

creos™  
regenerative solutions

# A trusted source.

creos allo.gain and creos allo.protect



# Reliable bone regeneration

Broad allograft portfolio for all indications

As a leading innovator of dental solutions, Nobel Biocare is committed to continuously provide you with products and solutions that help you treat more patients better. With our new creos allograft materials, we are able to offer you and your patients safe and reliable solutions for guided bone and tissue regeneration.

The comprehensive portfolio consists of a wide range of particulate grafts, a 100% demineralized bone matrix (dbm) putty and a highly effective pericardium barrier membrane.

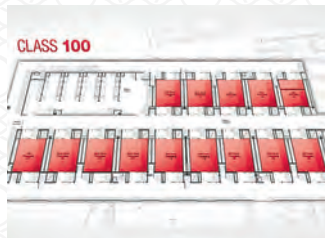
# Strict processing procedures

Ensuring highest safety and quality levels

Our tissue bank, which is AATB\* accredited, follows strict processing procedures to ensure quality and safe tissue grafts for transplantation.



**1** Thorough donor screening by AATB certified doctors. All donors are sourced within the United States.



**2** Tissue processing and sterilization within fourteen class 100 clean rooms. Each donor is processed individually to prevent cross-contamination.



**3** Sophisticated air recycling system in each clean room to prevent cross-contamination.

## Safety and quality



**5** Validated  $10^{-6}$  Sterility Assurance Level (SAL) in the final packaging, assuring highest standard of product sterility and tissue safety.

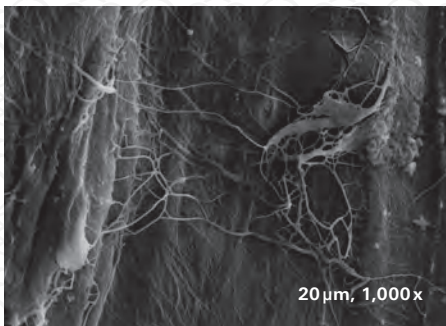


**4** Each of the fourteen clean rooms is connected to its own dedicated air purification system.



## Pericardium membrane – an effective and reliable barrier

creos allo.protect is a fully resorbable pericardium membrane providing strong and stable protection of the graft site during healing. It is quick to place and adapts well to the graft site, maintaining shape and size when placed. In addition, the membrane is easy to handle, making it an excellent choice for most clinical indications.



### Your clinical benefits

#### Quick to place, easy to handle

- Easy to tack and suture while highly tear resistant
- Rapid rehydration and easy manipulation
- Adapts well to surface contours and maintains shape and size when placed

#### Durable protection

- Strong and stable due to the pore structure of native pericardium
- Slow degradation for an effective barrier during the healing process

#### Biocompatible and tissue friendly

- Preservation of the native pericardium collagen matrix and mechanical properties



Source	Allograft (pericardium)
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Indications	Sinus floor elevation, socket preservation, horizontal/vertical augmentation, periodontal defect
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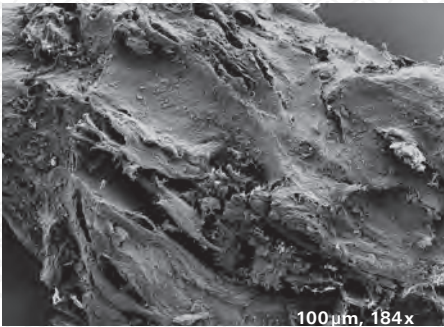
Size	1.0x1.0cm, 1.5x2.0cm, 2.0x2.0cm, 2.0x3.0cm
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## Bone particulate – wide range of options

creos allo.gain offers one of the broadest assortments of bone particulate types, sizes and volumes for different clinical indications, such as sinus floor elevation, socket preservation, ridge augmentation or periodontal defects. With creos allo.gain you have the flexibility to choose the appropriate particulate graft depending on patient indication or personal preference.

### Mineralized/demineralized



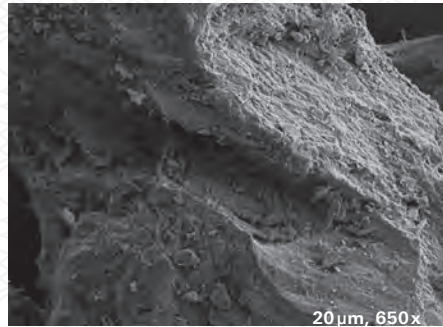
A unique blend of 70% mineralized and 30% demineralized cortical bone, combining the key benefits of each graft material into one product. It provides a great mix between high structural support and fast bone formation.

Source	Allograft
Indications	Sinus floor elevation, socket preservation, horizontal/vertical augmentation, periodontal defect
Particulate size	0.25–1 mm
Volume	0.5 cc, 1.0 cc, 2.0 cc

#### Your clinical benefits

- Structural support and maintenance of space provided by the mineralized cortical bone
- Fast formation of new bone provided by the osteoconductive properties in the demineralized bone
- Time saving due to pre-mix of particulates

### Corticocancellous



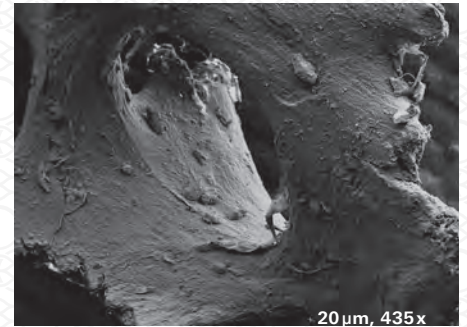
A natural blend of cortical and cancellous bone, produced from sections of the ilium. This process provides the stability and structure of cortical bone while the spongy nature of cancellous bone allows for easier penetration of blood flow for revascularization of the site.

Source	Allograft
Indications	Sinus floor elevation, socket preservation, horizontal/vertical augmentation
Particulate size	0.25–1mm, 0.5–1mm
Volume	0.25 cc, 0.5 cc, 1.0 cc, 2.0 cc

#### Your clinical benefits

- Structural support and maintenance of space provided by the cortical bone
- Revascularization of the site, critical for natural tissue integration provided by the porous cancellous bone

### Mineralized cancellous



The porous structure of cancellous bone allows for revascularization, which is critical for the formation of new bone cells.

Source	Allograft
Indications	Sinus floor elevation, socket preservation, horizontal/vertical augmentation
Particulate size	0.25–1 mm, 0.5–1 mm
Volume	0.25 cc, 0.5 cc, 1.0 cc, 2.0 cc

#### Your clinical benefits

- Revascularization of the site, critical for the formation of new bone cells and natural tissue integration
- Osteoconductive scaffold for new bone formation

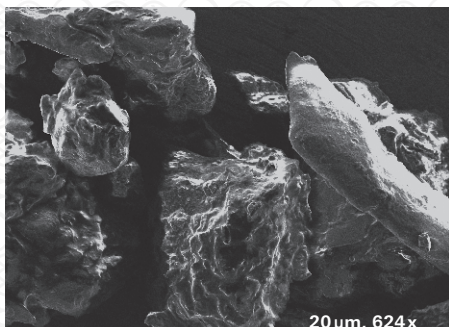


“The use of blended bone allograft containing a 70/30 ratio of mineralized to demineralized cortical bone particulate can be successfully utilized to facilitate the placement of dental implants with as little as 12 to 14 weeks of healing.”\*

Dan Holtzclaw, DDS, MS. Austin, Texas, USA

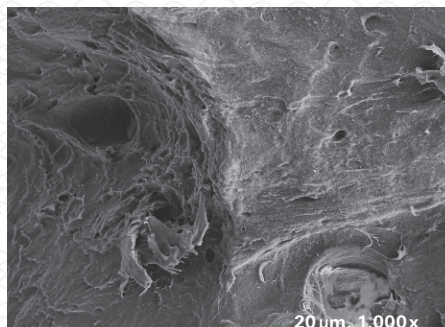


### Mineralized cortical



This particulate offers high density and strength comparable to cortical autograft. Due to its capability of maintaining space and volume, it is ideal for more demanding indications such as horizontal or vertical augmentation procedures.

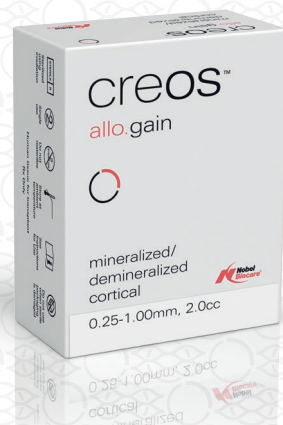
### Demineralized cortical



The demineralization process exposes the natural growth factors within the cortical bone. This can be beneficial for indications such as socket preservation or periodontal defects, where no structural support is necessary.

Source	Allograft
Indications	Sinus floor elevation, socket preservation, horizontal/vertical augmentation, periodontal defect
Particulate size	0.125–0.85 mm, 0.25–1 mm, 0.5–1 mm
Volume	0.25 cc, 0.5 cc, 1.0 cc, 2.0 cc

Source	Allograft
Indications	Socket preservation, periodontal defect
Particulate size	0.125–0.85 mm, 0.5–1mm
Volume	0.25 cc, 0.5 cc, 1.0 cc, 2.0 cc



### Your clinical benefits

- High density and strength for great structural support and maintenance of space during healing
- Osteoconductive scaffold for new bone formation

### Your clinical benefits

- Bone filler beneficial for indications such as socket preservation and periodontal defects, where no structural support is needed

\* Beck TM, Mealey BL. Histologic analysis of healing after tooth extraction with ridge preservation using mineralized human bone allograft. J Periodontol. 2010 Dec;81(12):1765-72. doi: 10.1902/jop.2010.100286. Epub 2010 Jul 27

# creos™ allo.gain



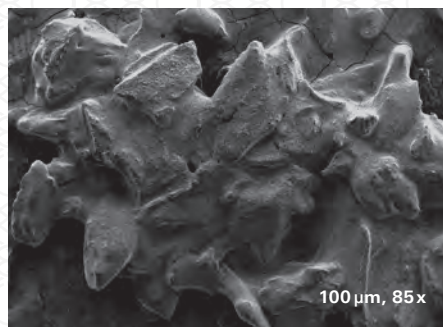
dbm putty – 100% pure allograft

creos allo.gain demineralized bone matrix (dbm) putty is 100% pure allograft tissue without any fillers or inert carriers. The graft has an excellent resistance to hydration, maintaining the required stability and space during the healing phase.



Demonstration video

[creos.com/allogain-dbm-demo](https://creos.com/allogain-dbm-demo)



Source	Allograft (demineralized)
Indications	Socket preservation, periodontal defect
Volume	0.5, 1.0, 2.5 cc

## Your clinical benefits

### Contains growth factors

- 100% pure demineralized allograft with no filler or inert carriers
- Each donor lot is verified for natural growth factors\*

### Outstanding handling

- Moldable for precise adaptation to bone defects and easy application with convenient dispenser

### High stability and structural integrity

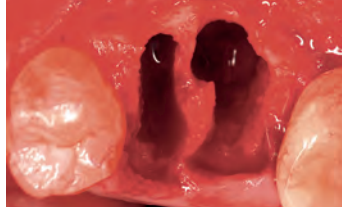
- Resists irrigation and maintains space during healing, increasing the predictability of the final result

# Case 1: extraction site preservation

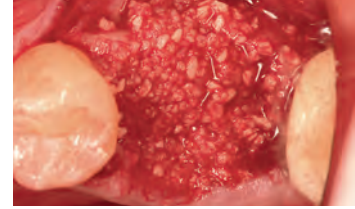
60-year-old male, well controlled diabetes and hypertension, no drug allergies, no history of tobacco use, complaint of pain and swelling at the mandibular first right molar.



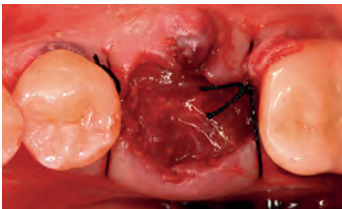
Dehiscence defect of mandibular buccal plate prior to tooth extraction.



Significant bone deficiency following tooth extraction and degranulation.



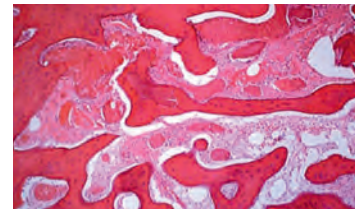
Placement of creos allo.gain 70/30 mineralized/demineralized bone particulate.



Intentional non-primary closure of the surgical site following site preservation.



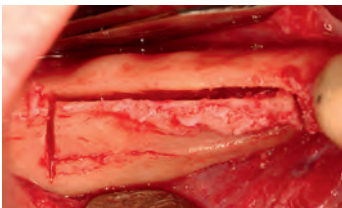
Note significant bone regeneration after only 3 months upon dental implant placement.



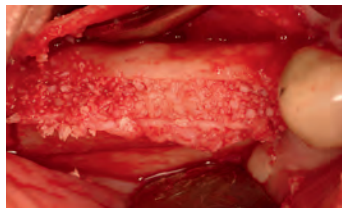
H&E stain of bone core sample from surgical site at the time of implant placement. Note live bone formation around graft particles.

# Case 2: ridge augmentation

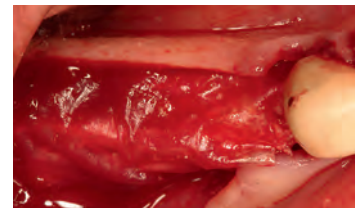
42-year-old female, medical history unremarkable, no history of tobacco use and only social consumption of alcohol, complaint of inability to adequately chew food due to missing teeth in the posterior right mandible (second premolar, first molar and second molar was removed many years ago).



Piezoelectric corticotomies to facilitate mandibular ridge splitting procedure.



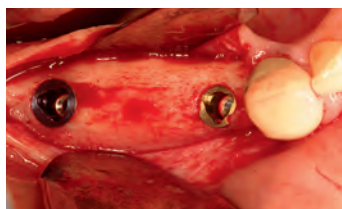
Placement of creos allo.gain 70/30 mineralized/demineralized bone particulate into split ridge.



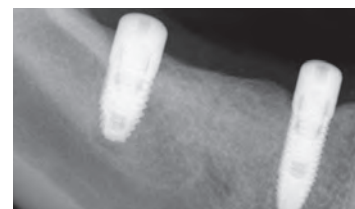
Placement of barrier membrane for guided bone regeneration (GBR).



Primary closure achieved at surgical site with aid of periosteal releasing incision.



After 3 months of healing, approx. 4mm of improved horizontal bone width was achieved to facilitate implant placement.



Radiographic record of implant placement following healed ridge split procedure.



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regenerative solutions

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For more information about how to place an order, please contact Nobel Biocare customer support or your local sales representative.

nobelbiocare.com/contact

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store.nobelbiocare.com

creos™ 

allo.gain

bone particulate

creos™ 

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dbm putty

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pericardium  
membrane




	min/ demin cortical	cortico- cancellous		mineralized cancellous		mineralized cortical			demineralized cortical		dbm putty		pericardium membrane	
	Medium 0.25-1 mm	Medium 0.25-1 mm	Large 0.5-1 mm	Medium 0.25-1 mm	Large 0.5-1 mm	Small 0.125- 0.85 mm	Medium 0.25-1 mm	Large 0.5-1 mm	Small 0.125- 0.85 mm	Large 0.5-1 mm	0.50 cc	N6110	1.0x1.0 cm	N7110
0.25 cc	-	N4510	N4511	N4210	N4211	N4110	N4111	N4112	N4310	N4311	1.00 cc	N6120	1.5x2.0 cm	N7120
0.50 cc	N4410	N4520	N4521	N4220	N4221	N4120	N4121	N4122	N4320	N4321	2.50 cc	N6130	2.0x2.0 cm	N7130
1.00 cc	N4420	N4530	N4531	N4230	N4231	N4130	N4131	N4132	N4330	N4331			2.0x3.0 cm	N7140
2.00 cc	N4430	N4540	N4541	N4240	N4241	N4140	N4141	N4142	N4340	N4341				

Please detach and keep





## Application guide

Indication	allo.gain bone particulate 					allo.gain dbm 	allo.protect membrane 
	mineralized/ demineralized	cortico- cancellous	mineralized cancellous	mineralized cortical	demineralized cortical	dbm putty	pericardium membrane
Sinus floor elevation	X	X	X	X			X
Socket preservation	X	X	X	X	X	X	X
Horizontal augmentation	X	X	X	X			X
Vertical augmentation	X	X	X	X			X
Periodontal defect	X			X	X	X	X



For more information about our products, regenerative solutions, or educational opportunities, please contact Nobel Biocare customer support or your local sales representative.

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## Respecting the gift of life

Whether you are a distributor or user of allograft tissue, it is important to keep the source of the tissue in mind. The development of the creos allograft materials would not have been possible without donors from all over the United States who generously give a gift that saves and enhances other people's lives.

The positive difference a donor makes is immense – on average one single donor can help improve quality of life for up to 50 people.

Our close partner and tissue bank go to great lengths to support donor families and provide the aftercare they require.

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For more information, visit [creos.com](http://creos.com)

