

♥ticare
i n H E X

GAP **ZERO**
T E C H N O L O G Y



♥ MOVING FOR CARE

inHEX

THE IMPLANT FREE OF BACTERIAL MICROLEAKAGE

GAP ZERO
TECHNOLOGY

INTERNAL CONICAL CONNECTION
featuring gapZero

MACHINED BEVEL

for platform switching and
the outmost aesthetics

MICROTHREADS

for a better
biomechanical behavior

DOUBLE-THREADED IMPLANT

to reduce insertion time by half,
which decreases bone heating

RBM-TC SURFACE

for better bone-to-implant
contact

ANATOMICAL SHAPE

for high primary stability
and easier placement

MORE EFFECTIVE APEX

thanks to a more pointed cone
that provides additional primary
stability



inHEX
SHORT
IMPLANT

THE GREAT SOLUTION



**EXCELLENT
MAINTENANCE**

of marginal bone level

The only implant system supported by scientific evidence of featuring **gapZero**

inHEX

quattro

MORE SOLUTIONS FOR SOFT BONE

GAP ZERO
TECHNOLOGY

INTERNAL CONICAL CONNECTION
featuring gapZero

PRIMARY STABILITY

Specially designed for bones
type III and IV

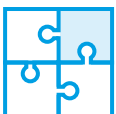
HIGHER PROGRESSIVITY

in the insertion torque

Thread design that provides
great primary stability in
LOW-DENSITY BONE

FLAT SHAPE

for an efficient
cutting geometry



**BETTER
PERFORMANCE IN
EXTRACTION SOCKETS**

PREDICTABILITY

The implant free of bacterial microleakage with proven clinical and scientific result

PerioHYBRID

AN IMPLANT DESIGNED FOR RISK PROFILE PATIENTS



GAP ZERO
TECHNOLOGY

INTERNAL CONICAL CONNECTION
featuring gapZero

1.5 mm ultra-low roughness
(0.18 µm)

Moderate roughness
(1.43 µm)

OFFERS IMPORTANT BENEFITS TO PATIENTS

- ♥ Zero bone remodelling
- ♥ Better predictability in compromised situations

INDICATIONS OF TICARE PERIO HYBRID

Patients susceptible to bone loss

- ♥ History of periodontitis or peri-implantitis
- ♥ Non-compliant patients with supportive periodontal therapy
- ♥ Smokers
- ♥ Thin bone wall phenotype
- ♥ Insufficient keratinized mucosa

Perio
HYBRID

Perio
HYBRID
quattro

Feature the same shape and connection as **ticare inhex** and **ticare inhex quattro**, with which all abutments are compatible.

Available in MINI, STD, MAXI platforms and all the dimensions*

PerioHYBRID

BASED ON SCIENTIFIC AND CLINICAL STUDIES

Scientific literature shows benefits about the use of hybrid implants in periodontally compromised patients suffering from peri-implantitis

More predictability



Slower progression



Better treatment



STUDIES ABOUT HYBRID IMPLANTS WITH TICARE

♥ During the first year upon loading, marginal bone changes were insignificant 0.01 mm, no significant differences were found between the hybrid and rough implants.⁽¹⁾

♥ In individuals prone to developing peri-implantitis or a pathogenic bacterial profile, Hybrid implants featuring a machined coronal zone could offer benefits in terms of a reduced inflammatory profile for the prevention and arrest of peri-implantitis.⁽²⁾



Perio
HYBRID
quattro

(1) One year outcomes of dental implants with a hybrid surface macro-design placed in patients with history of periodontitis: A randomized clinical trial.

Mariano Sanz, Benjamín Serrano, Ignacio Sanz Sánchez, Katherine Serrano, Eduardo Montero.
Journal of Clinical Periodontology, 2021.

(2) Microbial and host-derived biomarker changes during ligature-induced and spontaneous peri-implantitis in the beagle dog.

Alberto Monje, Sigrun Eick, Daniel Buser, Giovanni Salvi
Journal of Periodontal Research, 2020.

GAP ZERO

TECHNOLOGY

THE TECHNOLOGY THAT REDUCES THE RISK OF PERI-IMPLANTITIS

The only implant system
supported by scientific
evidence of featuring

gapZero

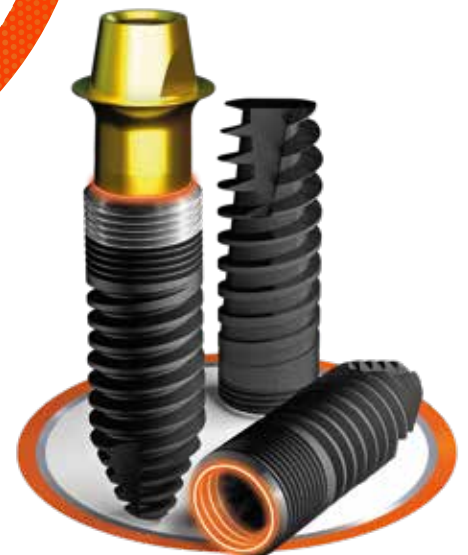

ticare
MOVING FOR CARE

**EXCELLENT
MAINTENANCE**
of marginal bone level

GAP 0

Perfect fit at
20 and 30 Ncm

**THE IMPLANT FREE OF
BACTERIAL MICROLEAKAGE**

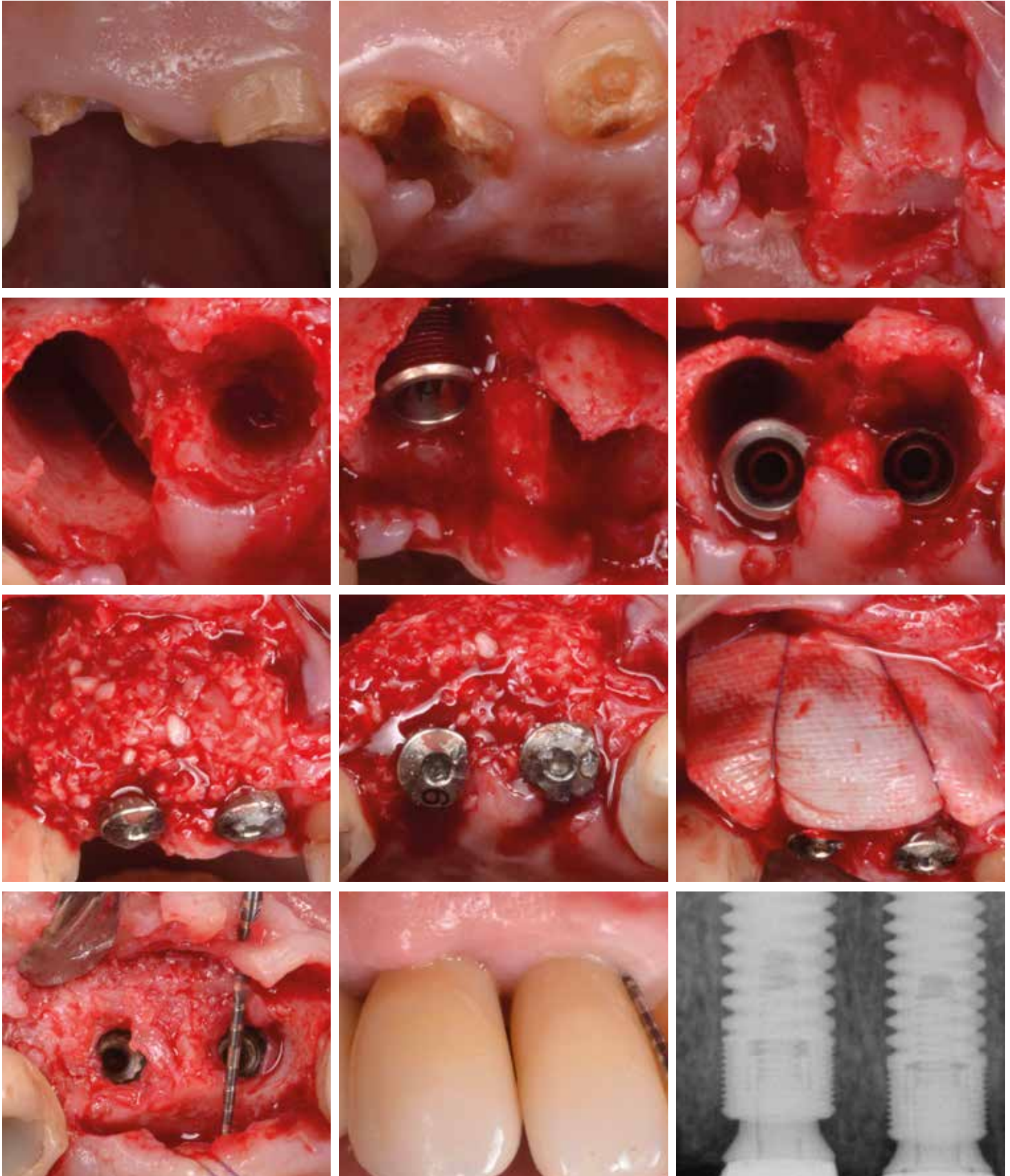


CLINICAL STUDIES AND TRIALS

with Ticare implants endorse gapZero and its clinical benefits.

CLINICAL CASE

Ticare Perio Hybrid implants placed immediately in extraction sockets with simultaneous regeneration where allograft and resorbable membranes were used. Re-entry at 4 months after implant placement shows significant bone augmentation. Clinical and radiologic control at 12 months shows healthy peri-implant area and stable bone level.



*Pictures courtesy of Dr. Alberto Monje



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