



SOUTHERNIMPLANTS



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Innovative Treatment Solutions

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**DID YOU
KNOW?**

ABOUT SOUTHERN'S

MATERIAL

MATERIAL



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INTRODUCTION

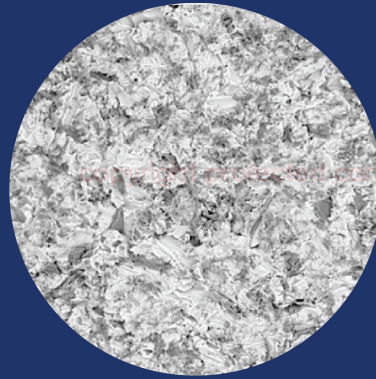
The Southern Implants surface is classified as "moderately rough" (S_q 1-2 μm) and is achieved by blasting with alumina particles followed by cleaning with inert solvents to remove blasting residues.

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EXPERIMENTS

The first experimentation with this Southern enhanced surface was in 1992.

After extensive validation, it was put into widespread clinical use in 1997.



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RESEARCH

The research was done regarding the particle size through the work of Soskalne (Israel), Wennerberg (Sweden) and Ronald (Norway).

Based on their research, the greatest bone-to-titanium bond strength is obtained with abrasion particles greater than 75 μm and less than 170 μm .

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ANALYSIS

Szmukler-Moncler has analyzed and compared the popular implant surfaces in publications and a presentation at the AO, San Francisco 2004.

He reported that Southern's surface is remarkably consistent and free of contaminants whilst those that are acid etched or oxidised are shown to be highly variable.

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LITERATURE

There seems to be consensus in the literature that "moderately rough" surfaces pose no risks for the patient and are therefore safe to use.

Moderately rough was defined by Albrektsson as S_{a} 1.0 to 2.0 μm (Applied Osseointegration Research, 2006).

In 2007, Dr Mats Wikstrom, Chief of Clinics, Branemark Centre Goteborg, concluded that the Southern surface is one of the three best documented moderately rough surfaces on the market.

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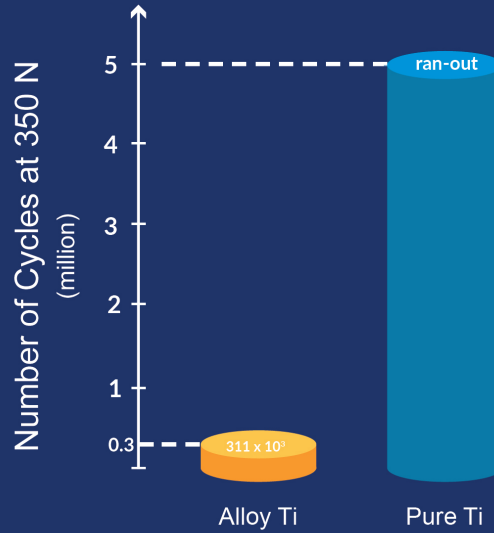


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COMPARATIVE FATIGUE TEST RESULTS



Additional testing done by Southern Implants found that an Alloy Grade 5 Titanium implant resulted in fractures at 0.3 million cycles compared to Southern's Pure Grade 4 Titanium which ran-out without fracturing at 5 million cycles.



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CONCLUSION

The Oral Implantology Research Group, University of Otago, conducted Randomized Clinical Trials (RCTs) involving Southern Implant's rough surface.

These studies have gone in excess of 10 years in both mandibles and maxillae. The 8-year and 5-year results are published in Cochrane Collaboration reports. Standardised radiographs show marginal bone loss of all the implants to be well within the criteria set by Albrektsson & Zarb (1993, 1998) as well as Fourmoussis & Bragger (1999).

To learn more about our materials and surfaces visit:

www.southernimplants.com



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DAB
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