



More than primary stability.
The new tapered standard.

In combination with:







More than a tapered implant. Perfection with a plus.







Fig. 2

The Straumann® Bone Level Tapered Implant offers excellent primary stability in soft bone and fresh extraction sockets. The tapered form adequately compresses the underprepared osteotomy (Fig. 1). It also lets you effectively master your patient's limited anatomy such as facial undercut, converging root tips, concave jaw structure or narrow atrophied ridges (Fig. 2).

Building on the clinically proven features of the Straumann® Bone Level Implant, our Bone Level Tapered Implant introduces the powerful combination of Roxolid®, SLActive®, Bone Control Design™, CrossFit® connection, prosthetic diversity, plus a tapered implant body.

Enjoy great peace of mind with all our established benefits – and the benefit of the new apically tapered design for excellent primary stability even in compromised bone situations.



ROXOLID® – REDUCING INVASIVENESS WITH SMALLER IMPLANTS

- More treatment options with smaller implants
- Preserves bone and reduces invasive grafting procedures^{1,2}
- Increased patient acceptance with less invasive procedures²



SLActive® – DESIGNED TO MAXIMIZE YOUR TREATMENT SUCCESS AND PREDICTABILITY

- Safer and faster treatment in 3-4 weeks for all indications³⁻¹¹
- Higher treatment predictability in challenging protocols^{1, 13-17}
- Broader treatment possibilities with more confidence^{1–16}

APICALLY TAPERED – EXCELLENT PRIMARY STABILITY EVEN IN COMPROMISED BONE SITUATIONS

- · Full-depth thread to apex for early engagement
- Self-cutting in underprepared sites
- Protecting anatomical structure with round tip

With the Straumann® Bone Level Tapered system, I appreciate the precise drilling instruments, the outstanding engagement of implants even in defect situations, and the very good primary stability.



Dr. Bruno Schmid, Periodontist, ITI Fellow and Chairman ITI Swiss Section; private practitioner in Switzerland



With the Straumann® Bone Level Tapered Implant, I feel a real benefit in terms of achievable primary stability and insertion in narrow ridges.

Dr. Paolo Casentini, ITI Fellow, Implantology and Oral Surgery at Milan University; private practitioner in Italy

PROSTHETIC COMPONENTS OF THE STRAUMANN® BONE LEVEL SYSTEM

- Single- and multi-unit replacements: screw- or cemented-retained
- Edentulous treatment: fixed or removable options
- · Cost-effective and premium: either with conventional or digital workflow

BONE CONTROL DESIGN™ – OPTIMIZED CRESTAL BONE PRESERVATION

- Respects the biological distance and width
- Optimal position of smooth/rough surface interface
- Microgap control
- · Biomechanical implant design

CrossFit® CONNECTION – SIMPLIFIED HANDLING, LEGACY OF BONE LEVEL SYSTEM

- · Easier handling and confidence in component positioning
- Ensured precision against rotation and long-term mechanical stability
- Restorative flexibility

More than predictable.

Convenient and flexible.

Make your surgical procedure and product selection flexible with the Bone Level Tapered Implant (BLT).

Adaptable drilling sequence and new instruments

- Drilling sequence adaptable to anatomic situation (according to bone density)
- All new BLT instruments can be identified by 2 color rings and a tapered tip

Wide product portfolio17

- Endosteal diameters: Ø 3.3, Ø 4.1 and Ø 4.8 mm
- · Length options: 8, 10, 12, 14 and 16 mm
- Material and surface options: Roxolid® SLActive®, Roxolid® SLA® and titanium SLA®



LOXIM™ TRANSFER PIECE

- · Easy handling thanks to snap-in-mounting
- · Correct implant placement thanks to height markings
- · Protecting the inner implant configuration thanks to pre-determined breaking point

REFERENCES

1 Benic GI et al. 'Titanium-zirconium narrow-diameter versus titanium regular-diameter implants for anterior and premolar single crowns: 1-year results of a randomized controlled clinical study.' Journal of Clinical Periodontology 2013; [Epub ahead of print] 2 Freiberger P, Al-Nawas B. 'Non-interventional Study on Success and Survival of TiZr Implants.' EAO 2012 Copenhagen; 305 Posters – Implant Therapy Outcomes, Surgical Aspects. 3 Rupp F et al.: Enhancing surface free energy and hydrophilicity through chemical modification of microstructured titanium implant surfaces. Journal of Biomedical Materials Research A, 76(2):323-334, 2006. 4 DeWild M : Superhydrophilic SLActive® implants. Straumann document 151.52, 2005 5 Maniura K: Laboratory for Materials – Biology Interactions Empa, St. Gallen, Switzerland Protein and blood adsorption on Ti and TiZr implants as a model for osseointegration. EAO 22nd Annual Scientific Meeting, October 17 – 19 2013, Dublin 6 Schwarz F et al.: Bone regeneration in dehiscence-type defects at non-submerged and submerged chemically modified (SLActive®) and conventional SLA® titanium implants: an immunohistochemical study in dogs. J Clin.Periodontol. 35.1 (2008): 64–75. 7 Rausch-fan X et al.: Differentiation and cytokine synthesis of human alveolar osteoblasts compared to osteoblast-like cells (MG63) in response to titanium surfaces. Dental Materials 2008 Jan;24(1):102-10. Epub 2007 Apr 27. 8 Schwarz F et al.: Histological and immunohistochemical analysis of initial and early osseous integration at chemically modified and conventional SLA® titanium implants: Preliminary results of a pilot study in dogs. Clinical Oral Implants Research, 11(4): 481-488, 2007. 9 Lang, NP et al.: Early osseointegration to hydrophilic and hydrophobic implant surfaces in humans. Clin Oral Implants.Res 22.4 (2011): 349–56. 10 Raghavendra S et al.: Int. J. Oral Maxillofac. Implants. 2005 May–Jun;20(3):425–31. 11 Oates TW et al.: Enhanced implant stability with a chemically modified SLA® surface: a randomized pilot study. Int. J. Oral Maxillofac. Implants. 2007;22(5):755–760. 12 Schwarz F et al.: Bone regeneration in dehiscence-type defects at chemically modified (SLActive®) and conventional SLA® titanium implants: a pilot study in dogs. J Clin.Periodontol. 34.1 (2007): 78–86 13 Lai HC et al. : Bone apposition around two different sandblasted, large-grit and acid-etched implant surfaces at sites with coronal circumferential defects: An experimental study in dogs. Clin. Oral Impl. Res. 2009;20(3):247–53. 14 Buser D et al.: Stability of Contour Augmentation and Esthetic Outcomes of Implant-Supported Single Crowns in the Esthetic Zone: 3-Year Result of a Prospective Study With Early Implant Placement Post Extraction. J Periodontol. 2011 March; 82(3): 342-9. 15 Buser D et al.: Long-term Stability of Early Implant Placement with Contour Augmentation. J Dent Res. 2013 Dec;92(12 Suppl):1765-825. 16 Nicolau P et al.: Immediate and early loading of Straumann® SLActive implants: A Five Year Follow-up. Presented at the 19th Annual Scientific Meeting of the European Association of Osseointegration – 6-9 October 2010, Glasgow 17 Some product may not be available in all countries. Please check with your local sales representative for details

International Headquarters

Institut Straumann AG Peter Merian-Weg 12 CH-4002 Basel, Switzerland Phone: +41 (0)61 965 11 11

Fax: +41 (0)61 965 11 01 www.straumann.com