

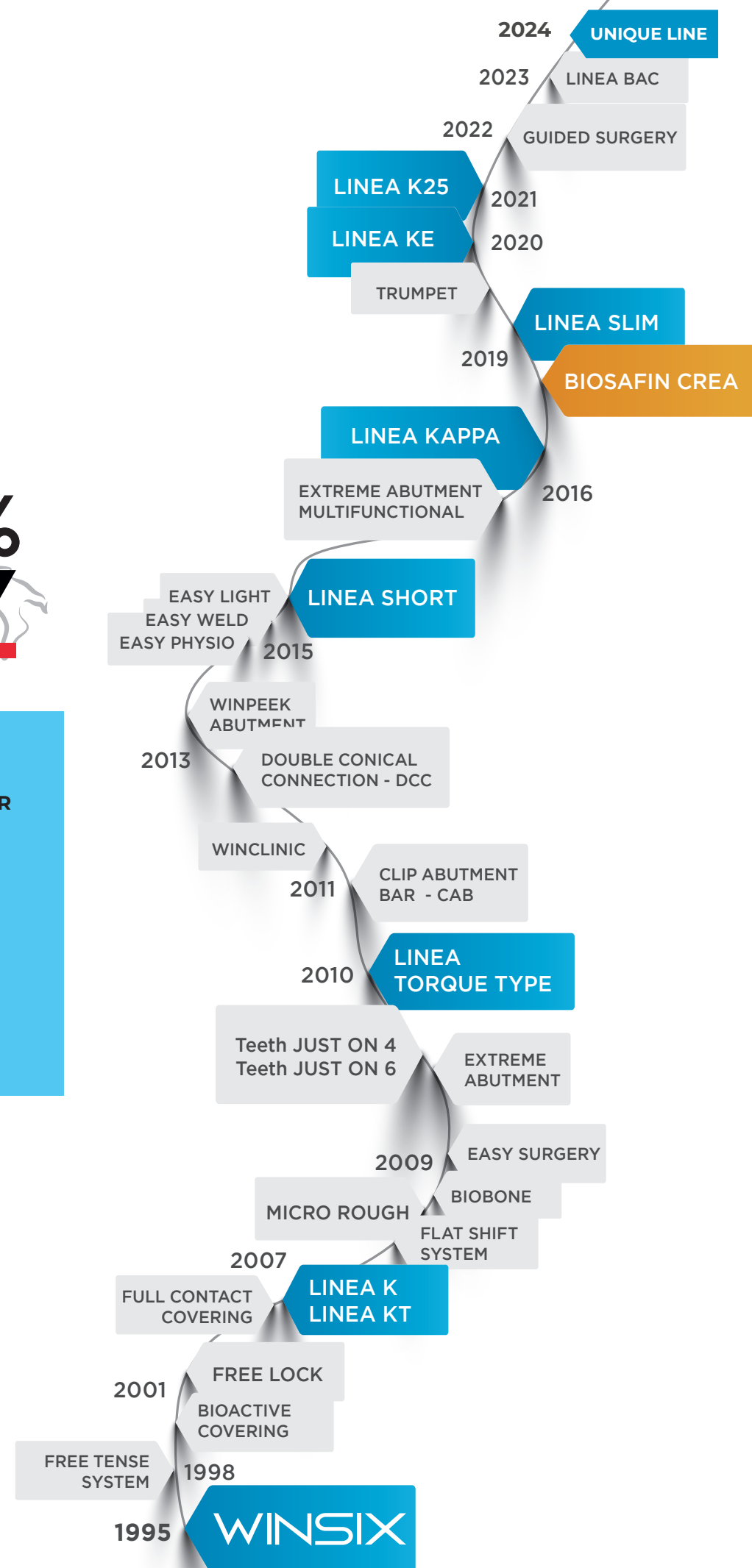


PATENTS:

CAB - CLIP ABUTMENT BAR
INTERNATIONAL AND
EUROPEAN PATENT:
PCT/EP2011/072448
EP PATENT N. 11425032.7

TRUMPET ABUTMENT
EP PATENT N. 3424460

BIALIGNER
PCT IB2023058721
EP PATENT N. 23768005.3



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WINSIX®
PERFORMING IMPLANT SYSTEM

ABSTRACT

FOLLOW-UP 19 YEARS

WINSIX®
IMPLANT
SYSTEM

FOLLOW-UP 14 YEARS

JUST ON 4®/6®
TECHNIQUE

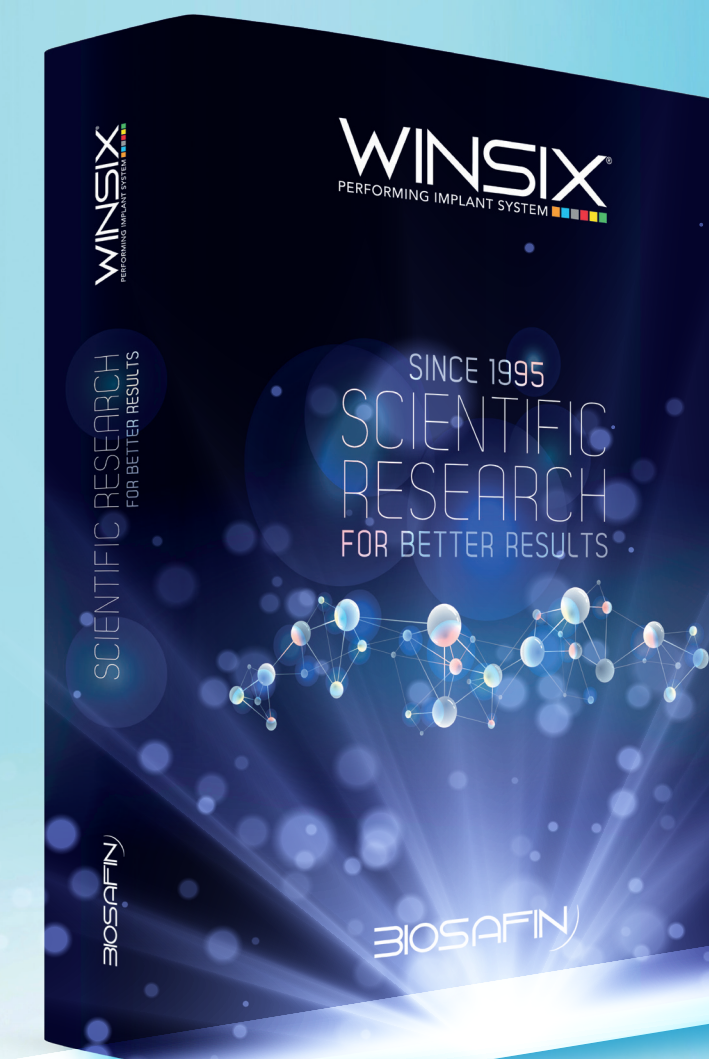
BIOSAFIN



Over 300 publications

DOCUMENT THE COMPANY'S COMMITMENT
TO SCIENTIFIC RESEARCH SINCE 1995.

Full collection
WINSIX Implant System



FOLLOW-UP 19 YEARS WINSIX® IMPLANT SYSTEM

RETROSPECTIVE ANALYSIS, AT 19 YEARS, OF THE PROSTHETIC-IMPLANT
TREATMENT OUTCOMES PERFORMED WITH THE WINSIX IMPLANT SYSTEM.

DECEMBER 2005 DECEMBER 2024.

Authors: Operational Unit of Dentistry -
Università Vita - Salute San Raffaele of Milan,
Dir. Prof. Enrico Gherlone.

MATERIALS AND METHODS

9538 implants were evaluated in 5298 patients between December 2005 and December 2024 at the Multispecialty Dentistry Operating Unit of the IRCCS San Raffaele Hospital of Milan. Of these, 6504 implants were inserted in 3613 patients who regularly underwent the maintenance programme at the Oral Hygiene and Prevention Centre active at the Dentistry Unit.

[DIAGRAM 1]

The remaining patients, on the other hand, did not adhere to the maintenance program. In patients undergoing maintenance, for each implant, it was possible to detect the set of clinical parameters suitable for evaluating the health status of the implant site. Probing Pocket Depth (PPD), Bleeding on Probing (BoP), radiographic signs of evident peri-implant bone resorption and mobility.

DATA ANALYSIS

On the sample of 9538 implants, 1.57% equal to 150 units implanted in 132 patients failed, showing a given rate of failure percentage aligned with the values observed in literature. [DIAGRAM 2]

By restricting the analysis only to patients undergoing follow-up, the rate of failure drops to a percentage value of 1.3% for a total of 14 implants. Also among these patients, the average value of the PPD

[DIAGRAM 3] detected in 4 sites for each implant, is found in 98% of cases to be < 5mm (4072 survey sites out of a total of 4156).

Finally, analysing the data relating to the average values of the plaque index according to O’Learly (PI) and bleeding (BoP) in maintenance patients, in the subjects with implant failure, an average value clearly higher than the values observed among those who instead show good health of the peri-implant tissues was observed for both parameters: specifically, among the patients showing peri-implant tissues in good condition, the average PI figure was 29.5% and with regard to the BoP, 18%. In patients with implant failure, the average values were 50% and 35%, respectively. [DIAGRAM 4]



CONCLUSIONS

When seeking the long-term success of implant-based prosthetic rehabilitation, a maintenance program calibrated according to the specific characteristics of the patient is a fundamental factor, as it is a useful opportunity to prevent peri-implant disease and to intercept the early onset of inflammatory phenomena of peri-implant tissues and/or mechanical problems of the implant-prosthesis.

The reduction of the incidence of failure observed in patients belonging to such a follow-up program, even in the absence of investigations related to the microbiological phenomena underlying these results, can still be considered evidence of the effectiveness of such a clinical attitude.



DIAGRAM 1

- Implants in follow-up
- Drop-out

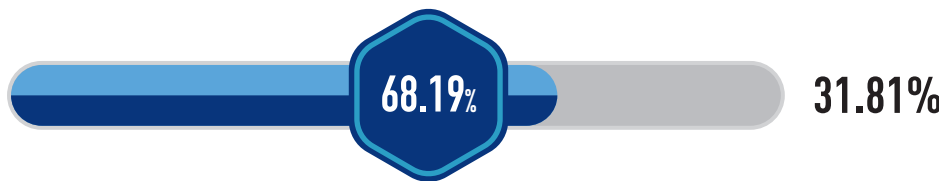


DIAGRAM 2

- Successful implants / survival
- Failed implants



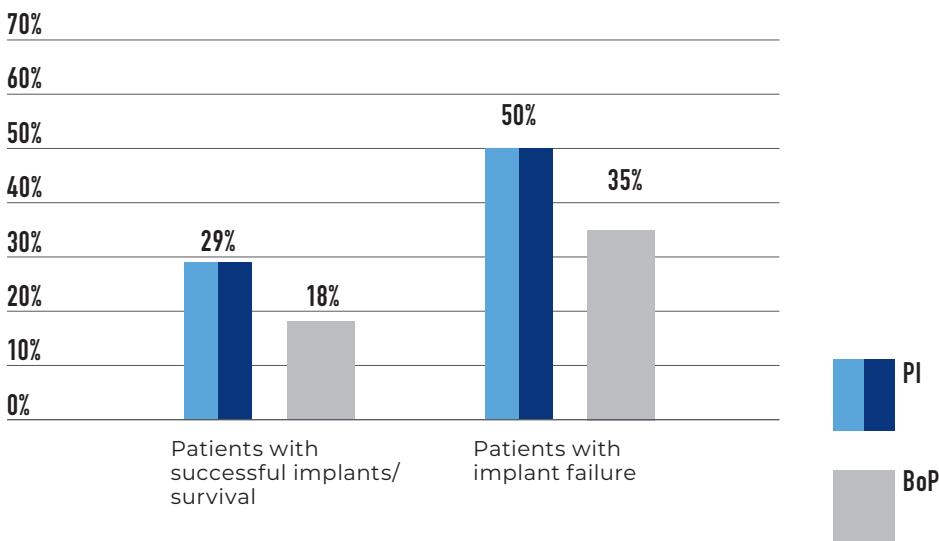
DIAGRAM 3

- PPD < 5 mm
- PPD > 5 mm



DIAGRAM 4

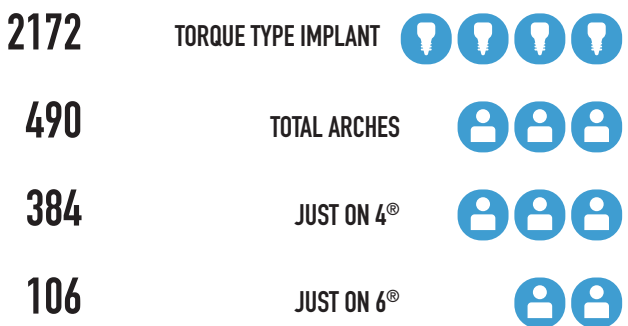
Accumulation of plaque and tendency to bleed of peri-implant tissues in relation to implant success and failure



FOLLOW-UP 14 YEARS JUST ON 4®/6®

DECEMBER 2010 - DECEMBER 2024.

Authors: Operational Unit of Dentistry
Università Vita – Salute San Raffaele, Milan,
Dir. Prof. Enrico Gherlone.



The Just on 4®/6® technique allows for the rehabilitation of an edentulous arch in patients with severe atrophy of the jaw with an immediate full-arch solution to support the implant. The approach guarantees minimal surgical invasiveness and a satisfactory aesthetic result of the screwed-in prosthetic artefact, limiting the biological cost as well as the economic cost for the patient. The possibility of using the CAB reinforcement bar in the construction of the prosthesis, submerging it within the artefact, also allows it to achieve excellent performance in terms of structural prosthetic resistance under the masticatory load. The synergistic use of Just on 4®/6® and CAB has allowed up to now an achievement of extraordinary clinical results in terms of implant and prosthetic success/survival rates, met with the satisfaction of patients who, in a single session, are rehabilitated with the insertion of a temporary prosthesis.

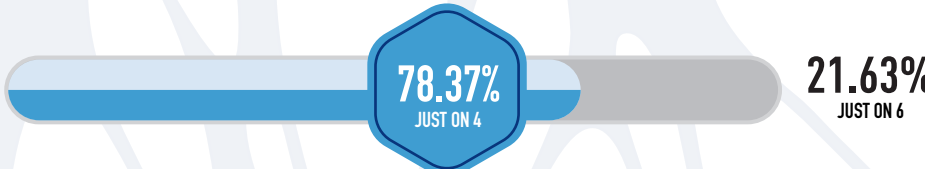
In the period between December 2010 and December 2024, the overall rehabilitation of 490 edentulous arches was performed (384 with Just on 4® and 106 with Just on 6® for a total of 2172 implants). All patients rehabilitated using the Just on 4®/6® technique were then included in a professional hygiene follow-up programme that involves four preventative sessions, once every three months. The prosthesis is then dismantled once a year to allow for more direct professional treatment of the peri-implant tissues.

CONSIDERATIONS

From the analysis of the data extracted from the medical records of patients undergoing Just on 4®/6® rehabilitation, it was possible to establish that the system produced an implant survival rate of 100%. The cases of implant failure all occurred at an early stage, probably due to failure to achieve osseointegration, which was followed by the reinsertion of new implants that have reached functionality. (failure 1.47%, equal to 32 implants). Of the total 490 prosthetic arches, 54 were not reinforced internally with a CAB bar. Of these, 6 were temporarily fractured and subsequently repaired. In view of these data, we can establish a prosthetic success of 99.77% in cases of prostheses made on CAB (434 arches) and 89.09% for prostheses without the bar, which, in any case have a 100% survival rate.

Under the professional maintenance profile of patients undergoing Just on 4®/6® rehabilitation, no implants were affected by peri-implantitis. However, the importance of a correct prosthetic design, which facilitates the localised cleaning of the prosthetic surfaces facing the osteo-mucosal area, and the use of the most advanced technologies applied to professional oral hygiene, such as air polishing devices for supragingival use and in the peri-implant sulcus and ultrasonic scalers on plastic materials, which are effective but implant-prosthetic material-friendly, should be stressed in this regard.

TOTAL REHABILITATIONS



REINFORCEMENT OF THE PROSTHESIS WITH CAB



RATE OF SUCCESS

