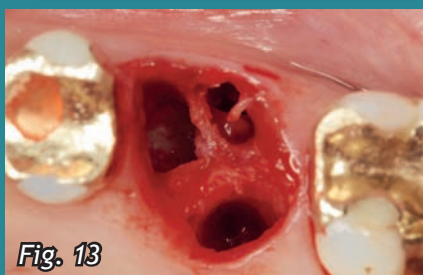
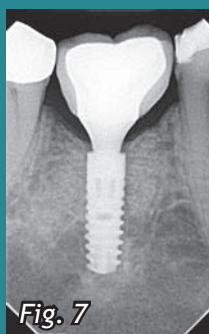


caused by vibration to the remaining furcation bone, which thereby reduces the chances of primary stability for wider diameter implants. The thread design of the Ankylos is ideal for this type of treatment as most of the primary stability is achieved from the apical threads and no force is placed at the coronal section.

Wide diameter implants are generally placed in molar sites to compensate for the screw-retained connection. The wider diameter reduces the micro-motion and hence reduces the risk of screw loosening and possible implant fracture. The Ankylos system does not have this problem. The tapered connection and the TissueCare Concept (Fig. 7, 12, and 20) are capable of

withstanding the stresses of the molar region without the risk of screw loosening or implant fracture. The use of a narrow diameter implant reduces the amount of bone damaged during preparation. This allows implant placement in every case without having to abort the procedure due to insufficient primary stability. Immediate molar placement with narrow diameter implants is a successful treatment protocol. The Ankylos implant provides a system that permits ideal implant placement in molar sites by means of its excellent design. The thread design and surface characteristics provide excellent primary stability in minimal and poor quality bone, resulting in rapid integration and dramatically shortened treatment time. The tapered connection allows narrow diameter



- Fig. 7: Follow up x-ray after 24 months: demonstrates the Ankylos TissueCare Concept that features bone over the implant shoulder*
- Fig. 8: Radiograph of tooth 16 shows the preparation of the furcation area*
- Fig. 9: Radiograph immediate post-op with vertical sinus lift*
- Fig. 10: Healthy gingiva three months after placement and ready for final impression*
- Fig. 11: Final crown 15 months post-op: note the excellent emergence profile*
- Fig. 12: Follow-up x-ray after 15 months: note the remodeling of the bone due to Ankylos TissueCare Concept*
- Fig. 13: Furcation bone after atraumatic extraction of the roots. Apical pathology still present*
- Fig. 14: Bone condensers to expand the furcation bone*