

Puros[®] Allograft Cancellous Particulate and Block







1. Proven, Predictable Regeneration

- Acts as an osteoconductive scaffold for new bone formation.²⁻³
- In large-volume applications, prospective studies have documented faster bone regeneration at 6 months than grafts containing sintered bovine bone matrix.⁴⁻⁵
- In small-volume applications, regeneration of hard bone has been reported as early as 3–5 months.^{6–8}

2. Natural and Easy to Use

- Retains osteoconductive properties due to the preservation of the natural bone matrix collagen and mineral composition, trabecular pattern, and original porosity, ²⁻³ enabling the ingrowth of vascular and cellular connective tissue.⁷
- Easy handling quick hydration, five-year shelf life and room temperature storage.

3. Tutoplast[®] Process

• Sterilized and preserved using the proprietary Tutoplast Process, Puros Cancellous Particulate is a high-quality allograft designed for large and small volume bone regeneration procedures.

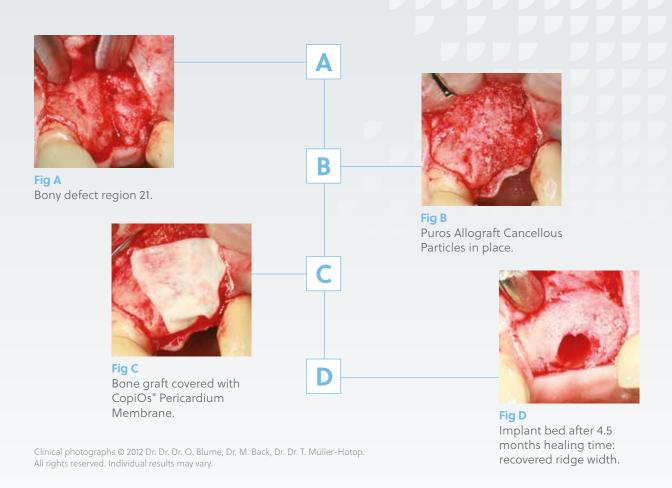


The Bone Grafting Material of Choice for Many Clinicians Due to its History of Well-Documented Clinical Results.

Puros Cancellous Particulate Allografts have shown successful clinical results in:

- Regeneration of periodontal bone and furcation defects. 2-3
- Osseous defect regeneration.^{2-3, 5-8}
- Regeneration of extraction sockets.⁶⁻⁷
- Regeneration of gaps around block grafts.⁶⁻⁹
- Horizontal alveolar crest augmentation. 6-9
- Sinus augmentation.4-5





Ordering Information

Catalog Number	Description
67210	Puros Allograft Cancellous Particulate, 0,5 cc, 0,25–1 mm
67211	Puros Allograft Cancellous Particulate, 1 cc, 0,25–1 mm
67209	Puros Allograft Cancellous Particulate, 2 cc, 0,25–1 mm
67212	Puros Allograft Cancellous Particulate, 0,5 cc, 1–2 mm
67213	Puros Allograft Cancellous Particulate, 1 cc, 1–2 mm
67214	Puros Allograft Cancellous Particulate, 2 cc, 1–2 mm
67215	Puros Allograft Cancellous Particulate, 3 cc, 1–2 mm
67216	Puros Allograft Cancellous Particulate, 3 cc, 2–4 mm

- 1. Spinato S, Galindo-Moreno P, Zaffe D, Bernardello F, Soardi CM. Is socket healing conditioned by buccal plate thickness? A clinical and histologic study 4 months after mineralized human bone allografting. Clin Oral Implants Res (2014) 25:e120-6
- 2. Davi E, Aslan M, Simsek G, Yilmaz AB. The effects of bone chips dehydrated with solvent on healing bone defects. J Int Medical Res. 2002;30:168-173.
- 3. Tsao YP, Neiva R, Al-Shammari K, Oh TJ, Wang HL. Effects of a mineralized human cancellous bone allograft in regeneration of mandibular Class II furcation defects. J Periodontol. 2006;77:416-425.
- 4. Froum SJ, Wallace SS, Elian N, Cho SC, Tarnow DP. Comparison of mineralized cancellous bone allograft (Puros) and anorganic bovine bone matrix (Bio-Oss) for sinus augmentation: histomorphometry at 26 to 32 weeks after grafting. Int J Periodontics Restorative Dent. 2006;26:543-551.
- 5. Noumbissi SS, Lozada JL, Boyne PJ, Rohrer MD, Clem D, Kim JS, Prasad H. Clinical, histologic, and histomorphometric evaluation of mineralized solvent-dehydrated bone allograft (Puros) in human maxillary sinus grafts. J Oral Implantol. 2005;31:171-179.

 6. Block MS, Finger I, Lytle R. Human mineralized bone in extraction sites before implant placement. Preliminary results. J Amer Dent Assoc. 2002;133:1631-1638.
- 7. Minichetti JC, D'Amore JC, Hong AYJ, Cleveland DB. Human histologic analysis of mineralized bone allograft (Puros) placement before implant surgery. J Oral Implantol. 2004;30:74-82.
- 8. lock MS, Degen M. Horizontal ridge augmentation using human mineralized particulate bone: preliminary results. J Oral Maxillofac Surg. 2004;62 (Suppl 2):67-72.
- 9. Bach L, Burstein J, Sedghizadeh PP. Cortical tenting grafting technique in the severely atrophic alveolar ridge for implant site development. Implant Dent. 2008;17:40-50.



1. Documented Successful Bone Regeneration

- Documented graft and implant success rates make it a viable alternative to autogenous block grafting.
- Cortico-Cancellous structure retains the remodeling capabilities of cancellous bone with the strength advantages of cortical bone needed for dimensional ridge augmentation.¹²

2. Time-Saving

• Saves time, helps to reduce pain, and can shorten the patient's rehabilitation period by eliminating the need to harvest an autogenous graft.¹⁰

3. Tutoplast Process

• Sterilized and preserved using the proprietary Tutoplast Process, Puros Allograft Block offers a high-quality option for successful bone regeneration.¹⁰

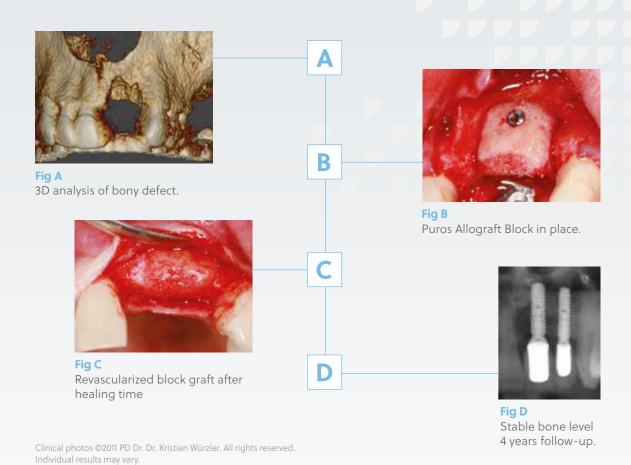


A Clinically Proven Documented Solution for Restoring Volume to Severely Resorbed Ridges.^{10–11}

Clinical advantages of Puros Allograft Block:

- \bullet Outcomes¹⁰⁻¹¹ have been comparable to those generally reported for autogenous block grafting, but without the need for a second surgery to harvest native bone. ¹⁴⁻¹⁵
- Clinical reports have documented the ability to stabilize implants⁵⁻⁶ months after grafting.¹⁰⁻¹²
- Quick hydration, five-year shelf life and room temperature storage.

Take a Closer Look



Ordering Information

Catalog Number	Description
67220	Puros Allograft Block, 15 x 10 x 9 mm
67221	Puros Allograft Block, 15 x 15 x 9 mm
67222	Puros Allograft Cancellous Block, 8 x 8 x 8 mm
67223	Puros Allograft Cancellous Block, 10 x 10 x 20 mm
67224	Puros Allograft Cancellous Block, 10 x 20 x 20 mm
67225	Puros Allograft Cancellous Dowel, ø 7 mm, L 14–18 mm
67226	Puros Allograft Cancellous Dowel, ø 10 mm, L 16–20 mm

^{10.} Schlee M, Dehner J-F, Baukloh K, Happe A, Seitz O, Sader R. Esthetic outcome of implant-based reconstructions in augmented bone: comparison of autologous and allogeneic bone block grafting with the pink esthetic score (PES). Head & Face Medicine (2014) 10:21.

^{11.} Laino L, lezzi G, Piattelli A, Lo Muzio L, Cicciu M. Vertical ridge augmentation of the atrophic posterior mandible with sandwich technique: bone block from the chin

area versus corticocancellous bone block allograft--clinical and histological prospective randomized controlled study. Biomed Res Int (2014) 2014:982104.

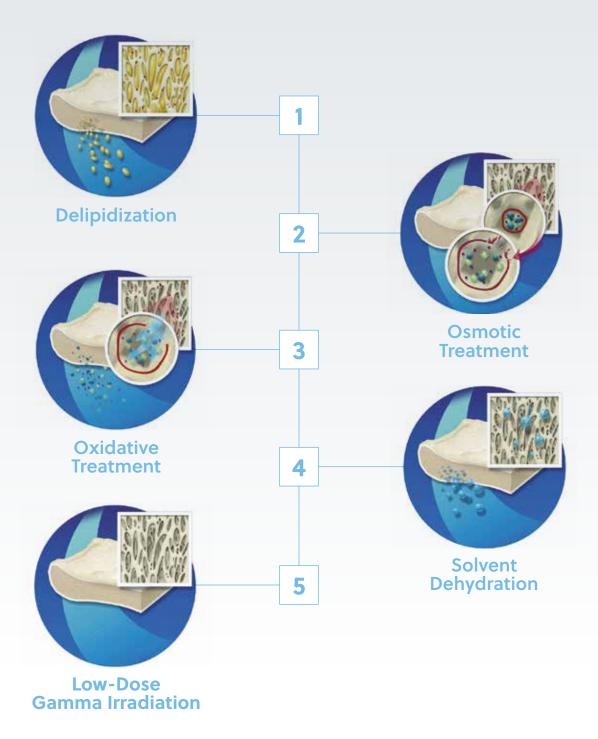
12. Checchi V, Felice P. The Inlay Technique With an Allograft Block Used for the Rehabilitation of an Atrophic Posterior Mandible: A Case Report. Clinical Advances in Periodontics (2015) 5:68-74.

^{13.} Data on file RTI

^{14.} Levin L, Nitzan D, Schwartz-Arad D. Success of dental implants placed in intraoral block bone grafts. J Periodontol. 2007;78:18-21.

^{15.} von Arx T, Buser D. Horizontal ridge augmentation using autogenous block grafts and the guided bone regeneration technique with collagen membranes: a clinical study with 42 patients. Clin Oral Impl Res. 2006;17:359-366.

The Unique Tutoplast Process



The proprietary Tutoplast Process assures the highest standard of tissue safety and quality with minimal risk of disease transmission.¹³



	-			/

Contact us by phone at 1-800-342-5454 or visit ZimVie.com/dental

ZimVie 4555 Riverside Drive Palm Beach Gardens, FL 33410 Phone: +1-561-776-6700 Fax: +1-561-776-1272 dentalCS@ZimVie.com



Unless otherwise indicated, as referenced herein, all trademarks and intellectual property rights are the property of ZimVie Inc. or an affiliate; and all products are manufactured by one or more of the dental subsidiaries of ZimVie Inc. (Biomet 3i, LLC, Zimmer Dental, Inc., etc.) and marketed and distributed by ZimVie Dental and its authorized marketing partners. Puros products are manufactured by RTI Surgical, Inc. Tutoplast is a U.S. registered trademark owned by Tutogen Medical GmbH. For additional product information, please refer to the individual product labeling or instructions for use. Product clearance and availability may be limited to certain countries/regions. This material is intended for clinicians only and does not comprise medical advice or recommendations. Distribution to any other recipient is prohibited. This material may not be copied or reprinted without the express written consent of ZimVie. ZV0986 REV A 05/23 ©2023 ZimVie. All rights reserved.