Using WINSIX® Implant System means offering the Patient a choice of quality which will contribute to enhancing a relationship of esteem and trust.

Why WINSIX® IMPLANT SYSTEM is growing so fast? The reasons for such a significant growth...

WINSIX 20 YEARS
1995 • 2015

Strongly based by the Italian know-how on esthetic dentistry, scientific research and technological innovation, WINSIX® IMPLANT SYSTEM **celebrates 20 years of science-based reliability and clinical use, and opens new markets for distribution.**

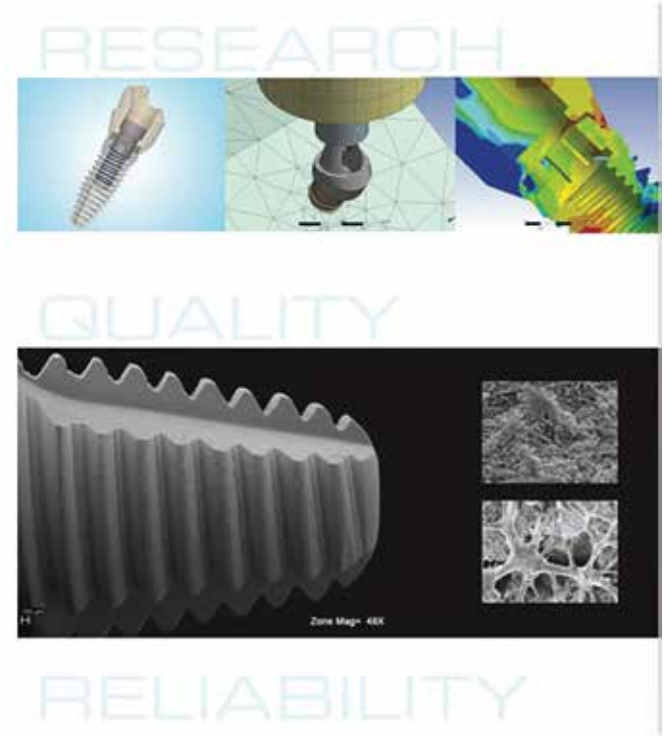
Over all these years the profound knowledge of the field, the attention paid to the dynamics of the social and health market, together with the sensitivity towards Dental needs have been readily incorporated into the company's slender production structure. This is thanks to an efficient Research Development Department and consolidated relationships with international reference Research Centers where the principles of ***translational research*** are daily applied.

The evolution of WINSIX® and the attention paid to quality and regulations, is also evident from the series of Brands registered from 1995 to the present, whose recently the international Patent CAB®.

IMPLANT QUALITY ASSURED: **materials, production, packaging**
The quality of WINSIX® devices is assured in every single phase of the production, ranging from the Titanium supplying sites, to 1:1 (not random) post-production controls over surface and connection, to implants packaging, consisting of a special Titanium housing placed into the vial, to grant the sterility of the content. Professionals are thus allowed to operate efficiently and in complete confidence.

Products are EC and FDA approved and, thanks to their high quality, can enjoy a civil liability insurance.

Last but not least, continuity aside technological innovation are the distinguishing factors of WINSIX® Implant System **devices.** During their course of development, the solid scientific background on which implants, prosthetic accessories and surgical instruments are based, has permitted to innovate products rendering them compatible with previous ones, thus avoiding Dental Teams the necessity of changes in operative sequences and costly substitution of materials.



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www.implantologiawinsix.com
AppStore: WINSIX 1995

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FDA APPROVED

8-YEAR RETROSPECTIVE ANALYSIS OF IMPLANTO-PROSTHESIS TREATMENTS RESULTS ACHIEVED WITH WINSIX® SYSTEM

Authors: Operative Dental Unit - University Vita Salute, San Raffaele Milan, dir. Prof. Enrico F. Gherlone

Materials & Methods. 2998 implants positioned in 1354 patients were evaluated, between March 2006 and March 2014 at Dentistry Unità Operativa Complessa of I.R.C.C.S. San Raffaele Hospital in Milan. Out of these implants, 2381 were placed in 1271 patients that regularly attend the maintenance care program at the Oral and Prevention Hygiene Centre at the Dentistry U.O.C **(Graph 1).**

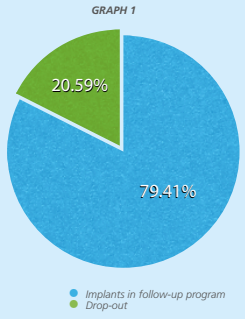
The remaining patients did not subscribe the maintenance care program. In patients undergoing the maintenance program it was possible to collect, for each implant, the clinical parameters needed to evaluate the health status of the implant site: probing pocket depths (PPD), bleeding on probing (BoP), x-ray evidence of peri-implant bone resorption and mobility.

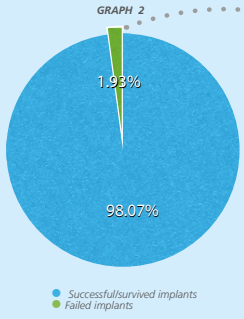
Data analysis. Out of 2998 implants, 1.93%, failed, equal to 58 units placed in 56 patients, showing a failure incidence rate in line with the results reported in the literature **(Graph 2).**

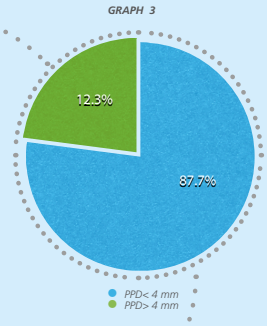
It was observed that among the 58 failed implants, 14 were placed in smoking patients and 35 in patients already suffering from periodontitis. Limiting the analysis to the patients undergoing the follow-up program, the failure incidence decreases to 1.3%, equal to 31 implants. Among the same patients, 87,7% shows a PPD average data < 4mm (8358 probing sites out of 9524 in total), obtained by 4 sites for each implant **(Graph 3).**

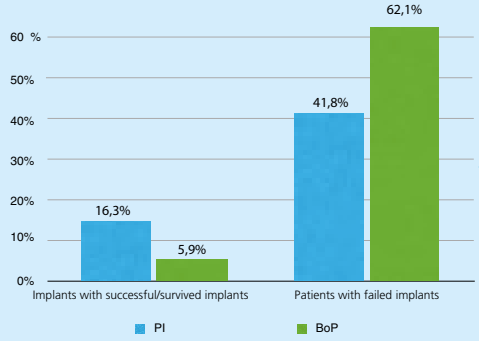
Finally, the average data of O'Leary plaque index (PI) and of bleeding on probing (BoP) in patients under maintenance care were analyzed and, in those subject who faced implant loss, both parameters were definitely higher than that observed in those patients whose peri-implant tissues show healthy conditions. In particular, PI average data in patients whose peri-implant tissues show healthy conditions is 16.3% and BoP is 5.9%. In patients who faced implant failure, the average data are 41.8% and 62.1% respectively. **(Graph 4).**

Conclusions. In search of long term success in implant-supported prosthetic rehabilitations, a maintenance care program adjusted to the patient's needs and characteristics proves to be an essential factor: it is a useful tool for preventing periodontitis and for precociously intercepting the beginning of inflammatory processes in peri-implant tissues and/or mechanical problems of the implant-prosthetic system. The reduction of the failure rate observed in patients undergoing the above follow-up program can be considered an element probing the efficacy of such a clinical attitude, even without investigating on the microbiological phenomena that have led to these results.









PLAQUE AND BLEEDING INDEX OF PERI-IMPLANT TISSUES CONNECTED TO IMPLANT SUCCESS OR FAILURE.