

Zygomatic implants

5 variations to match the ZAGA classification

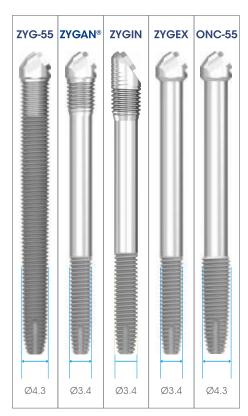


The Zygomatic implant range

5 tailored implant variations, designed to address the specific anatomical needs in the diverse ZAGA classification, ensuring optimal prosthetic outcomes.



The Zygomatic Difference



Anatomy	ZAGA classification	Implant path	Alternate placement technique	ZYG-55	ZYGAN®	ZYGIN	ZYGEX	ONC-55	
Anterior maxillary wall is very flat	ZAGA 0	Intra-sinus	Classic	\checkmark	\checkmark	\checkmark			
Anterior maxillary wall is slightly concave	ZAGA 1	Intra-extra path	Classic/ sinus-slot	\checkmark	\checkmark	\checkmark			
Anterior maxillary wall is concave	ZAGA 2	Extra-intra path	Sinus-slot/ exteriorised	\checkmark	\checkmark	\checkmark			
Anterior maxillary wall is very concave	ZAGA 3	Extra-sinus	Exteriorised		✓	✓	✓	\checkmark	
Maxilla and alveolar bone show extreme atrophy or maxilla has been resected	ZAGA 4	Extra- maxillary	Extra- alveolar				✓	✓	



Machined Surface

The MSC Zygomatic and ZYGAN $^{\scriptsize (8)}$ implants also capture the advantage of a specific roughness machined coronal surface area that covers the top crestal 6 mm of the implant.



Popular Co-Axis®

Built-in 55° Subcrestal Angle Correction® eliminating the need to use angled abutments. This results in a greater volume of facial tissue and facilitates screw retained prosthetics.



ZYGAN® Bone Mill Fixture Mount

Performs as both the fixture mount required for insertion as well as a bone mill to prepare the alveolar bone for abutment seating.



ZYGIN Narrower Implant Head and Apex

This implant is especially useful for severely atrophied maxillae. **NOTE**: uses different compact conical abutment.

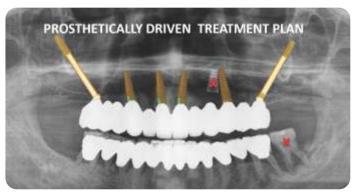
Site specific Zygomatic implants for full arch rehabilitation

Clinical treatment by: **Dr Costa Nicolopoulos and Dr Petros Yuvanoglu** (Greece & UAE)

Full arch rehabilitation in patients who present with maxillary atrophy can present with various ZAGA classifications which require different surgical techniques. The choice of technique should consider the ridge crest concavity and sinus anatomy. Depending on the anatomy, Southern's Zygomatic range offers the clinician the choice of choosing the implant that is best suited to the ZAGA classification and placement technique.



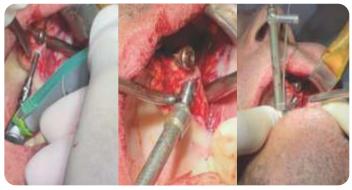
1. The patient presents with failing dentition, infection at a failed implant site and resorbed alveolar bone in the maxilla.



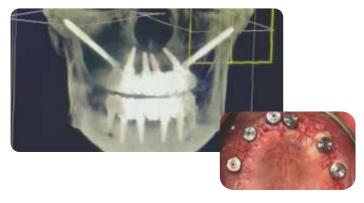
2. A prosthetically driven treatment plan is proposed to remove the failed implant and restore the maxilla by utilising 2 Zygomatic implants (ZYGAN® and ZYGEX) to be placed alongside Co-Axis® implants.



3. The patient presents with a ZAGA 4 classification in the first quadrant. A ZYGEX implant is placed using an extra-maxillary approach, taking advantage of the smooth mid-section and non-threaded coronal section.



4. In the second quadrant, a ZAGA 3 classification indicated the need for a ZYGAN® implant. The implant is placed using an extra-sinus approach. Taking advantage of the smooth midsection and threaded coronal section for alveolar bone engagement.



5. The Co-Axis® implants provide optimal prosthetic emergence with sufficient primary stability to provide an immediate restoration. Passive suturing is done to close the gingiva around the bone graft and healing abutments.



6. Six month follow-up shows healthy tissue with optimal prosthetic outcomes.

"Machine surfaced, means reduced problems with soft tissue retraction and cleanable implant surfaces if implants are exposed in the oral cavity."

Dr Stavros Eleftheriou (UK)

"The Zygomatic implant range (in combination with the machined surface) ensures optimal implant positioning in available bone."

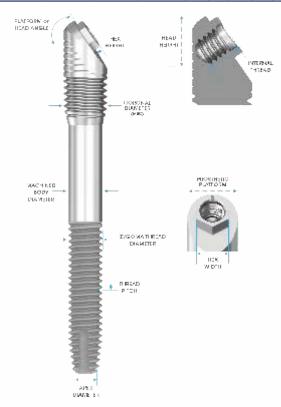
Dr Riz Syed

"Southern Zygomatic implants have different designs to perfectly match patients anatomy and ZAGA class, to achieve predictable long term results."

Dr Pietro Ferraris

Implant Range

PRODUCT CODE	THREADED CORONAL DIAMETER	MACHINED BODY DIAMETER	PROSTHETIC PLATFORM	ZYGOMA THREAD DIAMETER	DIAMETER	PLATFORM ANGLE	1MP 27.5		HS 37.5	40	42.5	45	47.5	50	52.5	55	57.5	60
ZYG-55-xxN	4.3	N/A	4.0	4.3	3.0	55°			 	√	√				$\sqrt{}$			
ZYGAN-xx	4.3	3.4	4.0	3.4	2.8	55°		 √	 		√				√			$\sqrt{}$
ZYGIN-xx	4.3	3.4	4.0	3.4	2.8	55°		 	 		√		$\sqrt{}$		$\sqrt{}$			$\sqrt{}$
ZYGEX-xx	N/A	3.4	4.0	3.4	2.8	55°		 √	 1	V	V		$\sqrt{}$	√	V		1	$\sqrt{}$
ONC-55-xxN	N/A	3.5	4.0	4.3	3.0	55°	√	1	1		V		V					



References

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 Boyes-Varley, J.G., Howes, D.G., Davidge-Pitts, K.D., Brånemark, P.I. and McAlpine, J.A., 2007. A protocol for maxillary reconstruction following oncology resection using zygomatic implants. International Journal of Prosthodontics, 20(5).

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