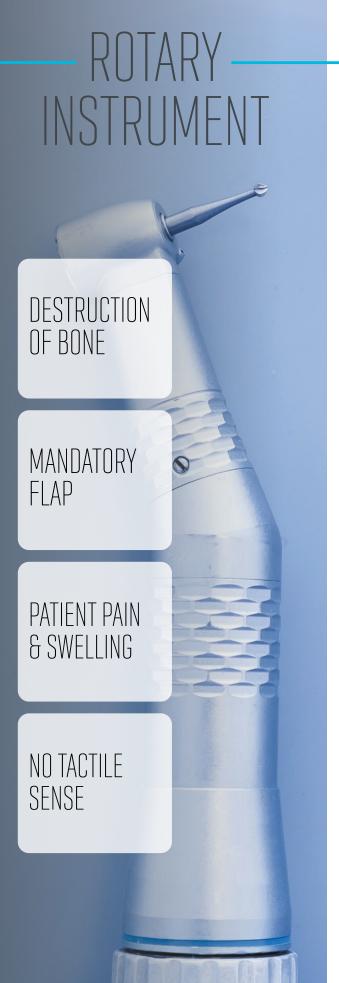
IT'S TIME FOR ATRAUMATIC IMPLANT SURGERY PIEZOTOME CUBE







PIEZOTOME

50% OF ALL IMPLANTS PLACED REQUIRE BONE GRAFTING.¹

PERFORM IMPLANT SURGERY AT THE SAME SPEED² AS ROTARY INSTRUMENTS WITH MORE SAFETY & LESS TRAUMA!



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EXTRACTIONS: LESS TRAUMA, LESS DRAMA

BONE SURGERY: POWERFUL WHEN YOU NEED IT



EXTRACTIONS WITH IMMEDIATE IMPLANT PLACEMENT

Extractions can sometimes be difficult. With **PIEZOTOME® CUBE**, make them simple and less traumatic:

- PRESERVE MORE BONE
- FASTER HEALING
- LESS POST-OPERATIVE SWELLING
- LIKE A "POWERED PERIOTOME"







FXTRACTION For maximum bone preservation. Ref. F87546

- REDUCE THE RISK OF BUCCAL PLATE FRACTURE AND OTHER COMPLICATIONS
- INCREASE BONE PRESERVATION AND EXTRACTION PROCEDURE PREDICTABILITY
- TIPS FOLLOW THE CONTOUR OF TEETH AND BONE



BLOCK GRAFTING, TORI REMOVAL, OSTEOTOMY



Due to the minimally invasive advantages such as bone preservation, less trauma, less swelling, better visibility, and less pain for the patient, CUBE will increase predictability with all bone grafting procedures, increasing the ability to perform Immediate Implant Placement.



BS1-RD Rounded Bone Saw for easier access Ref. F87557

BONE SURGERY

Clean and thin cut for efficient bone grafting. Ref. F87509

50% OF ALL IMPLANTS PLACED REQUIRE SOME SORT OF BONE GRAFTING¹

BONE GRAFTING PROCEDURES WITH CUBE: COMPASSIONATE CARE





CREST SPLITTING

Fast and minimally invasive technique for controlled ridge splitting. *Ref. F87567*

REDUCE RISK OF BONE FRACTURE SIMPLE PROTOCOL MORE PREDICTABLE















SINUS ELEVATION IS REQUIRED IN THE ANTERIOR MAXILLARY AREA 77% OF THE TIME¹



ZERO PERFORATIONS OF THE SCHNEIDERIAN MEMBRANE OCCURRED DURING THE PIEZOELECTRIC PREPARATION OF THE LATERAL ANTROSTOMIES³



LATERAL SINUS LIFT Selective cutting reduces risk of membrane perforation. *Ref. F87519*







BONE GRAFTING PROCEDURES WITH CUBE: MINIMALLY INVASIVE





Minimally invasive internal sinus elevation. Ref. F87536

PREDICTABLE AND EASY PROTOCOL PATIENTS EXPERIENCE LESS PAIN AND SWELLING POST OPERATIVELY



NEW BONE FORMATION WAS VISIBLE AFTER ONLY SIX WEEKS, AND 98% OF PATIENTS TREATED DIDN'T USE ANY ANALGESICS."







PIEZOCISION™ Accelerated Orthodontic Surgery Ref. F87576

- INSERT TIPS IN PREPARED INCISIONS
- REDUCE TIME IN BRACES ı.
- WORKS WITH INVISALIGN®

WN EXTENSION **Crown Lengthening**

Incomparable precision and accessibility. Ref. F87554

SAFELY REMOVE AND CONTOUR BONE





PRESERVATION, PREDICTABILITY & PATIENT CARE

LESS TRAUMA & BLEEDING





- Cutting selectivity: soft tissue is preserved
- No bone necrosis



Thin cuts on all types of bone Minimal bone loss for less invasive procedure



Very little force needed

Less pain post-operatively



- Consistent irrigation flow
- Cavitation: microbubbles releasing oxygen has a hemostatic effect



PIEZOTOME[®] surgery is superior in atraumaticity and soft-tissue safety (...) No lesions of the mandible nerve were detected with **PIEZOTOME®** surgery.⁵

THE PIEZOTOME® produced the smallest increase in intraosseous temperature.⁶

Dr. Todd Engel, DDS (Charlotte, NC)

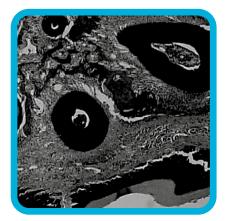
"PIEZOTOME® CUBE is a great way to remove teeth that benefits both the clinician and the patient."

86% of the patients were observed with no postsurgical swelling and 87% had no postsurgical pain.[®]

The healing at the clinical level is much more predictable and much less painful. The amount of demineralization created (...) minimizing trauma, discomfort, and enhancing patient's acceptance.[°] \

PATIENTS EXPERIENCE 50% LESS PAIN AND SWELLING WITH CUBE⁷







- Fast recovery Clinically proven

EQUIPMENT DELIVERED WITH

- 1 CUBE LED handpiece
- 1 torque wrench
- 1 multifunction foot pedal
- 1 irrigation bracket
- 1 handpiece holder
- 5 sterile, disposable irrigation lines
- 5 autoclavable irrigation clips

UNIT DIMENSIONS

- Length 9.8 in x Height 6.3 in x Depth 10.7 in - Weight: 7.7 lbs

FOOT PEDAL DIMENSIONS

- Length 6.8 in x Height 5.5 in x Depth 6.9 in

- Weight: 2.2 lbs

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1. Cha, Hyun-Suk, et al. "Frequency of Bone Graft in Implant Surgery." Maxillofacial Plastic and Reconstructive Surgery, vol. 38, no. 1, 2016, doi:10.1186/s40902-016-0064-2

2. Shanghai Kou QiangYi Xue. Comparative study of complications among routine method, high speed turbine handpiece and piezosurgery device after extraction of impacted wisdom teeth. Shanghai Journal of Stomatology. 2012 Apr;21(2):208-10.

3. The effect of piezoelectric use on open sinus lift perforation: a retrospective evaluation of 56 consecutively treated cases from private practices. Toscano NJ, Holtzclaw D, Rosen PS. J Periodontol. 2010 Jan;81(1):167-71.

4. The Intralift[™]: a new minimal invasive ultrasonic technique for sinus grafting procedures, M. Wainwright, a. troedhan, a. Kurrek, Implants magazine, Dental tribune International, Vol.8, Issue 3, 2007.

5. Ultrasonic PIEZOTOME® surgery: is it a benefit for our patients and does it extend surgery time? A retrospective comparative study on the removal of 100 impacted mandibular 3rd molar. A. Troedhan, A. Kurrek, M. Wainwright. Open Journal of Stomatology, 2011

6. Performance of ultrasonic devices for bone surgery and associated intraosseous temperature development. S. Harder, S. Wolfart, C. Mehl, M. Kern. The International Journal of Oral & Maxillofacial Implants, volume 24, number 3, 2009

7. Goyal M, Marya K, Jhamb A, Chawla S, Sonoo PR, Singh V, Aggarwal A. Comparative evaluation of surgical outcomeafter removal of impacted mandibular third molars using a Piezotome® or a conventional handpiece: a prospective study. British Journal of Oral and Maxillofacial Surgery. 2012;50:556–561

8. The transcrestal hydrodynamic ultrasonic cavitational sinuslift: results of a 2-year prospective multicentre study on 404 patients, 446 sinuslift sites and 637 inserted implants. A. Troedhan, A. Kurrek, M. Wainwright, I. Schlichting, B. Fischak-Treitl, M. Ladentrog. Open Journal of Stomatology, 3, 2013

9. Tissue response during piezocision-assisted tooth movement: a histological study in rats. S. Dibart, C. Yee, J. Surmenian, J-D. Sebaoun, S. Baloul, E. Goguet-Surmenian, A. Kantarci. European Journal of Orthodontics, 36(4):457-64, 2014

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