

FAQ Frequently asked Questions

Question

How the implant won't come off, yet there is no thread ?

Answer

The implant won't come off because of the very high elasticity of compact bone - like a nail in wood. This effect begins immediately with insertion of implant. Thus there is a high primary stability achieved without damage to the cortex by screw thread. Until the osseointegration stability increases permanently.

Question

How to drill an oval cavity exactly ?

Answer

First drill up to 4 mm Ø. Then a mark at a distance of 1.5 mm from the hole is made using the gauge. After that use a drill with 3.5 mm Ø and tilt the drill with a non-cutting head up to the mark.

>>> For illustration see our video !

Question

ROSI™ implant has no active surface. Thus the connection to the bone is worse?

Answer

The material for dental implants have to be biologically inert (no reaction). In this respect, the term "active surface" is confusing. The size of the playing surface in principle does not matter for the static friction.

However, the friction coefficient can be influenced by covalent bonds between bone and in titanium-oxide stored hydroxyapatite. This assumes however, that osseointegration has already happened. One must take into account that thicker TiO₂ layers can be sheared off during insertion and thus Ti-nanoparticles could easily distribute in the body (Ruby et al.). For non-rotationally symmetrical implants (e.g., ROSI™) coating the surface so far is irrelevant, since they can not rotate because of their shape.

Question

Are there long time studies with ROSI™-Implants ?

Answer

See DOWNLOAD Case Study.

After osseointegration has taken place, many other non-implantation factors are relevant for success. This starts with the correct prosthetics and oral hygiene concerns, but also with overall physiological condition of the patient, and others factors.

Question

Why buy expensive implants, if there are cheap ones used successfully ?

Answer

Only completely similar products can be compared to price. Therefore you have to interpret the word "success". Our ROSI™ implants minimize the risks associated with screw-implants and our implants shorten the healing time considerably.

Question

How can one be sure that with ROSI™ implants osseointegration takes place?

Answer

Osseointegration can be detected visually. Using RF-analysis finding is confirmed.

Question

There are blade implants for long time. What will be new at this ROSI™ implants ?

Answer

The design is completely different and the handling is easier. It is an oval implant, similar to a tooth root, which primarily can not be rotated.

Question

Why should there screw off titanium-nanoparticles with screw implants, but not with ROSI™ implants ?

Antwort

The surface with ROSI™-implant is not loosened by blasting with Al_2O_3 . Therefore the risk of detaching nanoparticles is much lower. Also ROSI™-implant is not screwed with torque.

Question

Are there any studies showing that immediate implantation is possible with ROSI™-implants ?

Answer

Whether immediate, early or late implant placement is recommended, will be to decide in individual cases. The loss of the bony papilla however is aesthetically very unsatisfactory in the anterior region. So in this case late implantation should not take place. Implantation of a single screw-implant in this area will bring significant risks. On the one hand an immediate provisional restoration is desired, on the other hand the risk of micro-movement is enormous. Use of ROSI™-implants significantly reduces these problems.

Question

In the described early implantation 2 ROSI™-implants are splinted by means of crown. This you can do with screw implants as well. So what should be the advantage of the ROSI™-implants?

Answer

Shorter healing time, earlier prosthetics care, treatment more comfortable for patient.

Question

What strengths and lengths are with ROSI™-implants?

Answer

Our implants have the lengths 7, 9 or 11 mm.

The surface of the head of the enossal part is identical in all lengths 4 x 5.5 mm.

Question

If few space is available and I need an implant with diameter 3 mm, then there is no implant in your program. Do we need a 3 mm Ø screw implants in this case?

Answer

Screw-implants should have a distance of 1.5 up to 2 mm to the adjacent tooth. The reason for this is the remote effect of the thread pinch. This also applies to thin labial bone lamella. To place screw implant 3 mm diameter, you therefore need a distance of 6 to 7 mm between two roots. If there is this place, you can use a ROSI™-implant.

Question

From what material are the ROSI™-implants?

Answer

Titan Grade 5, Ti6Al4V

Question

My implantations are 99% successful. Can you say so with your implants?

Answer

ROSI™-implants minimize a number of risks with screw-implants and have a number of benefits (see [DOWNLOAD Risks associated with conventional screw implants](#)).

Question

When the 3,5 mm bore tilting was too far (more than 1,5 mm), then the ROSI™-implant has primarily no stability and thus osseointegration won't happen. Is this right ?

Answer

Basically, a successful healing is only possible when the implant is primarily stable with insertion. Even tilting the bore (3.5 mm diameter) more than 1.5 mm, movement is not possible, because ROSI™-implant has at its other side a diameter of 4 mm.

Question

How do I measure accurately the tilt of 1.5 mm?

Answer

With a measuring instrument (gauge) you can specify the length of the tilt and set a marker with sharp probe and round bore (see video). Because of the conical shape of the implant minimal divergence will be insignificant.

Question

What happens if I have tilted the bore too little?

Answer

Then ROSI™-implant does not fit completely in the cavity and you have to repeat the tilting process.

Question

What about retention of healing abutment on 1-piece implant when there is no screw ?

Answer

The retention of the healing abutment can be increased with temporary cement or Ledermix.

Question

Can I carry out moulding immediately after placing ROSI™- implant ? If so, how to exercise ?

Answer

2-piece implant:

After suturing the gingiva the impression post can be bolted directly to the healing abutment and thus the impression is immediately possible.

1-piece implant:

After suturing the gingiva with attached impression post impression is possible immediately after insertion.

In every case weigh carefully which method is preferable. Only after healing of the gingiva and convincing stability of implant together with RF-Analysis the prosthetic suprastructure can be made.