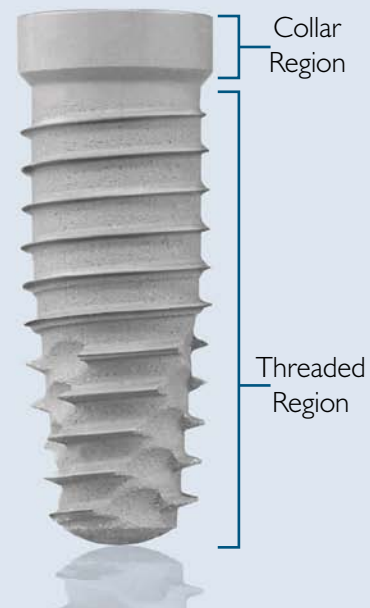


# Implant Surface Characterization Comparison As Conducted By BIOMET 3i\*1

## Surface Needs

Implant surface topographies influence the osseointegration process<sup>2</sup>, as well as help to mitigate potential risks associated with peri-implantitis<sup>3</sup>.

- Studies have shown that implant topographies play a role in both osteoconduction and the subsequent de novo bone to implant interface strength<sup>2</sup>.
- The prevalence of implants experiencing peri-implantitis has been reported in excess of 12%<sup>4,5</sup>. Studies have shown that minimally rough implants<sup>6</sup> are less likely to develop peri-implantitis than rough implants<sup>6</sup> once exposed to the oral environment<sup>3</sup>.



ATTRIBUTES	BIOMET 3i T3® Implant with DCD® Surface	NOBEL BIOCARE® TiUnite® Surface	Dentsply OSSEOSPEED™ Surface	STRAUMANN® SLACTIVE® Surface
<b>Process</b>	<ul style="list-style-type: none"> <li>• Grit blasting with calcium phosphate media (Threaded area only on 3i T3)</li> <li>• Dual acid-etching</li> <li>• Discrete Crystalline Deposition (DCD)</li> </ul>	<ul style="list-style-type: none"> <li>• Anodic oxidation</li> </ul>	<ul style="list-style-type: none"> <li>• Grit blasting with TiO2 media</li> <li>• Acid-etching</li> </ul>	<ul style="list-style-type: none"> <li>• Grit blasting with alumina oxide media</li> <li>• Acid-etching in nitrogen atmosphere</li> </ul>
<b>Sub-Micron Surface Features (~30,000x) *DCD Version Only</b>	<p>10-100nm HA Crystals</p>	<p>Limited sub-micron scale tubular pores</p>	<p>Limited sub-micron scale angular facets</p>	<p>0-20nm rod shaped features</p>
<b>Micron Surface Features (~2,000x)</b>	<p>1-3 micron pitting</p>	<p>3-15 micron tubular pores</p>	<p>1-50 micron angular facets</p>	<p>1-3 micron pitting</p>
<b>Micron Surface Features (~300x) – Collar Region</b>	<p>Sa ≈ 0.5 microns</p>	<p>Sa ≈ 1.1 microns</p>	<p>Sa ≈ 1.5 microns</p>	<p>Sa ≈ 1.6 microns</p>
<b>Coarse Micron Surface Features (~300x) – Threaded Region</b>	<p>Sa ≈ 1.4 microns</p>	<p>Sa ≈ 1.1 microns</p>	<p>Sa ≈ 1.5 microns</p>	<p>Sa ≈ 1.6 microns</p>

For More Information, Please Contact Your Local BIOMET 3i Sales Representative.

\*Results may vary depending on test methodology. Testing conducted with OSSEOTITE® 2 Implants and BIOMET 3i blasted and dual acid-etched implants. A single representative sample from each surface type was evaluated.



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\*Dr. Gubbi and Mr. Towse contributed to the above research while employed by BIOMET 3i.



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# Contemporary Hybrid Design

## Primary stability<sup>1,2,3</sup>

Initial Bone-to-Implant Contact is a major contributor to the implant's stability.<sup>4</sup> The specifications of the **3i T3**® Implant are held to rigorous tolerances to provide a closely integrated implant-to-osteotomy fit, creating a dental implant system that helps achieve primary stability.

## Osseointegration<sup>5,6</sup>

In preclinical studies\*, the **3i T3** with DCD® Surface demonstrated increased integration strength throughout the healing phase as compared to less complex surface topographies.<sup>6</sup>

## Peri-implantitis risk mitigation<sup>7,8</sup>

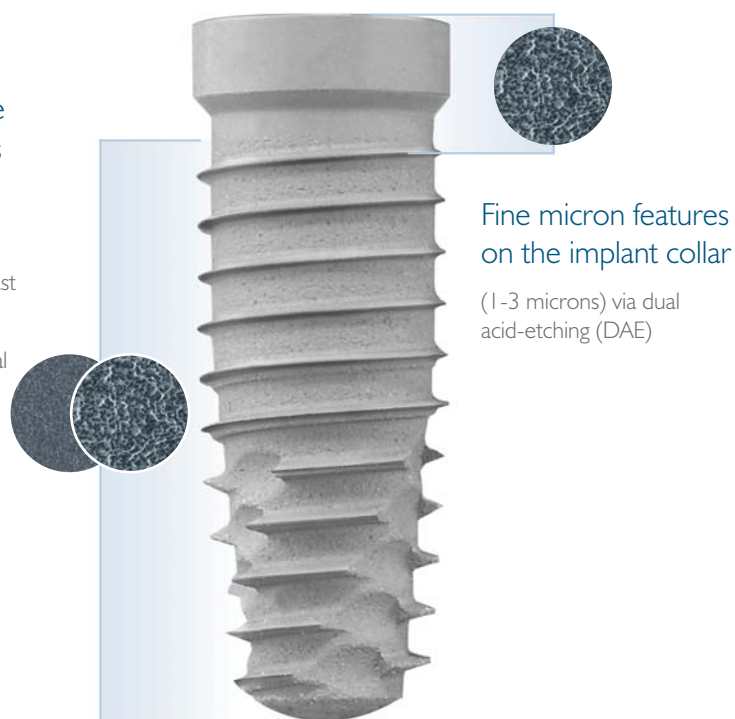
The **3i T3** Implant utilizes the proven OSSEOTITE® Surface technology at the coronal aspect of the implant. In a five-year study<sup>7</sup>, the dual acid-etched surface of the OSSEOTITE Implant presented no increased risk of peri-implantitis or soft-tissue complications versus a machined surface.<sup>7</sup>

Coarse and fine micron surface features create an average mean surface roughness value of 1.4µm

### Coarse and fine micron features

Coarse:  
(10+ microns) via resorbable calcium phosphate media blast

Fine:  
(1-3 microns) via dual acid-etching (DAE) on top of the blasted surface



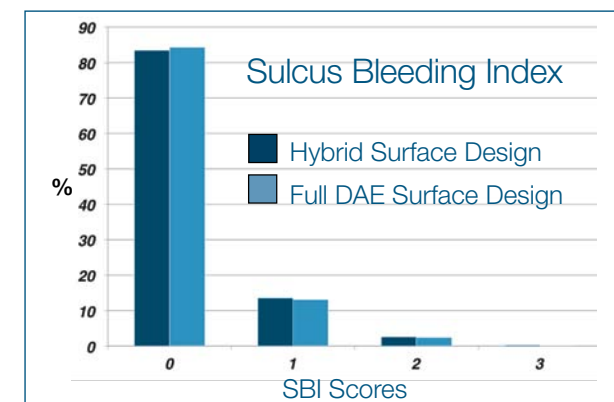
### Fine micron features on the implant collar

(1-3 microns) via dual acid-etching (DAE)

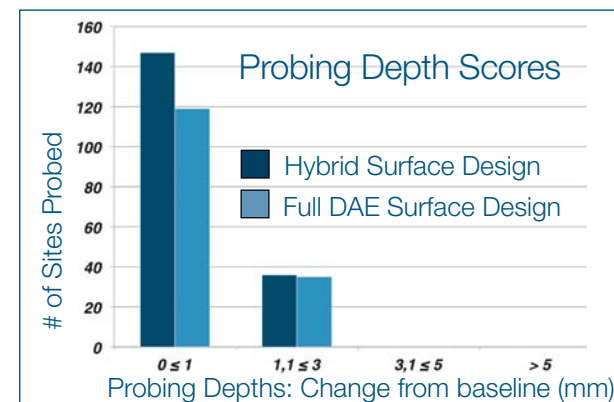
### Option for nano-scale features along the full length of the implant

via Discrete Crystalline Deposition (DCD) of calcium phosphate

Multicenter, randomized controlled 5-year study of hybrid and fully etched implants for the incidence of peri-implantitis<sup>7</sup>:



84% of all SBI scores were "0" (absence of bleeding); 13% of scores were "1" - isolated bleeding spot.



No implant (test or control) showed changes in probing depths greater than 3.0mm.

One hundred twelve patients who were enrolled at seven centers received 139 control and 165 test implants (total: 304 implants)<sup>7</sup>.

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References 1-3 discuss the BIOMET 3i Tapered Implant macrodesign, which is incorporated into the 3i T3® Implant. Reference 6 discusses the BIOMET 3i OSSEOTITE® and/or NanoTite Implant dual acid-etched or DCD® technology, which is incorporated into the 3i T3 Implant.

<sup>†</sup>Dr. Block, Dr. Meltzer, Dr. Nevins and Dr. Östman have financial relationships with BIOMET 3i LLC resulting from speaking engagements, consulting engagements and other retained services.

\*Preclinical studies are not necessarily indicative of clinical performance.