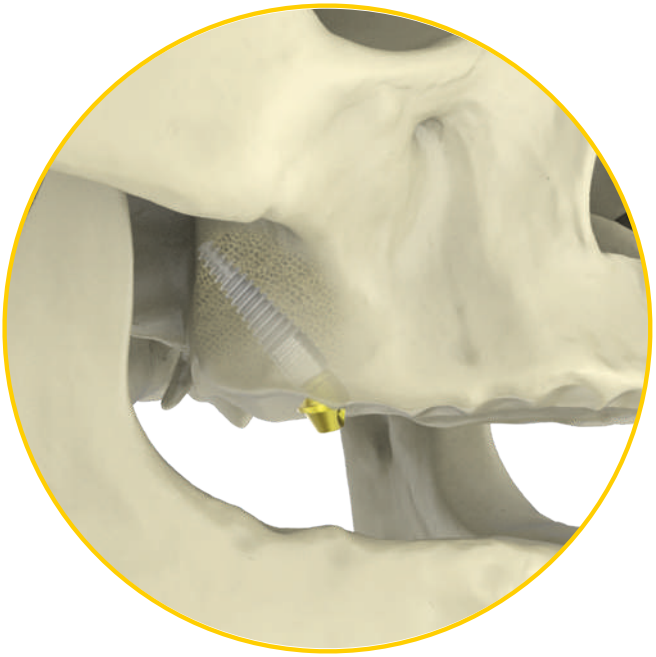
SOUTHERNIMPLANTS®
Innovative Treatment Solutions

Pterygoid implant

A solution for the atrophic maxilla by achieving anchorage in the pterygoid

A new generation Pterygoid implants

In full arch cases, clinicians aim to maintain a large AP spread without compromising their primary stability. Southern's Pterygoid implant adds another tool to the clinician's armamentarium to enable optimal clinical outcomes.

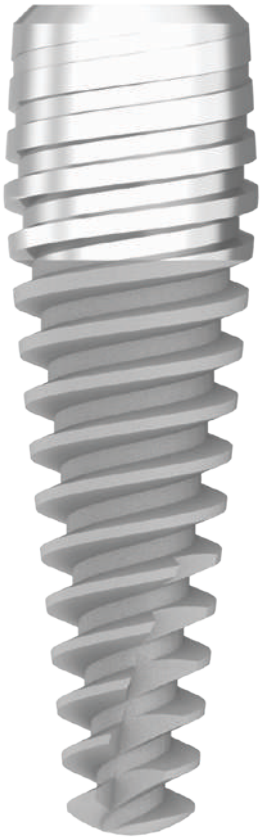


The Pterygoid Difference

4 mm MSC Coronal Section
Engineered to reduce bacterial adhesion and risk of peri-implantitis.

Different Implant Lengths
Available in 13 mm, 15 mm, 18 mm and 20 mm.

Self-Tapping Thread Design
Achieve optimal anchorage with a more aggressive thread pitch (1.6 mm) and tapered design.



Deep Conical (DC4) Connection
An internal conical connection, providing a tight implant-abutment seal.

SInergy Surface
Prosthetic platform shift in each of the available configurations.

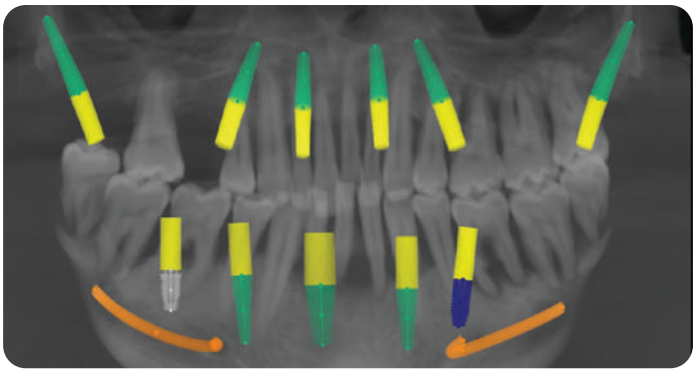
Narrower Apex
A 2 mm apex designed to achieve stability in underprepared sites.

Utilising the Pterygoid implant in the pterygoid region to achieve an increased AP spread

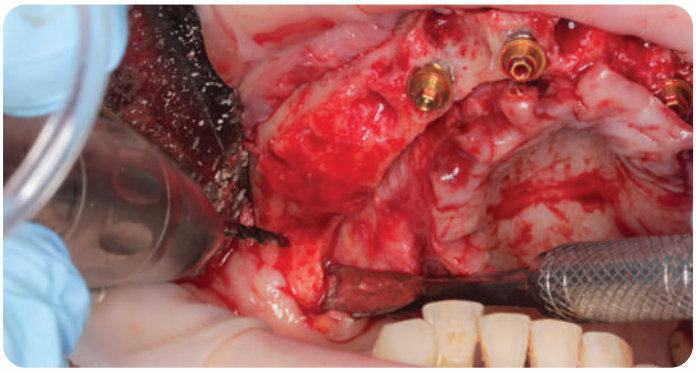
Clinical Treatment By: **Dr Rudi Mukherjee** BDS PGCertEd
(United Kingdom)

In full arch cases, clinicians aim to maintain a large AP spread without compromising their primary stability. Southern's Pterygoid implant adds another tool to the clinician's armamentarium to enable optimal clinical outcomes. Specialised design features increase the users' ability to attain high primary stability in soft bone sites, decreasing the need for bone grafting and sinus lifting. This allows clinicians to achieve better AP spread in cases of severe atrophy.

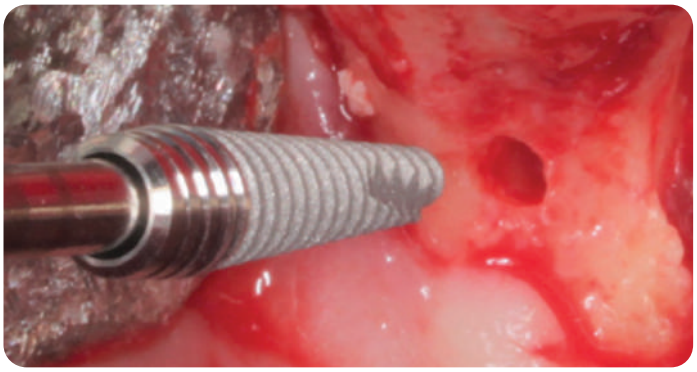
1. Patient presents with failing dentition requiring a full arch implant restoration. Preoperative planning indicates anatomical constraints suggesting the need for site specific implants.



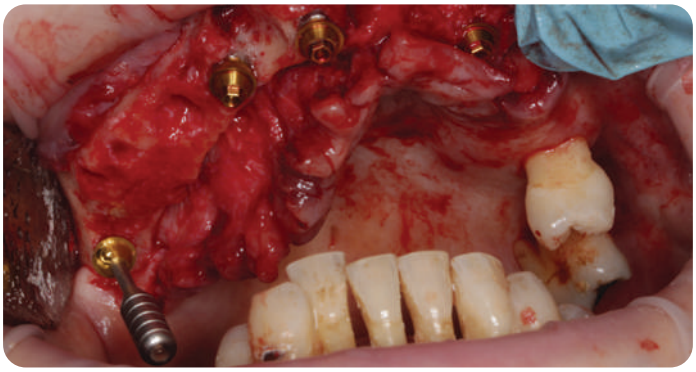
2. A surgical plan is formed to utilise 6 implants in the maxilla and 5 implants in the mandible. To increase the AP spread, the DC pterygoid implant is utilised.



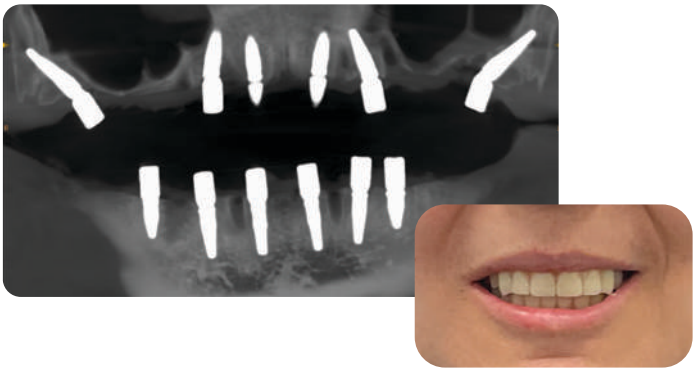
3. A 2 mm twist drill is used to prepare the osteotomy in the pterygoid region.



4. The DC Pterygoid implant is placed into the pterygoid region.



5. An angled compact conical abutment is placed for prosthetic angle correction.



6. Post-operative panoramic radiograph shows a wide AP spread and stability in a low density bone site enabling an immediate loading prosthesis to be fitted.

"Utilising the fantastic track record of the DCT 4 mm range and tweaking it for soft bone applications enables our customers to treat more patients more effectively."

Graham Blackbeard
(Managing Director, Southern Implants)

"I use these implants in the Pterygoid region 99% of the time when I require high primary stability in soft bone sites."

Dr Rudi Mukherjee
(UK)

"Easy to place aggressive enough to use one drill to prepare the osteotomy. Always good primary stability and I like the Deep Conical connection."

Dr Izabela Turek
(UK)

Implant Range

DEEP CONICAL (DC)

PRODUCT CODE	Major Diameter	Platform Width	Prosthetics	Connection Diameter	Thread Pitch	Apex Diameter	LENGTH (MM)					
							13	15	18	20	22	24
PT-DC40xx	3.7	3.7	4.0	2.8	1.6	2.0	√	√	√	√	√	√

References

1. Abboud, M., Rugova, S. and Orentlicher, G., 2020. Immediate Loading: Are Implant Surface and Thread Design More Important Than Osteotomy Preparation?. Compendium, 41(7).
2. Caricasulo, R., Malchiodi, L., Ghensi, P., Fantozzi, G. and Cucchi, A., 2018. The influence of implant-abutment connection to peri-implant bone loss: A systematic review and meta-analysis. Clinical Implant Dentistry and Related, 20(4), pp.653-664.
3. Ackermann, K.L., Barth, T., Cacaci, C., Kistler, S., Schlee, M. and Stiller, M., 2020. Clinical and patient-reported outcome of implant restorations with internal conical connection in daily dental practices: prospective observational multicenter trial with up to 7-year follow-up. International journal of implant dentistry, 6(1), pp.1-9.

For more information
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or contact your Southern Implants Representative
or visit southernimplants.com

SOUTHERNIMPLANTS®
Innovative Treatment Solutions

South Africa – Headquarters 1 Albert Road, Irene, RSA
T: +27-12-667-1046 | **E:** info@southernimplants.com

EC REP
Southern Implants Europe AB Holmgatan 30, S-791 71, Falun, Sweden
E: ecrep@southernimplants.com

Subsidiaries

Australia
Southern Implants Australia
T: +61-2-8076-9337
E: info@southernimplants.com.au

Spain and Portugal
Southern Implants Ibérica
T: +34 935 053 507
E: info@southernimplants.es

United Kingdom and Ireland
Southern Implants UK
T: +44-20-8899-6845 / 6 / 7
E: info@southernimplants.co.uk

USA and Canada
Southern Implants North America Inc.
T: +1-561-472-0990
E: customercare@southernimplants.com

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