

# A little innovation can make a big difference

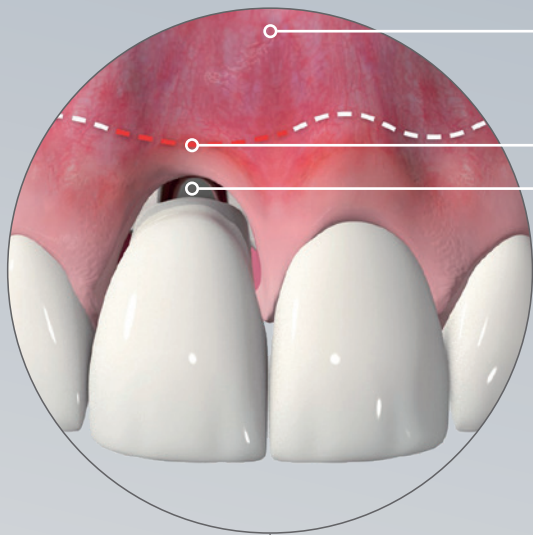
Geistlich Bio-Oss® Collagen

**50 mg – A new size  
of the Original  
Geistlich Bio-Oss®  
with 10% Collagen**



# Shield for Success

Consequence of missing prevention by regeneration is...

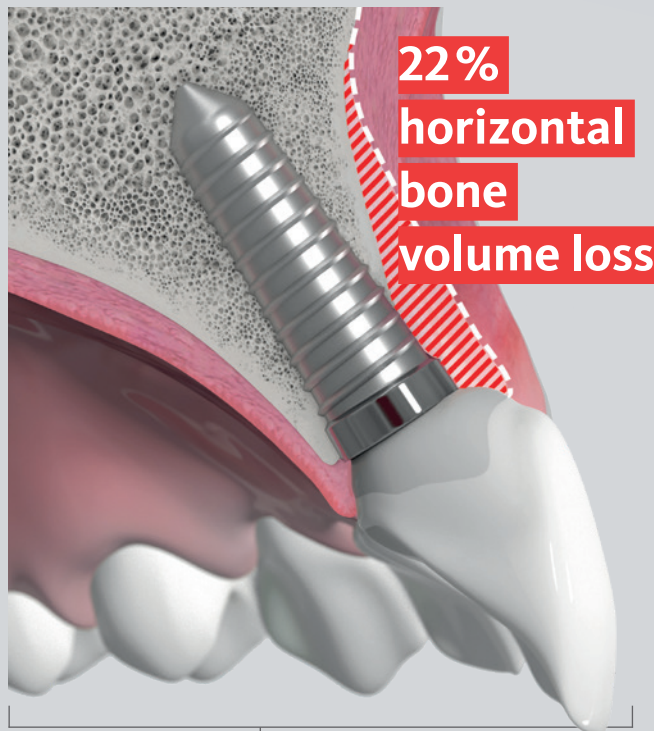


Immediate implant alone cannot maintain the ridge volume after tooth extraction.<sup>1,2</sup>

Leaving the gap yields 2.7 times more resorption than filling the peri-implant gap with Geistlich Bio-Oss Collagen and Geistlich Bio-Gide.<sup>1</sup>

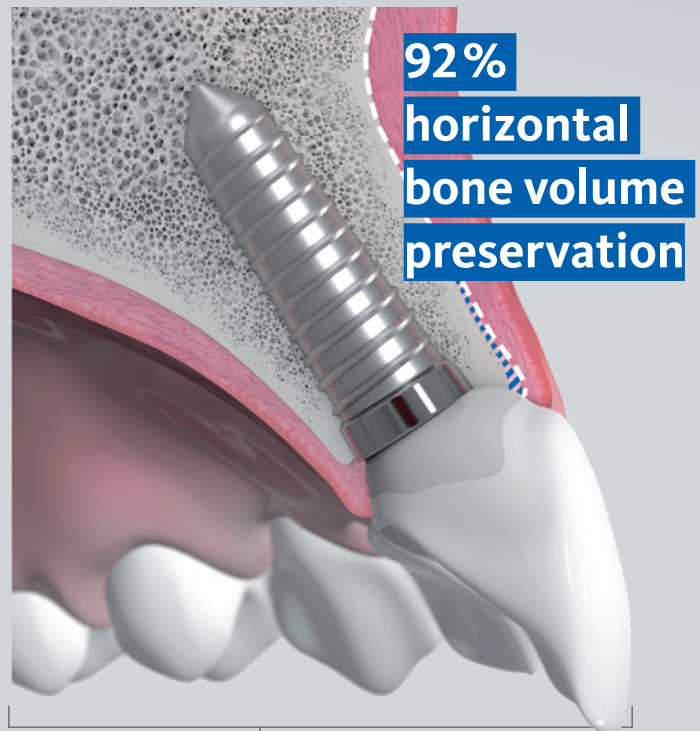
Horizontal ridge resorption is more pronounced in the esthetic zone (anterior maxilla) and with thinner buccal bone plates.<sup>3</sup>

Without filling the gap  
After 1 year



**Bone resorption<sup>1</sup>**  
▶ 22% horizontal volume lost  
▶ 1.7 mm vertical loss

Filling the gap with  
Geistlich Bio-Oss<sup>®</sup> Collagen  
After 1 year

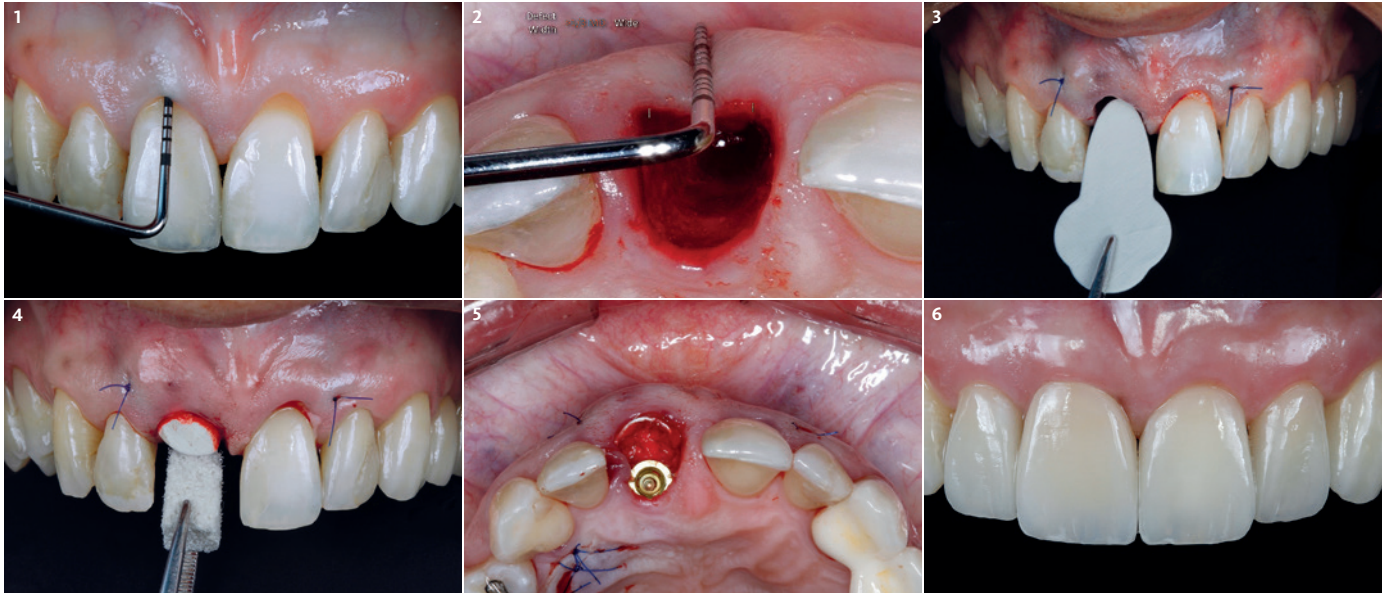


**Maximize bone volume preservation<sup>1</sup>**  
▶ 92% horizontal volume preserved  
▶ 0.6 mm vertical loss



# Immediate implant placement with buccal bone wall defect

Prof. Julio C. Joly, Prof. Robert C. da Silva, Prof. Paulo F. M. de Carvalho, Dr. Víctor Clavijo | São Paulo, Brazil



1 Initial examination shows a probing depth of 9,0 mm suggesting a root fracture. A CBCT identifies an extensive loss of buccal bone wall.

2 Pressing gently with the periodontal probe over the defect, the U Defect depth and width can be identified.

3 After augmenting the soft-tissue thickness and covering the recession for 11 and 21 with a connective tissue graft, Geistlich Bio-Gide® Shape is placed below the graft and the periosteum.

4 Geistlich Bio-Oss® Collagen is placed to fill the gap and the membrane should exceed at least 3 mm apical and lateral of the defect.

5 The biomaterials fill the gap and support the tissues while maintaining the necessary bone volume.

6 The provisional crown used immediately after grafting and implant placement is replaced by the final crown after 6 months of healing.



7 Crestal view of the final restoration with a nice emergence profile 6 months after simultaneous grafting and immediate implant placement.

“Geistlich Bio-Oss® Collagen can effectively offset the bone resorption pattern that naturally occurs following tooth extraction, which as we know can hamper esthetics and lead to soft-tissue instability.”

PROF. ROBERT C. DA SILVA



50 mg – A new size of the Original Geistlich Bio-Oss® with 10% Collagen





More details about our distribution partners:  
www.geistlich-biomaterials.com

#### Manufacturer

Geistlich Pharma AG  
Business Unit Biomaterials  
Bahnhofstrasse 40  
6110 Wolhusen, Switzerland  
Phone +41 41 492 55 55  
Fax +41 41 492 56 39  
www.geistlich-biomaterials.com

#### Affiliate Australia and New Zealand

Geistlich Pharma Australia Pty Ltd.  
The Zenith – Tower A  
Level 21, Suite 21.01  
821 Pacific Highway  
NSW 2067 Chatswood, Australia  
Phone +61 1800 776 326  
Fax +61 1800 709 698  
info@geistlich.com.au  
www.geistlich.com.au

#### Affiliate Great Britain and Ireland

Geistlich Sons Limited  
1st Floor, Thorley House  
Bailey Lane  
Manchester Airport  
Manchester M90 4AB, Great Britain  
Phone +44 161 490 2038  
Fax +44 161 498 6988  
info@geistlich.co.uk  
www.geistlich.co.uk

#### Affiliate North America

Geistlich Pharma North America Inc.  
202 Carnegie Center  
Princeton, NJ 08540 USA  
Phone +1 855 799 5500  
info@geistlich-na.com  
www.geistlich-na.com

#### Distribution Canada

HANSAmEd Ltd.  
2830 Argentia Road  
Unit 5-8  
L5N 8G4 Mississauga, Canada  
Phone +1 800 363 2876  
Fax +1 800 863 3213  
orders@hansamed.net  
www.hansamed.net

**NEW  
SIZE**



#### Geistlich Bio-Oss® Collagen

Geistlich Bio-Oss® (small granules) + 10% collagen (porcine)  
Sizes: 50 mg (2.5 × 5.0 × 7.5 mm), 100 mg (5.0 × 5.0 × 7.0 mm),  
250 mg (7.0 × 7.0 × 7.0 mm), 500 mg (10.0 × 10.0 × 7.0 mm)



#### Geistlich Bio-Gide® Shape

Pre-shaped, bilayer collagen membrane Size: 14 × 24 mm



**“Geistlich Bio-Oss® Collagen 50mg was the ideal size graft material for placement between the implant and facial plate for maintaining the hard and soft-tissue volume throughout the course of osseointegration and healing.”**

DR. JUSTIN KANG | NEW JERSEY, USA

- 1 Cardaropoli, D. et al. IJPRD 2014;34:631-637. (clinical study)
- 2 Vignoletti, F. & Sanz, M. Periodontology 2000 2014;66:132-152. (clinical study)
- 3 Sanz, M., et al. Clin Oral Implants Res. 2017 Aug;28(8):902-910. (clinical study)