Puros[®] Cortical Particulate Allograft

Building Bone, Naturally.



REGENERATIVE SOLUTIONS

Long-Lasting Regeneration

- Can be used alone or as a composite graft in space maintenance and volume enhancement procedures¹
- Slow-resorbing Maintains an open network for the proliferation of bone-forming cells¹
- Retains the natural collagen matrix and mineral structure of human cortical bone^{2,3}

Safe And Easy To Use

- Sterilized using the proprietary Tutoplast® process
- Over 40 years of history and more than 5 million documented cases³
- Easy handling, quick hydration, five-year shelf life and room temperature storage

Clinically Successful

- Remodels into a dense lamellar structure without sacrificing ridge contour, and into natural viable bone with similar density to native bone⁴
- In a "sandwich" technique for the treatment of localized buccal dehiscence defects, Park and Wang reported an average gain of 1.8 mm in bone thickness⁵
- In a combination "sandwich" and mucogingival pouch flap technique, one study achieved 1.5 mm to 3.5 mm gain in mean ridge thickness, and 84% to 100% gain in mean ridge height⁶



Offers The Density And Strength Of A Cortical Autograft¹ Without The Need For Costly And Invasive Bone Harvesting.

The Unique Tutoplast Process

- The proprietary Tutoplast process assures the highest standard of tissue safety and quality with minimal risk of disease transmission.2,3
- The process preserves the valuable collagen matrix and tissue integrity while inactivating pathogens and gently removing unwanted materials, such as cells, antigens and viruses.3 The result is safe, biocompatible tissue.3
- For over 40 years, Tutoplast processed tissues have been safely used in more than 5 million procedures.³

Clinical Effectiveness Of Grafting With **Cortical Particulates**

Grafting with cortical particulates has been shown to produce successful clinical results in:

- Sinus augmentation⁷⁻⁸
- Regeneration of gaps around block grafts³
- Alveolar ridge augmentation⁴⁻⁶
- "Tent" and "sandwich" grafting techniques^{4,6}







Osmotic treatment



Oxidative treatment



Solvent dehydration



Low-dose gamma irradiation

Take A Closer Look



Figure A Severely resorbed preoperative ridge



Figure B SEM of Puros Cortical Particulate.



Figure C Puros Cortical Particulate in place



Figure D 3 months postoperative: ridge width restored to natural contours (4 mm increase).

Clinical images ©2012 Sang-Hoon Park, DDS and Hom-Lay Wang, DDS, MSD, Department of Periodontics, University of Michigan. All rights reserved. Individual results may vary.

Ordering Information

| Catalog Number | Description |
|----------------|--|
| 67271 | Puros Cortical Particulate, 0.25–1 mm/0.5 cc |
| 67272 | Puros Cortical Particulate, 0.25–1 mm/1.0 cc |
| 67273 | Puros Cortical Particulate, 0.25–1 mm/2.0 cc |
| 67274 | Puros Cortical Particulate, 1–2 mm/0.5 cc |
| 67275 | Puros Cortical Particulate, 1–2 mm/1.0 cc |
| 67276 | Puros Cortical Particulate, 1–2 mm/2.0 cc |

Wang HL, Boyapati L, "PASS" principles for predictable bone regeneration, Implant Dent, 2006;15:8-17.

²Schoepf C. Allograft safety: efficacy of the Tutoplast® Process. International Magazine of Oral Implantology.

³ Data on file with RTI Biologics, Inc

 4 Le B, Burstein J, Sedghizadeh P. Cortical tenting grafting technique in the severely atrophic ridge for implant site preparation, Implant Dent, 2008;17:40-50,

⁵ Park SH. Wang HL. Management of localized buccal dehiscence defect with allografts and acellular dermal matrix. Int J Periodontics Restorative Dent. 2006;26:589-595.

⁶ Park SH, Wang HL. Mucogingival pouch flap for sandwich bone augmentation: technique and rationale. Implant Dent. 2005;14:349-356.

 $^{7} Schlegel\,KA, Schultze-Mosgau\,S, Wiltfang\,J, Neukam\,FW, Rupprecht\,S, Thorwarth\,M.\,Changes\,in\,mineralization\,of\,M.$ free autogenous bone grafts used for sinus floor elevation. Clin Oral Implants Res. 2006; 17:673-678.

⁸ Rubio de Rezende ML, Nasciemento de Melo LG, Hamata MM, Monteiro-Amado F, Particulate inlay nasal graft with immediate dental implant placement in a patient with repaired alveolar cleft: case report. Implant Dent. 2008:17:332-338.

Contact us at +34-93-470-55-00 or visit zimmerbiometdental.com

Zimmer Biomet Dental Global Headquarters 4555 Riverside Drive Palm Beach Gardens, FL 33410 Phone: +1-561-776-6700 Fax: +1-561-776-1272

Unless otherwise indicated, as referenced herein, all trademarks are the property of Zimmer Biomet; and all products are manufactured by one or more of the dental subsidiaries of Zimmer Biomet Holdings, Inc., and distributed and marketed by Zimmer Biomet Dental (and, in the case of distribution and marketing, its authorized please refer to the individual product labeling or instructions for use. Product clearance and availability may be limited to certain countries/regions. This material is intended for clinicians only and does not comprise medical advice or recommendations. This material may not be copied or reprinted without the express written consent of Zimmer Biomet Dental. ZB0342 REV A 09/17 ©2017 Zimmer Biomet. All rights reserved.

