

Straumann® TLX Implants Designed for High Primary Stability and Immediate Protocols

As a dentist who has been in private practice for 22 years and an educator who has served in multiple positions at New York University College of Dentistry, including head of the post-graduate program in Periodontics and Implant Dentistry, Edgard El Chaar, DDS, MS, has seen a litany of changes and evolution in implant dentistry.

“When uncovering a dental implant, we used to put one hand on our heart and the second on the driver and pray that the implant would not reverse out after 6 months of healing,” he says only half-jokingly. “Today, we don’t have to think that way because of the huge leap forward the industry has taken in the design of implant threads and surface treatment.”

One of El Chaar’s most recent accomplishments is participating with the team

that created the Straumann® TLX Implant System, which offers fully tapered tissue-level implants (TLX) that are designed for high primary stability and immediate protocols.

“I was privileged to conduct an animal study and work on the design with the engineers of Straumann in Switzerland,” he says. “It is amazing to see the development of the implant in different stages, from being a drawing, to a prototype, to testing in pre-clinical, to finally placing it in our patients.”

El Chaar explains that apical primary stability is an important step in the success of an implant placed in an immediate fashion. “The apical thread design of the TLX gives it stability in this important part of the process. Additionally, the use of this implant in posterior immediate placement can be preferred to a bone-level implant design because the septal bone is more apical than the coronal buccal and lingual, which in a

bone-level implant can pose a challenge with a deeply placed implant–prosthetic interface,” he says. “The TLX brings the interface more coronal, which contributes to protecting the crestal bone and improving plaque control—key in protecting against peri-implantitis. This is a feature well-proven in tissue-level implants throughout 30 years of reported cases.”

In terms of prosthetic-driven planning, the benefits to using Straumann TLX are numerous, El Chaar states. “This is especially so when you have a long crown-to-crestal bone level ratio, particularly when that discrepancy is between two adjacent implants. This means one implant crestal bone level is more coronal to the second one, which is more apical,” he explains. “Combining a TLX with a Straumann® BLX (bone-level implant) can reduce that discrepancy by placing the BLX more coronal at bone level and placing the TLX in the more apical position. This way you can create an almost similar prosthetic–implant interface between the two adjacent implants.”

El Chaar says the advances being made in implant design are bringing implant dentistry to a new level. “Utilizing both the TLX and BLX forms a different category/generation of implants,” he says. Both systems use one common drill set and TorcFit™ connection for maximum compatibility.

And for those clinicians who still have reservations over trying something new?

“For my fellow surgical colleagues who say change is difficult to accept, I too was reluctant myself, but then I tried it,” El Chaar says. “I never went back or looked back to any other implant type. I enjoy using this tissue-level implant immensely.”

“

The Straumann® TLX brings the interface more coronal, which contributes to protecting the crestal bone and improving plaque control—key in protecting against peri-implantitis. This is a feature well-proven in tissue-level implants throughout 30 years of reported cases.



STRAUMANN

800-448-8168
straumann.us/tlx