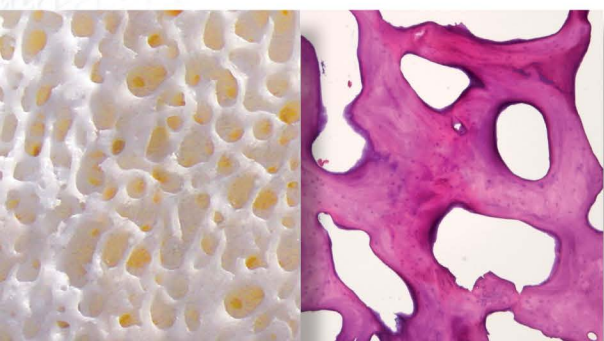




Zymo-Teck® process: the secret of the quality of grafts and membranes



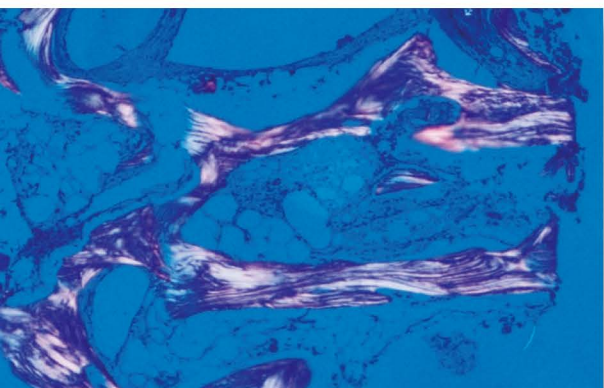
Bioteck®, a leader in the production of tissue substitutes of natural origin, has developed the exclusive deantigenation **Zymo-Teck®** process. The **Zymo-Teck®** process, unlike other processes based on high temperature treatments or using chemical solvents, uses enzymes, natural proteins able to precisely and selectively remove the various unwanted substances, making the tissues completely bio-compatible and devoid of treatment residues. **Zymo-Teck®** also preserves useful molecules, such as collagen in its natural structure and, operating at controlled temperatures, does not alter the structural characteristics of the tissues.

The stringent in-line quality controls implemented by **Bioteck®** at all stages of processing guarantee the highest quality of grafts: to obtain the best surgical outcome.

Improve your knowledge about the **Zymo-Teck®** process by selecting the QR-Code on the right.

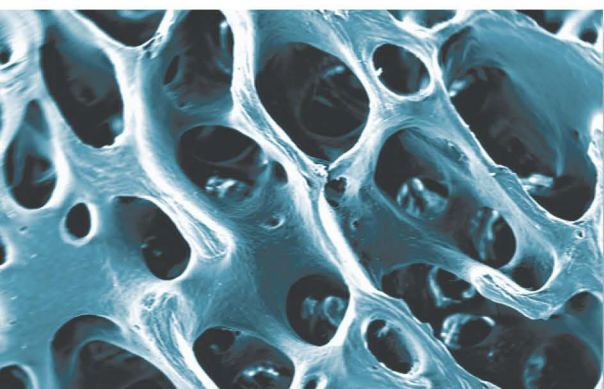


Preserved bone collagen



Grafting bone collagen into the defect creates a precise biological condition: osteoblasts, the cells responsible for the formation of new bone tissue, produce collagen fibers that are then saturated by calcium minerals. It's the same three-dimensional structure of collagen that allows the nucleation of crystals of bone apatite, through a physical phenomenon called epitaxy. In addition, the type I bone collagen stimulates, both at cellular and sub-cellular level, an extremely high number of processes involved in bone regeneration. The presence of bone collagen in **OX®** is also demonstrated in polarised light: collagen fibres, having a regular texture, presents a refractivity characteristic that makes it look lighter.

Total remodeling



OSTEOXENON® is reworked and reabsorbed through the action of osteoclasts. This happens with entirely physiologic kinetics: as well as the patient's bone it is fully remodeled within 8-12 months, as it happens for **OSTEOXENON®**: after this period it is completely replaced by the patient's bone. This is possible because **OX®**, unlike other materials, is recognized as the optimum substrate by osteoclasts that reabsorb it physiologically; only in this case, in fact, the regenerative process may end with the complete replacement of the graft. If the material is remodeled and is reabsorbed physiologically there can be no loss of volume. If the material is reabsorbed too quickly (e.g. calcium phosphate) or too slowly (e.g. synthetic hydroxyapatites) the volume of new endogenous bone is not equal to the grafted volume. **OSTEOXENON®**, however, by remodeling itself through osteoclastic activity, it keeps the grafted volume.



BiOTECK®

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Bioteck® is an Italian company producing bone substitutes and protective membranes that are successfully used in orthopaedics, neurosurgery, oral and maxillofacial surgery.

Founded in 1995, the company continues to grow constantly and now operates in more than 50 countries around the world.



bioteck.com

A firm commitment to scientific research forms the basis for the innovative solutions offered by **Bioteck®** products. The company collaborates on numerous national and international research projects, which have driven the basic research and helped in writing important chapters in bone biology.

The in-depth knowledge acquired by **Bioteck®** through its research ensures the absolute quality of its products, which are subjected to strict environmental and quality controls, thereby guaranteeing a product meeting the highest quality and safety standards.

Bioteck® applies a policy of total transparency, opening up the doors of its Production and R&D Center for the monitoring of its innovative process and the intense scientific research carried out by its staff.



In over twenty years of scientific research and clinical practice, **Bioteck®** has made an important contribution to the clinical/scientific knowledge in the field of tissue biology.

The **Bioteck Academy** is the meeting place of all the excellences that continuously contribute to the development of this knowledge and **Bioteck®** products.

The Academy has developed a culture of sharing scientific knowledge aimed at the **dissemination of best techniques and practices in the various areas of regenerative surgery** and is open to all professionals who decide to participate in this activity by sharing their surgical experience.

More information on the activities of the Academy can be found at: www.bioteckacademy.com.

bioteckacademy.com

Keep you updated
on the most recent
OsteOXenon publications!



BiOTECK®

Complete line of collagenated bone substitutes and membranes

ENZYMATIC DEANTIGENATION
PRESERVED BONE COLLAGEN
TOTAL REMODELING
CLINICAL SUCCESS



GRANULES IN VIAL

OX37 Cancellous Granules	1 btl / 0.25g ~0.5cc	0.25-1 mm
OX30 Cancellous Granules	1btl / 0.5g ~1cc	0.25-1mm
OX33 Cancellous Granules	1 btl / 2cc	2-3mm
OX34 Cancellous Granules	1 btl / 1g ~2cc	2-4mm
OX36 Cancellous Granules	1 btl / 1g ~2cc	0.25-1mm
OX38 Cancellous Granules	1 btl / 2g ~4cc	0.25-1mm
OX39 Cancellous Granules	1 btl / 4cc	2-3mm
OX50 Cancellous Granules	1 btl / 0.5g ~1cc	1-2mm
OX66 Cancellous Granules	1 btl / 1g ~2cc	1-2mm
OX40 Cortical Granules	1 btl / 0.5g ~1cc.	0.25-1 mm
OX35 Cancellous Cortical Granules	1 btl / 0.25g ~0.5cc	0.25-1 mm
OX31 Cancellous Cortical Granules	1 btl / 0.5g ~1cc	0.25-1mm
OX32 Cancellous Cortical Granules	1 btl / 1g ~2cc	0.25-1mm
OX41 Cancellous Cortical Granules	1 btl / 2g ~4cc	0.25-1mm



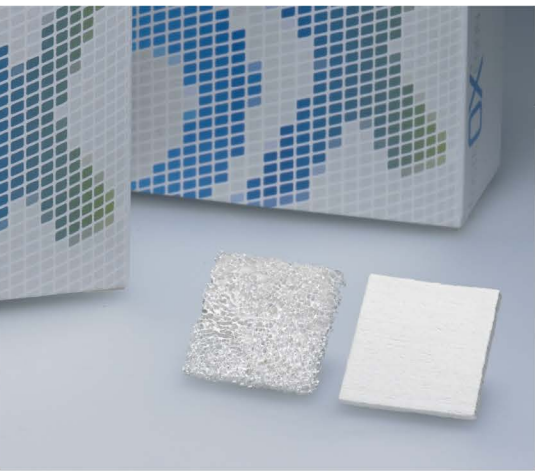
GRANULES IN SYRINGE

OX21n Cancellous Cortical Gel	1 syringe	0.25 ml
OX22n Cancellous Cortical Gel	1 syringe	0.50 ml
OX23 Cancellous Cortical Gel	1 syringe	1 ml



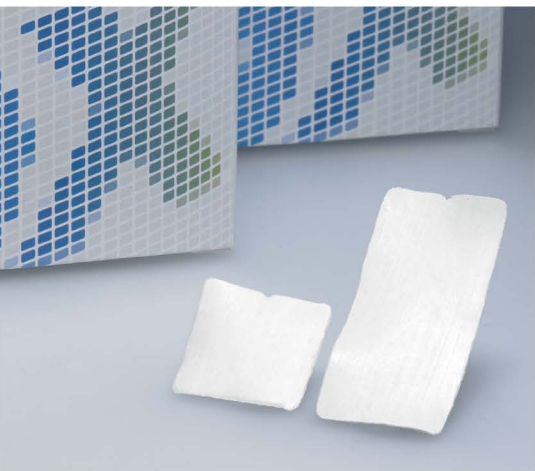
BLOCKS

OX51 Cancellous block	1pc	10 x 10 x 10 mm
OX52 Cancellous block	1pc	10 x 10 x 20 mm
OX54n Cancellous block	1pc	10 x 20 x 3 mm
OX55n Cancellous block	1pc	10 x 20 x 5 mm



FLEX SHEETS

OX01 Flex Cancellous sheet	1pc	25 x 25 x 3 mm
OX02 Flex Cortical sheet	1pc	25 x 25 x 2-2.5 mm
OX03 Flex Cortical sheet	1pc	21-25 x 23-27 x 0.2 mm
OX08 Flex Cortical sheet	1pc	21-25 x 23-27 x 0.9 mm
OX09 Flex Cortical sheet	1 pc	21-25 x 23-27 x 0.5 mm



Application table

	Granules in vial						Granules in syringe	Flex Sheets		Blocks				
	OX30 OX36	OX37 OX38	OX31 OX35 OX32 OX41	OX33 OX34	OX39	OX40	OX50 OX66	OX21n OX22n	OX23	OX01	OX02 OX03	OX08 OX09	OX51 OX54n	OX52 OX55n
	Cancellous Granules		Cancellous Cortical Granules		Cancellous Granules		Slow resorption Cortical Granules	Cancellous Granules		Cancellous Cortical Gel	Flex Cancellous Sheet		Flex Cortical Sheet	
													Cancellous Blocks	
Periodontal defect (very small, difficult access)														
Periodontal defect - Infrabony defects (1-3 walls) - Furcation defects (class I or II)											OX-03			
Peri-implant defect (up to 3 exposed threads)											OX-03			
Peri-implant defect (more than 3 exposed threads)											OX-03/09			
Post-extractive socket (preservation)														
Sinus lift (Misch, traditional)					As an alternative to OX31/32			As an alternative to OX33/34/39						
Sinus lift (variation according Tulasne or membrane tear, if > 5 mm)					As an alternative to OX31/32			As an alternative to OX33/34/39		As an alternative to OX-31/32		OX-02		
Sinus lift (Summers)			As an alternative to OX21n/22n											
Horizontal ridge augmentation* (onlay)	To fill gaps, if present		To fill gaps, if present					To fill gaps, if present		As an alternative to OX-51/52/54n/55n		OX-08/09		
Horizontal ridge augmentation (split crest)														
Vertical ridge augmentation and contemporary implant placement (block technique)	To fill gaps, if present		To fill gaps, if present					To fill gaps, if present				OX-03/09		
Vertical ridge augmentation and contemporary implant placement (Ludovichetti approach)												OX-02		
Vertical ridge augmentation* (onlay, two steps)	To fill gaps, if present		To fill gaps, if present					To fill gaps, if present				OX-08/09		
Vertical ridge augmentation (inlay)	To fill gaps, if present		To fill gaps, if present					To fill gaps, if present						
Volumetric preservation (for esthetics)												OX-03/08/09		

* Or a combination of horizontal and vertical augmentation