ZYGOMATIC Implants
Product Catalogue
Southern Implants is a leading provider of unique and innovative dental implant products with a focus on top-end professional users who want more choices. Southern’s expertise in research, development and manufacturing of dental implants allows us to provide Innovative Treatment Solutions that will reduce treatment times and improve patient outcomes.

Striving for excellence and meeting customer needs, has led to our wide product range characterised by Unique and Innovative products which include:

- Multiple interfaces, to suit customer preference.
- INVERTA® implant, featuring a Body-Shift™ design, engineered for primary stability and suitable for immediate loading.
- Co-Axis®, Subcrestal Angle Correction® implants, available in angulations of 12°, 24° & 36° and various internal and external connections.
- MAX implant, specifically designed for immediate molar tooth replacement.
- The ZYGAN® and ZYGEX implants for severely resorbed maxilla and craniofacial reconstruction.

Our product portfolio is in synchronised evolution with protocol improvements and technological advances.

My sincere thanks to all specialists, dentists and technicians who put their trust in our company.
NOTE:
• Images are for illustration purposes only and do not necessarily accurately represent the product.
• All dimensions in this catalogue are in mm, unless otherwise specified.
• Not all products are cleared for sale in all countries.
ZYGOMATIC & ZYGAN® Implants

Implants are premounted and available in lengths of:

<table>
<thead>
<tr>
<th>ITEM CODE</th>
<th>IMPLANT LENGTH CODES (in mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ZYG-55-</td>
<td>35N / 37.5N / 40N / 42.5N / 45N / 47.5N / 50N / 52.5N / 55N / 60N</td>
</tr>
<tr>
<td>ZYGAN-xx</td>
<td>30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60</td>
</tr>
</tbody>
</table>

NOTE:

• Implant dimensions and information - page 22.
• All ZYGAN® implants are packaged with a Bone Mill fixture mount. For more information refer to CAT-1219.

Surgical Components

<table>
<thead>
<tr>
<th>Cover Screw</th>
<th>Healing Abutments</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCU2</td>
<td>TB</td>
</tr>
<tr>
<td></td>
<td>WB</td>
</tr>
<tr>
<td>Ø4.5</td>
<td>Ø5.5</td>
</tr>
</tbody>
</table>

**Prosthetic Flowchart**

### Ø4.0 mm Restorative Platform

#### DIRECT

<table>
<thead>
<tr>
<th>Healing Abutments</th>
<th>Impression Copings</th>
<th>Laboratory Analogues</th>
<th>Prosthetic Components</th>
<th>Retaining Screws</th>
</tr>
</thead>
<tbody>
<tr>
<td>TB (one-part)</td>
<td>CBU</td>
<td>CB70 (transfer)</td>
<td>GC-NX-40 (non-engaging)</td>
<td>3 Series Z Screws</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Torque: 32-40 Ncm</td>
</tr>
<tr>
<td></td>
<td>CBU-W</td>
<td>CB75 (transfer)</td>
<td>TCB1NH/5NH (non-engaging)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>PKB2NH (non-engaging)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>SF6EX-40 (scanning flag)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LS12 (transfer)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LAD-IB (digital analogue)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:**
- For optimal coronal hard and soft tissue health, it is strongly recommended that all Southern Zygomatic implants are restored with compact conical abutments (indirect route).
- The direct route is only recommended if there are restorative considerations that preclude the use of compact conical abutments.

#### INDIRECT

<table>
<thead>
<tr>
<th>Passive Abutment</th>
<th>Healing Abutments</th>
<th>Impression Copings</th>
<th>Laboratory Analogues</th>
<th>Prosthetic Components</th>
<th>Retaining Screws</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMC2</td>
<td>HMC 4/6</td>
<td>CMC1 (pick-up)</td>
<td>GMC1</td>
<td>TMC1 / 5</td>
<td>1 Series Screws</td>
</tr>
<tr>
<td></td>
<td>OR HMC7</td>
<td>CMC2 (transfer)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>CMC-2G-2 (transfer)</td>
<td>LSMC1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SFTMC-48 (scanning flag)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LAD-MC (digital analogue)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Screw torque:**
- 10 - 15 Ncm

---

**Screws:**
- 2 Series Screw:
  - Torque: 32 - 40 Ncm
- 3 Series Screw:
  - Torque: 32 - 40 Ncm
- SCANNABLE Abutments
- DIRECT Abutments
- PASSIVE Abutments
- TIB-NX-40 (non-engaging)
- TB-NX-40-C1.5 (non-engaging)
- TIB-NX-40-C3 (non-engaging)
- *Screw torque: 20 Ncm
- Uses 2 Series Screws
- Screw torque:
  - 20 Ncm
- Screw torque:
  - 10 - 15 Ncm

---

**Screws:**
- 1 Series Screw:
  - Torque: 10 - 15 Ncm
Site Preparation Sequence

Sinus-slot or in-the-wall technique

Illustrations are for 42.5 mm Zygomatic implants

Exteriorised technique (in-out-in)

NOTE: Site preparation sequence recommended by Southern Implants does not replace the judgement and experience of the surgeon.
Site Preparation Sequence

Sinus-slot or in-the-wall technique
(illustrations are for 42.5 mm ZYGAN® implants)

Exteriorised technique (in-out-in)

NOTE: Site preparation sequence recommended by Southern Implants does not replace the judgement and experience of the surgeon.
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<tr>
<th>ITEM CODE</th>
<th>IMPLANT LENGTH CODES (in mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ONC-55-</td>
<td>27.5N / 32.5N / 37.5N / 42.5N / 47.5N</td>
</tr>
<tr>
<td>ZYGEX-</td>
<td>30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60</td>
</tr>
</tbody>
</table>

NOTE: Implant dimensions and information - page 22.

Surgical Components

<table>
<thead>
<tr>
<th>Cover Screw</th>
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<tbody>
<tr>
<td>SCU2</td>
<td>TB, Ø4.5</td>
</tr>
<tr>
<td></td>
<td>WB, Ø5.5</td>
</tr>
</tbody>
</table>
# Prosthetic Flowchart

## Ø4.0 mm Restorative Platform

### DIRECT

<table>
<thead>
<tr>
<th>Healing Abutments</th>
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<tbody>
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<td>3 Series Z Screws</td>
</tr>
<tr>
<td>WB (one-part)</td>
<td>CBU-W (pick-up)</td>
<td>CB75 (transfer)</td>
<td>TCB1NH/SNH (non-engaging)</td>
<td>Torque 32-40 Ncm</td>
</tr>
<tr>
<td></td>
<td>SF6EL-40</td>
<td>LS12</td>
<td>PKB2NH (non-engaging)</td>
<td>Screw torque: 20 Ncm</td>
</tr>
<tr>
<td></td>
<td>Scanning flag</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Uses 2 Series Screws**

### IMPROVEMENT

**Screw torque:** 20 Ncm

### SCANNABLE Abutments

**Screw torque:** 12 Ncm

### PASSIVE Abutments

**Screw torque:** 8 Ncm

### NOTE:

- For optimal coronal hard and soft tissue health, it is strongly recommended that all Southern Zygomatic implants are restored with compact conical abutments (indirect route).
- The direct route is only recommended if there are restorative considerations that preclude the use of compact conical abutments.

### INDIRECT

<table>
<thead>
<tr>
<th>Passive Abutment</th>
<th>Healing Abutments</th>
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<th>Prosthetic Components</th>
<th>Retaining Screws</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMC2</td>
<td>HMC</td>
<td>CMC1 (pickup)</td>
<td>GGM1</td>
<td>TMC1 / 5</td>
<td>1 Series Screws</td>
</tr>
<tr>
<td></td>
<td>4/6</td>
<td>CMC2 (transfer)</td>
<td></td>
<td></td>
<td>Torque 10 - 15 Ncm</td>
</tr>
<tr>
<td></td>
<td>OR</td>
<td>CMC-2G-2 (transfer)</td>
<td>LSMC1</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SFTMC-48 (scanning flag)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>LAD-MC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Titanium</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Screw torque:** 20 Ncm
Maxillectomy

(illustration is for 42.5 mm ONC implant)

NOTE: Site preparation sequence recommended by Southern Implants does not replace the judgement and experience of the surgeon.
Site Preparation Sequence

Exteriorised technique

(illustrations are for 42.5 mm ZYGEX implants)

Maxillectomy

NOTE: Site preparation sequence recommended by Southern Implants does not replace the judgement and experience of the surgeon.
Zygomatic Guided Surgery Drills

The Zygomatic implant range may be placed utilising the guided surgery drills (D-ZYG-27ST-GSL / D-ZYG-27ST-GSM), which initiate the osteotomy and create a Ø2.7 mm site at the same time.

Clinicians are able to either place the implant following the Ø2.7 mm drill (depending on the bone density) or can continue prepping the osteotomy site as per the recommended drilling protocol.

**NOTE:** The drill is intended for angulation guidance and has no physical stop for depth control. Depth control is still determined by the patient’s anatomy and the judgement and experience of the surgeon.

**NOTE:**
- The lip on the guide sleeve, adds 0.25 mm, this does not need to be taken into consideration as most Southern Implants drills extend 1 mm longer.
- Always plan for at least 2 mm from nerves / anatomical structures.
The depth of the prepared implant site and the angulation of the implant head are gauged by use of the angled depth gauge (I-ZYG-DG-1) and the try-in direction indicators (ZYG-TR-55).

The laser markings on the depth gauge correspond to the laser markings on the Zygomatic drills and the implant length.
CAUTION:
When drilling close to crucial anatomical landmarks, consider that the drill preparation site may be up to 1 mm deeper than the corresponding implant length.
DRILL INFORMATION

Ø2.9 mm
D-ZYG-29
D-ZYG-29S
D-ZYG-CH-29

Ø3.5 mm
D-ZYG-35
D-ZYG-35S
D-Z5F-M15

Counter-Sink (ø3.4 mm)
D-ZYG-CS
D-ZYG-CS-S
**TORQUE TABLE FOR SOUTHERN SCREWS**

## 1 Series screws (M1.4)

<table>
<thead>
<tr>
<th>Hex</th>
<th>Slotted</th>
<th>Unigrip</th>
</tr>
</thead>
<tbody>
<tr>
<td>TSH1</td>
<td>GSH1</td>
<td>BSH1 *</td>
</tr>
<tr>
<td></td>
<td>TSS1</td>
<td>GSS1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>BSS1 *</td>
</tr>
<tr>
<td></td>
<td>TSU1</td>
<td>GSU1</td>
</tr>
</tbody>
</table>

**NOTE:** Due to design revisions and changes, screw tips may be flat or rounded. Always ensure that the correct screw is used for the relevant implant and component. Refer to CAT-8068 for alternative slotted 1 Series screws.

- **Universal drivers are compatible with both 1.22 and 1.27 Hex screws:**
  - I-HD22U-S/M/L
  - I-HHD-22U-S/M/L
  - I-WI-22U-S-/M/L

## 2 Series screws (M2)

<table>
<thead>
<tr>
<th>Hex</th>
<th>Quad</th>
<th>Slotted</th>
<th>Unigrip</th>
</tr>
</thead>
<tbody>
<tr>
<td>TSH2</td>
<td>BSH2 *</td>
<td>GSQ22</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TSS2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>GSS2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>BSS2 *</td>
<td></td>
</tr>
<tr>
<td></td>
<td>TSU2</td>
<td>GSU2</td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** Screw TORQUE with PEEK Prosthetics:

- < Ø4.0 mm implant interfaces: 15 Ncm
- ≥ Ø4.0 mm implant interfaces: 20 Ncm

## 3 Series screws (M2)

<table>
<thead>
<tr>
<th>Hex</th>
<th>Slotted</th>
<th>Unigrip</th>
</tr>
</thead>
<tbody>
<tr>
<td>TSH3</td>
<td>GSQ3</td>
<td>TSS3</td>
</tr>
<tr>
<td></td>
<td>GSS3</td>
<td>BSS3 *</td>
</tr>
<tr>
<td></td>
<td>TSU3</td>
<td>GSU3</td>
</tr>
</tbody>
</table>

**NOTE:** Screw TORQUE with PEEK Prosthetics:

- 32 - 40 Ncm
- Head Diameter: 2.40 mm

## Digital Laboratory Analogue screw

<table>
<thead>
<tr>
<th>Hex</th>
<th>TORQUE: Finger tighten Head Diameter: 2.40 mm</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAD-S</td>
<td></td>
</tr>
</tbody>
</table>

Screw supplied with all Digital Analogues.

**NOTE:**

- Due to design revisions and changes, screw tips may be flat or rounded.
- Always ensure that the correct screw is used for the relevant implant and component.
- Refer to CAT-8068 for alternative slotted 1 Series screws.
- Blackened and for laboratory use only.
- Universal drivers are compatible with both 1.22 and 1.27 Hex screws:
  - HD22U-S/M/L
  - HHD-22U-S/M/L
  - IWI-22U-S/M/L

## Screw Head Connections

<table>
<thead>
<tr>
<th>Hex</th>
<th>Slotted</th>
<th>Unigrip</th>
<th>Quad</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Zygomatic Protocol Synopsis

Southern Implants is aware of a number of different protocols currently used by various centres around the world. The classic technique for zygomatic placement involved cutting a sinus window and placing the implant through the sinus. The sinus-slot technique and exteriorised technique have since been developed, with the implant placed through the sinus wall and outside the sinus wall respectively. It has been suggested that the choice of technique should consider the ridge crest concavity and sinus anatomy (Chrcanovic et al. 2013). The ZAGA approach classifies the anatomy into different types to determine the appropriate technique for Zygomatic implant placement (Aparicio et al. 2014).

While the chosen placement technique and implant choice is up to the practitioner’s preference, this section illustrates the best Southern Implants Zygomatic implant for each technique using the ZAGA approach.

### Zygomatic Protocol Synopsis

<table>
<thead>
<tr>
<th>Anatomy</th>
<th>ZAGA classification</th>
<th>Implant path</th>
<th>Alternate placement technique</th>
<th>ZYG-55</th>
<th>ZYGAN®</th>
<th>ZYGEX</th>
<th>ONC-55</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anterior maxillary wall is very flat</td>
<td>ZAGA 0</td>
<td>Intra-sinus</td>
<td>Classic</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Anterior maxillary wall is slightly concave</td>
<td>ZAGA 1</td>
<td>Intra-extra path</td>
<td>Classic/ sinus-slot</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Anterior maxillary wall is concave</td>
<td>ZAGA 2</td>
<td>Extra-intra path</td>
<td>Sinus-slot/ exteriorized</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Anterior maxillary wall is very concave</td>
<td>ZAGA 3</td>
<td>Extra-sinus</td>
<td>Exteriorized</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Maxilla and alveolar bone show extreme atrophy or maxilla has been resected</td>
<td>ZAGA 4</td>
<td>Extra-maxillary</td>
<td>Extra-alveolar</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

The quad protocol is placing two implants in one zygoma. The ZYGAN® and ZYGEX are best suited to the quad protocol due to their narrower apex.

The MSC Zygomatic implant (ZYG-55 and ZYGAN®) also captures the advantage of a specific roughness machined coronal surface area that covers the 6 mm crestal portion of the implant. Indicated for patients with higher risk of coronal bone loss (smokers, history of periodontitis and cardiovascular disease).

The new ZYGAN® 'Bone Mill Fixture Mount' aims to provide a multipurpose function where it performs as both the fixture mount required for insertion as well as a bone mill to prep the alveolar bone for abutment seating. The 'Bone Mill Fixture Mount' is designed with cutting edges which engage the alveolar bone at time of insertion.

For more information regarding the ZYGAN® Bone Mill fixture mount, refer to CAT-1219.

### References:

## IMPLANT DIMENSIONS AND INFORMATION

<table>
<thead>
<tr>
<th>RANGE</th>
<th>CORONAL DIAMETER</th>
<th>MACHINED DIAMETER</th>
<th>PROSTHETIC PLATFORM</th>
<th>ZYGOMA THREAD DIAMETER</th>
<th>AXIAL DIAMETER</th>
<th>PLATFORM OR HEAD ANGLE</th>
<th>IMPLANT LENGTHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ZYG-55</td>
<td>4.3</td>
<td>N/A</td>
<td>4.0</td>
<td>4.3</td>
<td>2.70</td>
<td>0.7</td>
<td>3.0</td>
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<tr>
<td>ZYGAN</td>
<td>4.3</td>
<td>3.4</td>
<td>4.0</td>
<td>3.4</td>
<td>2.70</td>
<td>0.7</td>
<td>3.0</td>
</tr>
<tr>
<td>ONC-55</td>
<td>N/A</td>
<td>3.5</td>
<td>4.0</td>
<td>4.3</td>
<td>2.70</td>
<td>0.7</td>
<td>3.0</td>
</tr>
<tr>
<td>ZYGEX</td>
<td>N/A</td>
<td>3.4</td>
<td>4.0</td>
<td>3.4</td>
<td>2.70</td>
<td>0.7</td>
<td>3.0</td>
</tr>
</tbody>
</table>

### NOTE:
- All dimensions in this catalogue are in mm, unless otherwise specified.
- Not all products are cleared for sale in all countries.
NOTE:
• The instrument kit has an intuitive layout to guide the surgeon through the drill sequence.
• Most instruments are available in short / medium / long.
• All instruments and tooling used during the procedure must be maintained in good condition, cleaned and sterilised prior to use. Please consult the Instructions for Use: Southern Implants instrument tray and reusable instruments (CAT-8003 and CAT-8070) for guidance concerning the maintenance of instruments and surgical trays. Please consult the corresponding drill Instructions for Use regarding care and maintenance of drills.
Retractor
I-ZYG-RET-1

Depth Gauges
I-ZYG-DG-1

NOTE:
• I-ZYG-INS-1 drives on the square of the fixture mount (silver handle for easy identification).
• I-ZYG-INS-2 drives on the hex of the fixture mount. The narrow hex tip allows for more visibility of the implant head (black handle for easy identification).

Insertion Tools
I-ZYG-INS-1
To fit square on fixture mount

or

I-ZYG-INS-2
To fit hex on fixture mount
This instrument tray is to be customised by the user to be suitable for use with the preferred implant system and its surgical or prosthetic items.

Most instruments are available in various lengths.
EXPLANATION OF LABELING SYMBOLS

The following symbols are used on packaging labels and they indicate the following:

1. Manufacturer
2. Colour code indicating platform diameter
3. Implant image
4. Implant details and size
5. Sterilisation using Irradiation
6. Sterile Barrier
7. Patient sticker for documentation purposes
8. Prescription device
9. Product description

For more information on Instructions for Use of our products, please scan the below, or visit our website southernimplants.com/ifu

CAUTION: FEDERAL LAW restricts the device to sale by or on the order of a licenced health care provider.
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