



B&B DENTAL
IMPLANT COMPANY

T-BARRIER COLLAGEN MEMBRANES



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T-Barrier Collagen is an absorbable membrane made of collagen from equine origin for the protection of the implant sites. It can be easily placed on the site after bone grafting without any fixation. The membrane provides a perfect basis for hard and soft tissues healing and creates a favorable environment for bone regeneration, allowing on-site osteogenic cell growth, while preventing the unwanted migration of cells. It can also be used as a local haemostatic. T-Barrier can function also as a balanced barrier with a controlled reabsorption avoiding any inflammatory reaction in the soft tissues. T-Barrier is available in a wide range of sizes.

INDICATION

- Protection of peri-implant bone defects
- Closure of small tears of the sinus membrane
- Restoration of small bone dehiscences
- Small post-extractive socket protection
- Sinus bone access coverage in sinus lift procedures

Ref. B-00223 membrane sizes: 23 x 23 x 0.25*mm

Ref. B-00223/1 membrane sizes: 10 x 10 x 1*mm

Ref. B-00223/2 membrane sizes: 10 x 20 x 0.25*mm

Ref. B-00223/3 membrane sizes: 15 x 20 x 0.25*mm

Ref. B-00223/4 membrane sizes: 20 x 30 x 0.25*mm

Ref. B-00223/5 membrane sizes: 30 x 40 x 0.25*mm

* ± 0.85 mm

MAIN PROPERTIES

- Equine type I atelocollagen
- Totally safe and biocompatible
- Easy to apply
- Fully absorbable from 6 to 8 weeks



INSTRUCTION FOR USE

- The membrane can be cut and reshaped.
- Rehydrate the membrane with sterile saline solution at room temperature for a few minutes. In the presence of bleeding it is possible to apply the device without hydrating it first.
- Apply the rough area in contact with the area to be treated under asepsis conditions by exerting slight pressure.
- Cover with the overlying flap.

CLINICAL CASE

Patient with horizontal and vertical bone defect, in need of a delayed implant rehabilitation. The implant site has been prepared with the use of manual compactors to avoid the damage of the vestibular bone wall.



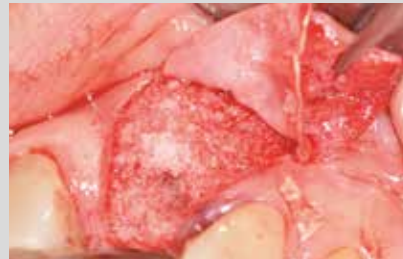
Opening and detachment of the flap. The vertical bone defect is evident. The bone is D3-D4 type.



Implant site preparation with the use of compactors for expansion and insertion of an EV implant.



Inserted implant and evident horizontal bone defect.



The bone defect is filled with heterologous graft covered with a collagen membrane (TBarrier)



Soft tissues after complete healing.



Loaded implant.



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UNI EN ISO 13485