

iRES ⁺ complete
solutions
for oral
surgery

شرکت فرادید دانش



نمایندگی انحصاری
ایمپلنت IRES سوئیس

در ایران

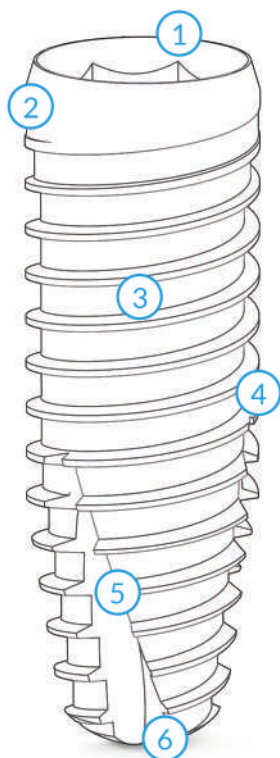


The exclusive
representative
of Switzerland
IRES implants
in Iran



FARADID DANESH

VOLUTION



1. Hexagonal internal connection with Friction Fit; 2. Machined neck with double platform switching and profile with toothed hermetic cover. It distributes the pressure on the cortical bone and ensures a seal that prevents the penetration of bacteria and the onset of peri-implantitis; 3. Implant with ogival design (bullet type). It ensures a higher penetration capacity; 4. Pronounced threads with cutting profile. They provide higher primary stability and self-tapping properties. Higher stability in soft bone $\frac{3}{4}$ and less compression in hard bone $\frac{1}{2}$; 5. Spiral counter-unload furrows. They increase primary stability and prevent the progression of peri-implantitis, interrupting the spires that act as a chute for bacteria; 6. Tip with self-perforating auger design with grinding effect. It produces bone shavings and stimulates osteogenesis.

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1. Platform switching
2. Implant with ogival design (bullet type)
3. Pronounced spires with cutting profile with 10° and 20°. Higher primary stability
4. 2 spiral counter-unload furrows
5. Tip with self-perforating auger design with grinding effect

Ø	Volution SVB
Ø 3.3	8 h 10 11.5 13 16
Ø 3.75	h 6.5 8 10 11.5 13 16
Ø 4.1	h 6.5 8 10 11.5 13 16
Ø 4.7	h 6.5 8 10 11.5 13 16
Ø 5.2	h 6.5 8 10 11.5 13

INTERNAL HEX		2.5 mm Bone level		Ø 3.7 - 4.1 - 4.7 - 5.2		
Ø	Implant thread		Connection	Platform	Hex	Thread
3.75 - 4.1 - 4.7 - 5.2	Large double thread 0.9 mm		Internal hex	3.5 mm	2.5 mm	1/72
Ø 3.75		Ø 4.1 e Ø 4.7		Ø 5.2		
Heights (mm)	6.5 8 10 11.5 13 16		6.5 8 10 11.5 13 16		6.5 8 10 11.5 13	
Material	Titanium Gr. 5		Titanium Gr. 4		Titanium Gr. 4	

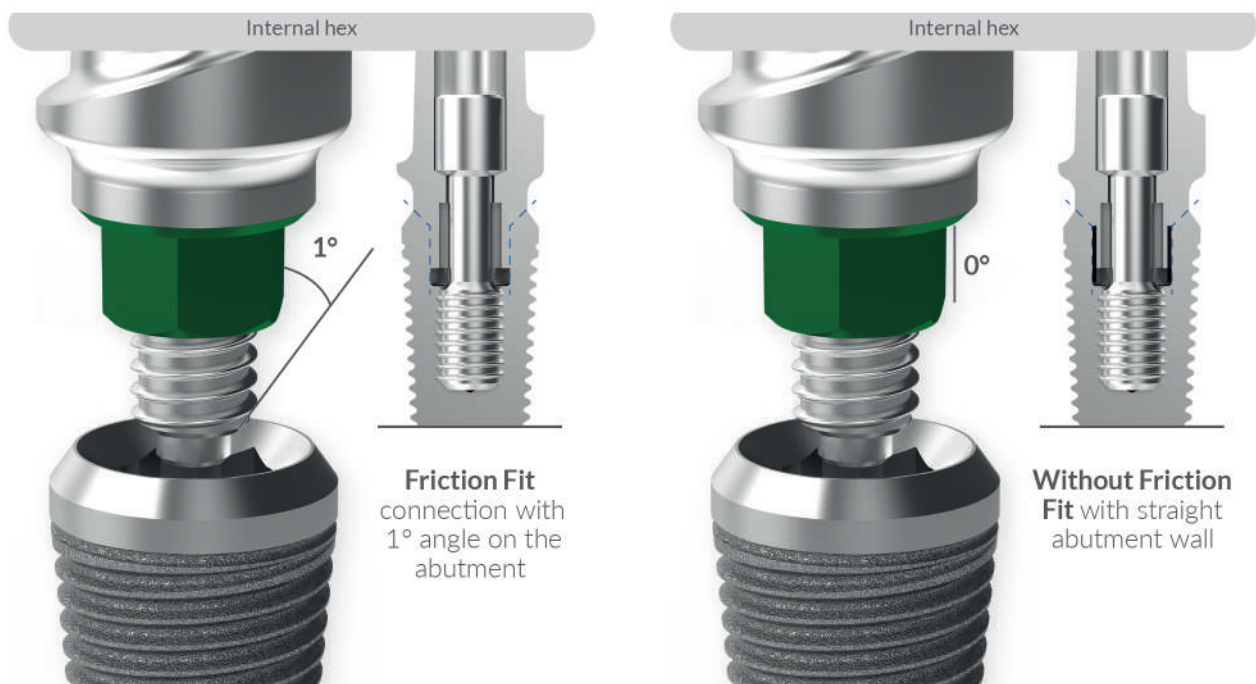
INTERNAL HEX 2.1 mm Bone Level			Ø 3.3		
Ø	Implant thread	Connection	Platform	Hex	Thread
3.3	Large double thread 0.9 mm	Internal hex	3.2 mm	2.1 mm	1/72
Ø 3.3					
Heights (mm)	8 10 11.5 13 16				
Material	Titanium Gr. 5				

IMPLANT CONNECTION

rationalization of prosthetic components

Prosthetic components with Friction Fit connection have been developed for SVB implant systems with internal hex connection. This connection ensures a "cold fusion" between implant and abutment if the retaining

screw has been tightened at 30 Ncm. It eliminates micro movements and reduces bacterial infiltration between implant and abutment.



DEFINITIVE STRAIGHT ABUTMENTS | ANATOMIC

S1BRS1 screw included | Material TI-6Al-4V

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

Anatomic

Ø 4.5 mm



S1B1 [X] 45

Code	h (mm)
S1B1145	1
S1B1345	3

Internal Hex 2.1 mm

Implant ø 3.3

Anatomic

Ø 4 mm



S1BN1 [X] 40

Code	h (mm)
S1BN1140	1
S1BN1340	3

ANATOMIC DEFINITIVE ANGLED ABUTMENTS

S1EHNRS2 screw included | Material TI-6Al-4V

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

15°

Ø 4.5 mm



S1B2 [X] 1545

Code	h (mm)
S1B211545	1
S1B231545	3

Internal Hex 2.1 mm

Implant ø 3.3

15°

Ø 4 mm



S1BN2 [X] 1540

Code	h (mm)
S1BN211540	1
S1BN231540	3

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

25°

Ø 4.5 mm



S1B2 [X] 2545

Code	h (mm)
S1B212545	1
S1B232545	3

Internal Hex 2.1 mm

Implant ø 3.3

25°

Ø 4 mm



S1BN2 [X] 2540

Code	h (mm)
S1BN212540	1
S1BN232540	3

CASTABLE ABUTMENTS

S1BRS1 screw included

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

Gold base
POM-C /
AU&PGM
Ø 5 mm



S1B3GA50*

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

POM-C
Ø 4.5 mm



S1B3PC45

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

Rotating
POM-C
Ø 4.5 mm



S1B3PCR45

Internal Hex 2.5 mm

Implant ø 3.7 - 4.1 - 4.7 - 5.2

Titanium base
TI-6Al-4V



S1B3PTC45

CASTABLE ABUTMENTS

S1BRS1 screw included

Internal Hex 2.1 mm

Implant ϕ 3.3

Gold base
POM-C /
AU&PGM
 ϕ 4.5 mm



S1BN3GA35 *

Internal Hex 2.1 mm

Implant ϕ 3.3

POM-C
 ϕ 3.5 mm



S1BN3PC35

Internal Hex 2.1 mm

Implant ϕ 3.3

Rotating
POM-C
 ϕ 3.5 mm



S1BN3PCR35

Internal Hex 2.1 mm

Implant ϕ 3.3

Titanium base
TI-6Al-4V



S1BN3PTC45

iRETOR (Ring and cap not included)

TIN Treatment on the gold part

Internal Hex 2.5 mm

Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

TIN



S1B8 [XX]

Code	h (mm)
S1B80	0
S1B81	1
S1B825	2.5
S1B835	3.5
S1B845	4.5
S1B865	6.5

iRETOR ACCESSORIES

Internal Hex 2.5 mm

Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Analog for
iRETOR®
female coupling
Q.ty: 4
Al



8530

Indirect
impression
tear pin for
iRETOR®
Q.ty: 4
Al



8505

Set of cups and
rings for parallel
implants
Q.ty: 1
Ti | Nylon



S1B85

Resistant
male
(1.8 kg)
Q.ty: 4



S1B8518

Light
male
(1.2 kg)
Q.ty: 4



S1B8512

Extralight
male
(0.6 kg)
Q.ty: 4



S1B8506

BALL ABUTMENTS

Cap e Calt included | TIN Treatment on the gold part | Material TI-6Al-4V

ϕ 4 mm



S1B6 [X]

Code	h (mm)
S1B61	1
S1B62	2
S1B63	3
S1B64	4
S1B65	5

Containment
ring



CAH

Nylon
containment
cap



CALT

HEALING SCREWS with FLARED PROFILE

Material TI-6Al-4V

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

ϕ 3.5 mm



S1B35 [xx] HCC

Code	h (mm)
S1B3530HCC	3
S1B3545HCC	4.5
S1B3560HCC	6

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

ϕ 6 mm



S1B60 [xx] HCC

Code	h (mm)
S1B6030HCC	3
S1B6045HCC	4.5

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

ϕ 5 mm



S1B50 [xx] HCC

Code	h (mm)
S1B5030HCC	3
S1B5045HCC	4.5
S1B5060HCC	6

Internal Hex 2.1 mm Implant ϕ 3.3

With flared profile
 ϕ 3.5 mm



S1BN35 [xx] HCC

Code	h (mm)
S1BN3510HCC	1
S1BN3530HCC	3
S1BN3545HCC	4.5
S1BN3560HCC	6

Internal Hex 2.1 mm Implant ϕ 3.3

ϕ 3.5 mm



S1BN35 [xx] HC

Code	h (mm)
S1BN3530HC	3
S1BN3545HC	4.5
S1BN3560HC	6

Internal Hex 2.1 mm Implant ϕ 3.3

ANALOG

Material TI-6Al-4V

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Analog



S1BIA

Internal Hex 2.1 mm Implant ϕ 3.3

Analog



S1BNIA

INDIRECT IMPRESSION TRANSFER

S1BRS1-screw included | Material TI-6Al-4V

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Multifunction
abutment
 ϕ 5 mm
with flared
profile



S1B1M50CL*

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Multifunction
abutment
 ϕ 5 mm



S1B1A50 **

Internal Hex 2.1 mm Implant ϕ 3.3

Multifunction
abutment
 ϕ 3.5 mm
with flared
profile



S1BN1M35C

Internal Hex 2.1 mm Implant ϕ 3.3

Multifunction
abutment
 ϕ 3.5 mm



S1BN1A35

DIRECT IMPRESSION TRANSFER

S1BDTRS screw included | Material TI-6Al-4V

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

ϕ 3.5 mm



S1BDT35*

Internal Hex 2.1 mm Implant ϕ 3.3

Multifunction
abutment
 ϕ 3.2 mm



S1BN1M35L*

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

ϕ 5 mm



S1BDT50*

Internal Hex 2.1 mm Implant ϕ 3.3

ϕ 3.5 mm



S1BNDT35*

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Multifunction
abutment
 ϕ 5 mm
with flared
profile



S1B1M50CL*

TEMPORARY STRAIGHT ABUTMENTS

S1BRS1 screw included

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Rotating
TI-6Al-4V
 ϕ 4 mm



S1B140PR

Internal Hex 2.1 mm Implant ϕ 3.3

Anti rotation
TI-6Al-4V
 ϕ 3.5 mm



S1BN135P

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

PEEK
 ϕ 4 mm



S1B140PP

Internal Hex 2.1 mm Implant ϕ 3.3

PEEK
 ϕ 3.5 mm



S1BN135PP

Internal Hex 2.5 mm Implant ϕ 3.7 - 4.1 - 4.7 - 5.2

Anti rotation
TI-6Al-4V
 ϕ 4 mm



S1B140P

Internal Hex 2.1 mm Implant ϕ 3.3

Rotating
TI-6Al-4V
 ϕ 3.5 mm



S1BN135PR

SURFACE TREATMENT

SLA type

There is a relevant scientific literature* on how surface roughness characteristics influence cell behaviour. Compared to a smooth surface, topographical patterns smaller in size than a fibroblast cell (micro and nano topography) orient the arrangement of the cells and stimulate osteoblastic and platelet activity, accelerating the production of extracellular matrix and bone regeneration, and therefore the osseointegration of the dental implant. The three fundamentals of surface treatment of dental implants from a biological point of view are:

- 1] control of surface topography to stimulate cellular response in an osteogenic direction;
- 2] control of the chemical composition of the surface to promote cell colonization;
- 3] control of biological contamination from adherent endotoxins so as not to interfere with the natural inflammatory response. For the surface treatment a sand-blasting process was used followed by a double acid attack. In the images, increasing the magnification, it can be seen how the macroscopic aspects of the screw (spire, cutting SLA surface

treatment edge) are not affected by the treatment and that the surface is free from processing residue. The dual-beam roughness typical of SLA treatment can be clearly observed, which contains large cavities due to large grit blasting on which is superimposed the micro-roughness due to treatment with acids. The micro-roughness illustrated in the figures highlights the typical three-dimensional topography, which gives these surfaces "sponge-like" characteristics that are the basis of their excellent clinical performance. In fact, the very short peak-to-peak distance, about 1 micrometer, stimulates both the activity of osteogenic cells and the capillary penetration of the blood in the surface structure, offering very favorable characteristics to stimulate bone regeneration, as described in many articles on this topic. This unique combination of long-range roughness (large grit sand-blasting) and short-range roughness (acid etching) is a substrate favorable to cell regrowth that adequately promotes cell differentiation. The level of roughness is $Ra\ 1.42 \pm 0.12$.

NECK MACHINED

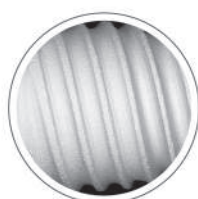
C

Surface treatment on the body implant

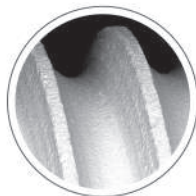
HYALURONIC ACID

HYHA

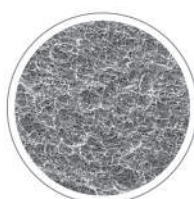
Partial surface treatment on the body implant with hyaluronic acid.
Cold plasma decontamination*



MAG
52 X
WD
11.5 mm
EHT
20.00 kV
Signal A
CZ BSD



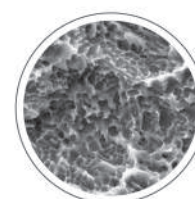
MAG
200 X
WD
11.0 mm
EHT
20.00 kV
Signal A
CZ BSD



MAG
1.50 K X
WD
11.5 mm
EHT
20.00 kV
Signal A
SE1



Sa 0,50 µm
overall mean value on
a measuring area of
30x30 µm
cold plasma
decontamination



Sa 1,90 µm
overall mean value on
a measuring area of
30x30 µm
sand-blasting, double
etching, cold plasma
decontamination

* Valutazione della composizione chimica superficiale, della morfologia, della citotossicità e dell'adesione cellulare su impianti dentali. G. Cascardo, C. Castiell, Doctor OS 2005 Nov-Dic; 16 (9): 1091. Valutazione comparativa del trattamento di superficie in 5 sistemi implantari. M. Biasotto, M. Cadenaro et al. Università degli studi di Trieste, Quintessence International, Anno 18 - Maggio/Giugno 2002. RAPPORTO ISTISAN 01/15 - Valutazione del trattamento superficiale sulle prestazioni meccaniche a fatica di impianti in titanio plasma-sprayed e titanio sabbiato e mordenzato. Rossella Bedini, Giorgio de Angelis, Marco Tallarico, Rosario Ialpi, Umberto Romeo, Giuseppe di Cintio 2001, 33 p. RAPPORTO ISTISAN 08/32 - Valutazione microtomografica dell'area di

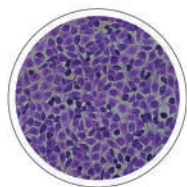
possibile contatto osseo di sei tipologie diverse di impianti dentali. Rossella Bedini, Raffaella Pecci, Fabio Di Carlo, Alessandro Quaranta, Francesca Rizzo, Manlio Quaranta, G. Heinke, W. Schulte, B. d'Hoedt, P. Griss, C.M. Büsing, D. Stock, The influence of fine surface structures on the osseointegration of implants. The International Journal of Artificial Organs 1982; 5(3): 207-212. Guy, M.J. McQuade, M.J. Scheidt, J.C. McPherson III, J.A. Rossmann, T.E. Van Dyke. In vitro attachment of human gingival fibroblasts to endosseous implant materials. Journal of Periodontology 1993 Jun; 64(6): 542-546.

CYTOTOXICITY TEST

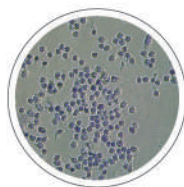
EN ISO 10993-5: 2009, Valutazione Biologica dei Dispositivi Medici - Prove per la citotossicità in vitro

After treatment and decontamination, the implants proved to be perfectly cytocompatible, that is devoid of cytotoxic effects against L929 fibroblasts. In all wells, the cells always showed density and morphology fully comparable with those of the negative control. The fibroblasts proliferate homogeneously in contact with the implants as the

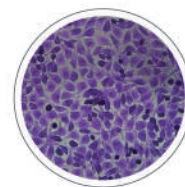
Material does not release any cytotoxic element. Moreover, multinucleated giant cells were never shown in significantly higher number than the negative control, indicating the absence of effects of an inflammatory type.



negative control



positive control



examined control

COLD PLASMA DECONTAMINATION

After the surface treatment, the implants are cleaned to remove processing residues by washing them with solvents and then subjecting them to a process of surface decontamination with cold plasma (Argon). The partially ionized Argon atoms (inert gas) act as an additional atomic sand-blasting that promotes the removal of organic contaminants and activates the ionization of surface atoms of titanium, improving the wettability of the implant. The treatment conditions adopted on shape1 implants offer the best characteristics considered important, according to the state of current knowledge*, in the

processes of implant healing, both in terms of surface morphology and in terms of chemical composition (surface cleaning). Plasma cleaning, packaging in a controlled environment, the absolute respect of "clean" procedures, quality control tests of during the manufacturing process, play a fundamental role in the control of adherent endotoxins (biological cleaning), the main agent of immunological response to implant surfaces.

* Valutazione del rapporto tra costo e qualità della pulizia superficiale di alcuni sistemi implantari in commercio
Marco Morra, Clara Cassinelli, Giovanna Cascardo, Daniele Bollati, Nobil Bio Ricerche srl Via Valcastellana 26, 14037, Portacomaro (AT)

M. Morra, C. Cassinelli, Evaluation of Surface Contamination of Titanium Dental Implants by Lu-Sem: Comparison with XPS Measurements Surface and Interface Analysts, Vol. 25, 983-984 (1997).

STERILIZATION & PACKAGING

To preserve its integrity, the dental implant is housed in a vertical position inside a titanium cylinder anchored, by means of the closing cap, to the respective vial made of borosilicate glass for pharmaceutical use, complying with the European Pharmacopoeia in force. This vial really ensures the neutrality of the primary packaging due to the absence of release of contaminants during the sterilization phase. It is inserted in a blister of transparent polyglass sealed with heat-sealing lacquer-based Tyvek and packed in a cardboard box that also contains the instructions for use and the labels for the patient records, on which are printed the data that allow product traceability (code and batch number). All the product packaging Materials have

been tested, approved and certified.

Shape1® implants are supplied sterile, in a pack that allows their stability to be guaranteed for 5 years. The sterilization process is performed with gamma rays

respecting the standards in force by qualified suppliers who use automated, safe and reliable systems, with continuous microbiological monitoring of the process.



*European Pharmacopoeia, current edition, 3.2.1 Glass containers for pharmaceutical use.

PROSTHETIC INSTRUMENTS PROTOCOL AND SURGICAL KIT

one surgical kit for all the implant systems

The purpose of surgical trays is to store the instruments used to insert dental implants. The kit can be carried, sterilized and kept in a horizontal position with the lid closed. All the instruments must be cleaned and sterilized before the first use. The surgical kit and instruments are not sterile at the time of delivery.



CLEANING

- 1- Dismantle all the compound parts.
- 2- Rinse abundantly with cold or lukewarm water for 2-5 minutes.
- 3- Leave the instruments for 10 minutes in an ultrasonic cleaner with a neutral pH enzymatic detergent diluted in water according to the product instructions.
- 4- Wash the instruments with water for 3 minutes.

STERILIZATION

The guidelines for sterilization are listed below.
Exceeding these sterilization limits may cause deterioration of the plastic components.

Type of cycle (value)	Temperature (°C - F)	Exposure	Drying time
Pre-vacuum	132 / 270	3 minutes	30 minutes
Pre-vacuum	134 / 273	18 minutes	30 minutes
Gravity	121 / 250	80 minutes	30 minutes

THE DRILLS

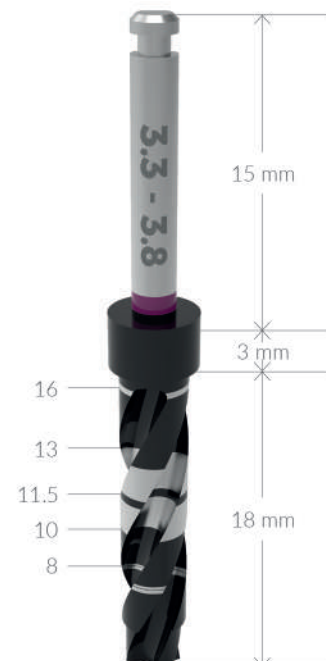
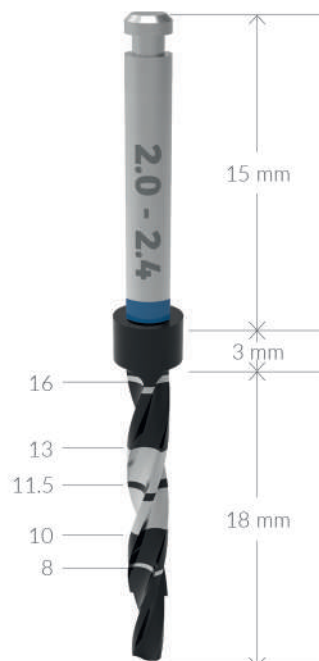
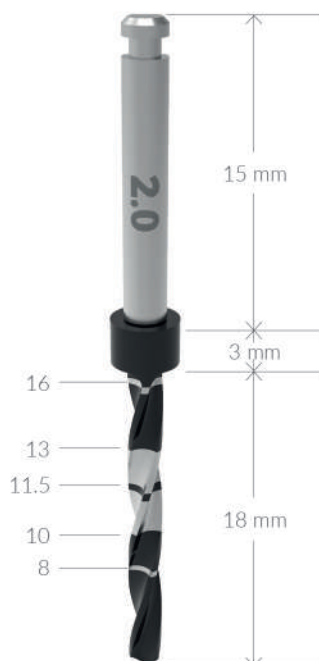
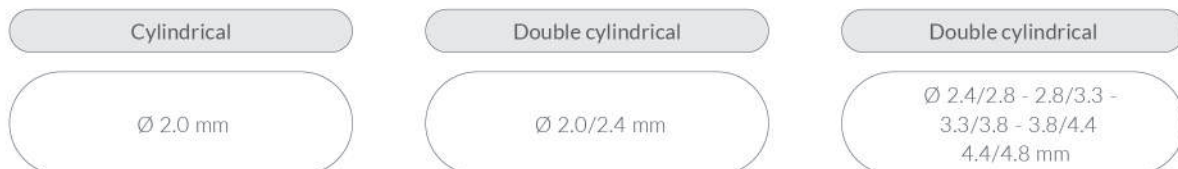
For a proper osteotomy and to maintain the integrity of bone quality, the maximum recommended speed is 800rpm with direct input on drill of saline solution to facilitate cooling. All drills are made of medical stainless steel and subjected to hardening heat treatment. Maximum recommended number of use of the devices 30 times.

The helical milling cutters have reference laser markings that identify the depth to reach, until 8mm

with a thin white line, from 10 to 13mm with a white band in which at half is identified the 11.5mm height, and finally a thin white line for the 16mm. This system gives a clear and intuitive glance of the depth level reached by the drill. 4.5 and 6.5mm are not present to avoid confusion in reading the demarcation lines, and being these measures close to the nerve, it is always recommended to use stop by 4.5 and 6.5mm.



The drills from 2.0 to 2.8 / 3.3 have a sharp apex, The drills from 3.3/3.8 - 3.8/4.4 - 4.4/4.8 have a flat apex, they do not increase the height of the cut, but are only used to widen the osteotomy. They must not be used for cutting, but as an aid for inserting the implant.



THE COUNTERSINKS

The countersinks are used when there is the need to enlarge the initial part of the hole created to adapt this shape to the neck of the implant to be inserted. The maximum recommended speed is 300rpm with direct input on drill of saline solution to facilitate cooling. The countersink should be used in perfect axis with the osteotomy to avoid its ovalization in the coronal part.

The countersinks present two laser markings that identify the depth to be reached on the basis of the bone consistency, at 1.4mm for a "D3" bone, at 2.8mm for both "D2" and "D1" bones. Above the marking at 2.8mm, the countersink continues with a cylindrical geometry that does not compromise the osteotomy although more deeply inserted.



THE STOPS

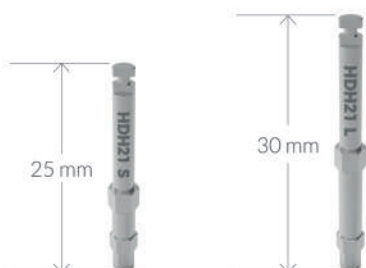
The length of the stops ranges from 4.5mm to 13mm and they are available for all the implant lengths. 33/38

- 38/44 - 44/48 are flathead drills. They can not be used to cut, but only to help you to insert the implant.



RATCHET 10/100 NCM and CONNECTORS

In the kit all the connectors have a handpiece attack that may be used both in manual mode and with the ratchet, thanks to the special washer (WH2). The insertion torque for the immediate loading will be in the range from 35 to 50Ncm. For the conventional load the insertion torque should never exceed 70Ncm.



1. The new ratchet uses connectors with HANDLE ATTACK

2. the DRIVE HEXAGON confers greater solidity during the tightening phase

3. POSITION HEXAGON during the insertion allows to see the internal positioning of the hexagon

4. HEXAGON CONNECTION that reaches the stop of the system, has a steel retention ring reinforced and raised both to avoid interferences during the implant insertion and to reduce the wear of the retention



RATCHET ADAPTOR

Code: **WH2**
Ø 8 mm reinforced



REVERSE FIXED RATCHET + RATCHET WRENCH

Code: **TW4**

Reverse fixed ratchet

It allows to screw and unscrew without having to pull out and turn the adapter

Ratchet wrench

mounted on the reverse ratchet, it allows to measure up to 100Ncm2 without breaking the rod through the stop final race



REVERSE FIXED RATCHET + RATCHET ADAPTOR + RATCHET WRENCH

Code: **TWA2**



Housing for 8mm washer to confer greater resistance to higher torque.



Reverse to change direction of unscrewing and screwing without having to remove and replace the ratchet.



Under the 100Ncm is present a safety catch to prevent the leakage of the dragging arm, avoiding its breakage.

heights from 8 to 16 mm

Volution


SVB

Ø	Heights
3.3	h 10 - 11.5 - 13 - 16 mm
3.7	h 8 - 10 - 11.5 - 13 - 16 mm
4.1	
4.7	
5.2	h 8 - 10 - 11.5 - 13 mm

VOLUTION

Ø 3.3

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 3.3 countersink




	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•						
Medium d3/d2	•	•	•					•
Compact d1	•	•	•					•

VOLUTION

Ø 3.7

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 3.7 countersink



	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•					
Medium d3/d2	•	•	•	•				•
Compact d1	•	•	•	•				•

VOLUTION

Ø 4.1

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 4.1 countersink

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•	•				
Medium d3/d2	•	•	•	•	•			•
Compact d1	•	•	•	•	•			•

VOLUTION

Ø 4.7

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 4.7 countersink

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•	•	•			
Medium d3/d2	•	•	•	•	•	•		•
Compact d1	•	•	•	•	•	•		•

VOLUTION

Ø 5.2

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 5.2 countersink

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•	•	•	•		
Medium d3/d2	•	•	•	•	•	•	•	•
Compact d1	•	•	•	•	•	•	•	•

Volution

SVB

Ø	Heights
3.7	h 6.5 mm
4.1	
4.7	
5.2	

VOLUTION

short implants

Ø 3.3

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 3.3 countersink

	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•		•					
Medium d3/d2	•		•	•				•
Compact d1	•		•	•				•

VOLUTION

short implants

Ø 3.7

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 3.7 countersink


	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•		•				
Medium d3/d2	•	•		•	•			•
Compact d1	•	•		•	•			•

VOLUTION

short implants

Ø 4.1

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 4.1 countersink




	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•		•			
Medium d3/d2	•	•	•		•	•		•
Compact d1	•	•	•		•	•		•

VOLUTION

short implants

Ø 4.7

Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 4.7 countersink




	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•	•		•		
Medium d3/d2	•	•	•	•		•	•	•
Compact d1	•	•	•	•		•	•	•

VOLUTION

short implants

Ø 5.2

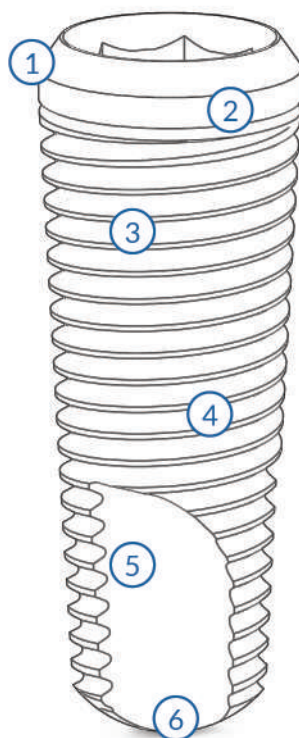
Sink countersink: up to 1.4mm for d3 medium bone/ up to 2.8mm for d2 medium bone and d1 compact bone
Use 5.2 countersink



	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7	Step 8
Bone	Lance drill	Drill 2.0 2.4	Drill 2.4 2.8	Drill 2.8 3.3	Drill 3.3 3.8	Drill 3.8 4.4	Drill 4.4 4.8	Countersink
Soft d4	•	•	•	•		•		
Medium d3/d2	•	•	•	•		•	•	•
Compact d1	•	•	•	•		•	•	•

Other IRES implant systems

SHAPEONE



Code	Thread	Connection	Platform	Hex	Treatment
B	Triple	Internal hex	3.5 mm	2.5 mm	C - HYHA
Tn	Triple	Internal hex	3.5 mm	2.5 mm	C
T	Triple	Internal oct	4.8 mm	3.1 mm	C

EXCELLENT PRIMARY STABILITY EVEN IN D4 TYPE BONE

1. Platform switching; 2. 1 mm machined neck to protect from bacterial attacks; 3. Tapered self tapping with cutting coronal thread for a better force discharge on cortical bone to provide excellent stability even in few millimeters; 4. 55° triple thread over the entire body implant with a pitch of 1,8 mm 4 (0,6 mm/thread); each turn allows to go down of 1,8mm, speeding up the insertion phase; 5. 3 apical aggressive cuts provide a better primary stability and centering of the implant and the possibility to change direction during its insertion; 6. Aggressive apex but rounded to protect the Schneider's membrane.



S1B -C
Bone level



S1B -HYHA
Bone level



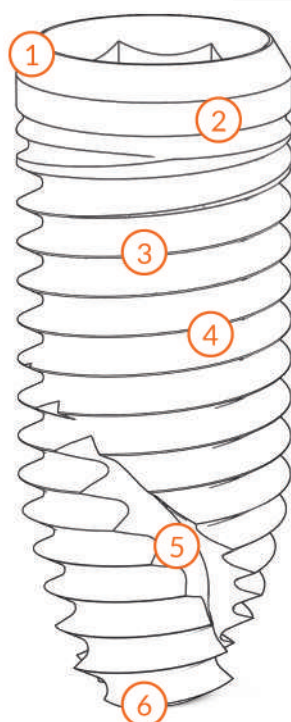
S1TN
Bone level o Tissue level



S1T
Tissue level

iMAX

Code	Thread	Connection	Platform	Hex	Treatment
NHSI 3.3	Double, fine pitch	Internal hex	3.2 mm	2.1 mm	C - HYHA
NHSI	Double, fine pitch	Internal hex	3.5 mm	2.5 mm	C - HYHA
NHSE 3.3	Double, fine pitch	External hex	3.5 mm	2.4 mm	C - HYHA
NHSE	Double, fine pitch	External hex	4.1 mm	2.7 mm	C - HYHA



UNIVERSAL IMPLANT, FOR ALL TYPES OF BONE

1. Platform switching; 2. 1 mm machined neck; 3. Cylindrical body; 4. 55° double thread over the entire body implant with a pitch of 1,2 mm 4 (0,6 mm/thread); each turn allows to go down of 1,2mm, speeding up the insertion phase; 5. 2 helicoidal apical cuts; 6. Conical flat-tip apex



NHSI -C
Bone level



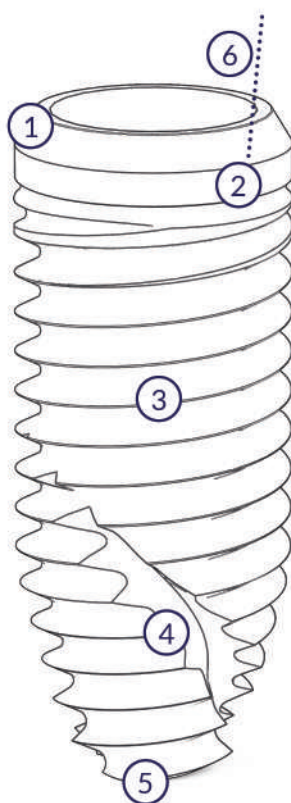
NHSI -HYHA
Bone level



NHSE -C
Bone level



NHSE -HYHA
Bone level

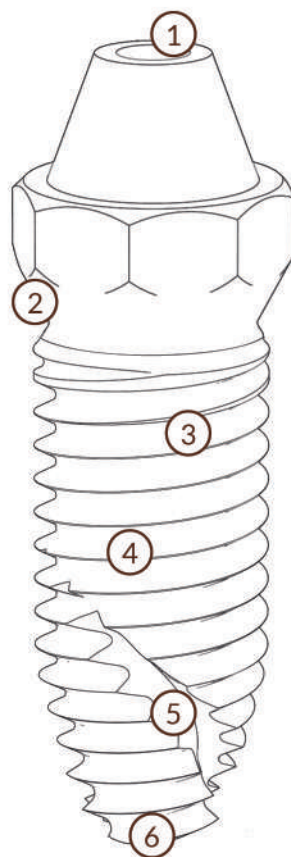


Code	Thread	Connection	Platform	Hex	Treatment
NHSIC	Double, fine pitch	Cone-morse	Narrow	2.1 mm	C
NHSIC	Double, fine pitch	Cone-morse	Regular	2.5 mm	C

THE MOST RELIABLE CONNECTION WITH DIFFERENT EMERGENCE PROFILES

1. Platform switching, unique prosthesis for all the diameters; 2. 1 mm machined neck; 3. 55° double thread over the entire body implant with 5 a pitch of 1,2 mm (0,6 mm/thread); each turn allows to go down of 1,2mm, speeding up the insertion phase; 4. 2 helicoidal apical cuts; 5. Conical flat-tip apex; 6. 5° cone inclination on implant and abutment

It's proven that the cone-morse connection creates smaller slits (1µm) of bacteria (1,1-1,5µm length, 2-6µm diameter). Cone-morse connection absorbs vibration and chewing stress by eliminating the unscrewing of the screws (0,37%)



Code	Thread	Connection	Platform	Angle	Treatment
NHSM 00	Double	One Piece	4.3 mm	0°	HYHA
NHSM 18	Double	One Piece	4.3 mm	18°	HYHA
NHSM 30	Double	One Piece	4.3 mm	30°	HYHA

ONEPIECE FOR IMMEDIATE LOADING

1. Hole for retaining screw; 2. 1.5mm of neck; 3. Cylindrical body; 4. 55° double thread over the entire body implant with a pitch of 1,2 mm 3 (0,6 mm/thread); each turn allows to go down of 1,2mm, speeding up the insertion phase; 5. 2 helicoidal apical cuts; 6. Conical flat-tip apex

The use of the retention screw for MUA components, from the current 1.4 mm to 1.72 mm to eliminate the unscrewing possibility of MUA components. Smaller size both of the cone and the supporting surface, from 4.8 mm to 4 mm. Reduced footprint for the prosthesis benefit.



iMAX -NHSM00
Tissue level



iMAX -NHSM18
Tissue level



iMAX -NHSM30
Tissue level



دفتر اصفهان

03136285453

03136256537

خیابان محتشم کاشانی
روبروی پست بانک ، مجتمع
نوید ، طبقه 2

دفتر تهران

02158739

تهران، ملاصدرا، شیخ بهایی
شمالی، نرسیده به میدان
پیروزان نبش دوازده متری
دوم ، ساختمان عرفان
طبقه همکف ، واحد 1