Patient Information

When implants become visible
Dental treatments are a matter of trust

Our experience and expertise is something you can rely on
Over 10 million patients worldwide have been treated with Geistlich biomaterials. Let us share some facts with you about these products:

- Geistlich products are scientifically proven top quality Swiss biomaterials.
- Meticulous selection of raw materials, together with a strictly controlled manufacturing process, allows Geistlich biomaterials to conform to high safety requirements and ensures high tolerability.

Geistlich Biomaterials
- Your worldwide no. 1 reference
- Outstanding quality
- High biofunctionality

- These natural biomaterials were evaluated in more than 1,400 studies from countries all over the world.
- The safety has been assessed by international and national authorities.

Why is a treatment beneficial?

Smile again
Aesthetically pleasing outcomes & maintenance of healthy teeth.

Pioneering solution
You may avoid complicated procedures in the future.

Stable outcomes
Preventive procedures following tooth loss save you time and possible complications in the long-term by preventing further grafting procedures.

Implant exposure are obvious and jeopardize the aesthetic appearance.

Aesthetically pleasing outcome 1 year after surgery.

Prof. Sculean (Berne, Switzerland)
How can these bone defects be treated?

There are two clinical situations in which this happens\textsuperscript{14}

\begin{itemize}
  \item The bone defect is similar to a “window” where a part of the implant is exposed and is in direct contact with the gums.
  \item The implant is not surrounded by bone on the outer side and is clearly visible.
\end{itemize}

Geistlich Bio-Oss\textsuperscript{®} and Geistlich Bio-Gide\textsuperscript{®} are applied to the defect to support bone regeneration.\textsuperscript{15}

Bone regeneration with Geistlich biomaterials stabilizes the implant and gives you a pleasant aesthetic outcome.\textsuperscript{12}

In both cases the surgery starts by uncovering the defect.
Biomaterials are scaffolds that can be implanted to replace or repair missing tissue.

Biomaterials, such as bone substitutes, collagen membranes and matrices, are used regularly in regenerative dentistry to support the body's own tissue regeneration process effectively.

**Geistlich Bio-Oss® promotes effective bone regeneration**

› Providing a foundation for your body to regenerate bone.
› Made from the mineral part of the bones originating from Australian and New Zealand cattle.
› Swiss quality, refined through 30 years of experience.

**Geistlich Bio-Gide® protects & supports wound healing**

› Supports wound healing and provides a barrier for optimum regeneration of bone.
› Made of collagen obtained from healthy pigs.
› Swiss quality, refined through 20 years of experience.
Post-operative care is an area where you can contribute to the success of your procedure.

👍 Do’s
› Maintain your oral hygiene and use antibacterial mouth wash as prescribed by your dentist.
› Treat swelling with moist-cold pads.
› Consult your dentist regarding pain.
› Make sure that you visit your dentist for a follow-up appointment.

👎 Don’t’s
› Do not neglect your oral hygiene.
› Do not brush or floss at the site of surgery for 1 week after surgery. A toothbrush with especially soft bristles can usually be used for cleaning the teeth in the vicinity of the wound.
› Do not drink coffee or alcohol and do not smoke cigarettes for 2–3 days after surgery.
Biomaterials from Geistlich Pharma AG are the most frequently used materials in regenerative dental medicine throughout the world:

More than 15 million
**Geistlich Bio-Oss®**

More than 6.5 million
**Geistlich Bio-Gide®**

More than 200,000
**Geistlich Mucograft®**

More than 15,000
**Geistlich Fibro-Gide®**

References
1. Millennium Research Group, Dental Biomaterials North America, 2018 (Market research).
2. Millennium Research Group, Dental Biomaterials Europe, 2016 (Market research).
3. ISO 13485 certificate, design & development.
4. ISO 9001 certificate, distribution.
8. Mordenfeld A. et al., Clin Oral Implants Res. 2010 Sep;21(9): 961–70. (Clinical study)
15. Degidi M et al., Clin Implant Dent Relat Res. 2009 Sep;11(3):178-82. (Clinical study)
18. Based on the number of units currently sold. Data on file (Wolhusen, Switzerland)