

MAIN CHARACTERISTICS SUBPERIOSTEAL IMPLANTS



IMPLANT STRUCTURES



Manufactured with Titanium grade XXIII (23).

Grade XXIII (23) titanium is very similar to grade V (5) titanium, except that grade XXIII (23) has less oxygen, nitrogen and iron. This makes the alloy more ductile and has better fracture toughness.

Grade XXIII (23) titanium, with its added palladium content, offers superior corrosion resistance to Ti Grade V (5). This makes it an excellent choice for medical implants, where resistance to body fluids and corrosion is crucial.

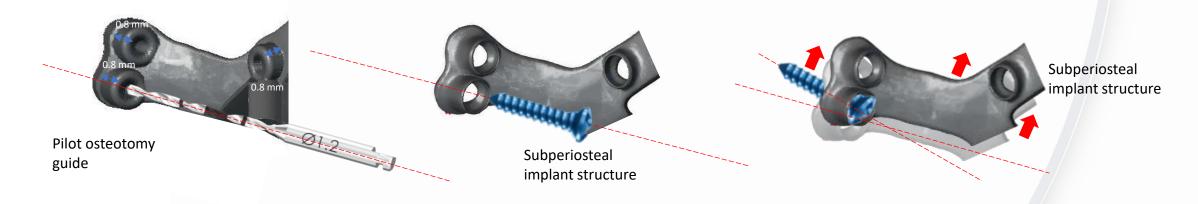




Designed with pilot screw holes.

The osteotomy guide screw holes have a piloted insertion design that protrudes from the guide by 0.8mm. This design allows the pilot drill to be inserted in a certain direction, which is the direction the screws were planned by the engineers.

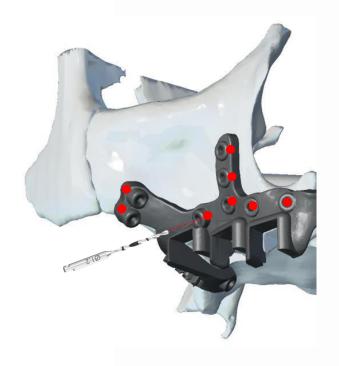
With this design the screws will never be introduced in a direction different from the planned one and will not affect dangerous anatomical spaces, moreover the implant structures will be positioned in the planned position, since an incorrect drilling facilitates the incorrect direction of the osteotomy screws and a possible displacement of the implant structures.

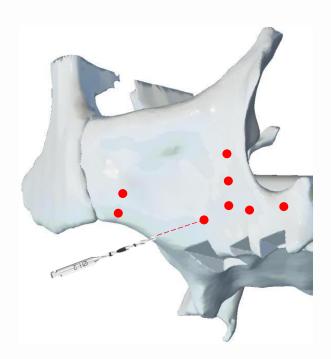


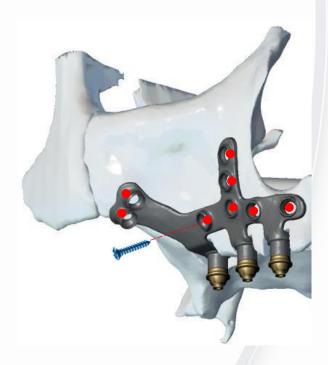


Designed with all the screw holes of the structures.

The osteotomy guide has all the screw holes of the implant structures, the guide facilitates the pilot drilling with the correct direction so that the screws are screwed in the correct direction and do not modify the position of the structures.



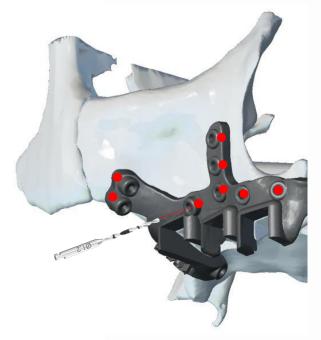


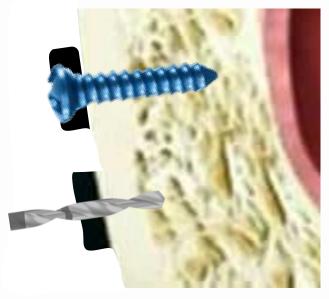


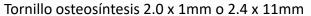


Pilot drill diameter of 1.2 mm

The pilot drill has a diameter of 1.2 mm and ONLY 2 or 3mm is introduced into the bone, the minimum for the insertion of the osteosynthesis screw to be piloted, WITHOUT losing stability of the screws at the moment of fixation of the structures.









Fresa piloto Ø 1.2 mm introducida solo 3 o 4mm

Drawer design.

The drawers of the guide are designed for correct positioning of the arms of the implant structures. The arms are 5mm, on each side of the drawers 1mm is added to allow the arms to be positioned correctly as the drill cannot reach the right angle of the drawers.



A larger vestibular step is designed to provide a support point for the osteotomy reamer, so that the cut is parallel to the guide and the arms of the structures will passively seat to the bone.





Macro osteotomy guide.

The macro structure fits the osteotomy guide to verify correct osteotomies of the drawers. If the macro fits, the osteotomies are correct, if they do not fit the osteotomies should be improved.











OSTEOTOMY REAMER



2.0 mm diameter milling cutter.

Special 2.0 mm tungsten carbide bur for horizontal cutting, for a correct osteotomy that allows to reach the angles of the drawers of the osteotomy guide.



IMPLANT STRUCTURES



Implant connections.

Subperiosteal implant frameworks can be fabricated with Multiunit abutment connections or external hex connection (Branemark RP) in order to be able to screw Multi-unit abutments.



Antibacterial gold coating reduces wear, increases screw retention and improves esthetics.

Preservation of titanium biocompatibility and gingival integration.





External hex implant connection



Multi-unit abutment implants connections

IMPLANT STRUCTURES

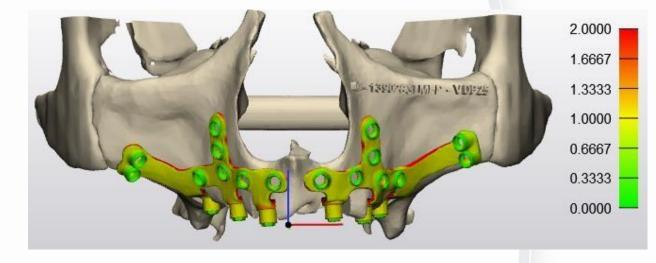


Thickness of 0.8 mm.

The structures are manufactured with a maximum thickness of 0.8 mm to eliminate possible future exposures and guaranteed in the final surgical report in color, green 0.8 mm.



The structures are designed with flushes for the heads of the osteotomy screws, the flush is designed according to the screw angle to eliminate possible exposures.







CT CAPTURE



Clinical CT Cone Bean can be used.

CT Cone Beam, thanks to the use of artificial intelligence postprocessing, facilitates the conversion of Dicom files into high quality and reliable 3D images.



KUNE IMPLANTS ENGINEERS

 Engineers specialized and trained in craniofacial and maxillofacial.

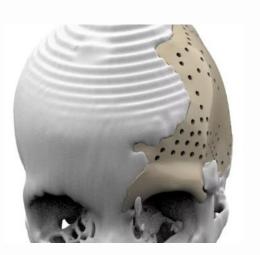
Kune implants are specialists in craniofacial and maxillofacial treatments, so their engineers have a high level of knowledge, substantially improving the planning of subperiosteal implants. https://www.kuneimplants.com/.

Revision in remote control.

The medical professional or prescriber can request a remote control meeting to visualize in detail the planning made by the engineers, to make improvements or simply to verify in more detail the suggested planning.









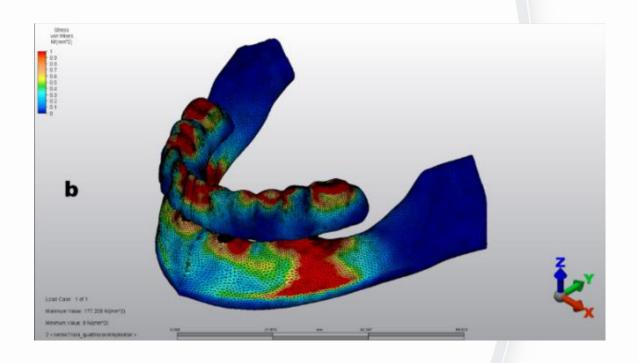


KUNE IMPLANTS ENGINEERS



Finite element study.

Kune implants performs during the entire planning and design process of subperiosteal implants, finite element studies to detect deficiencies and weak points, with the objective of making small modifications and eliminating failures in the medium and long term.

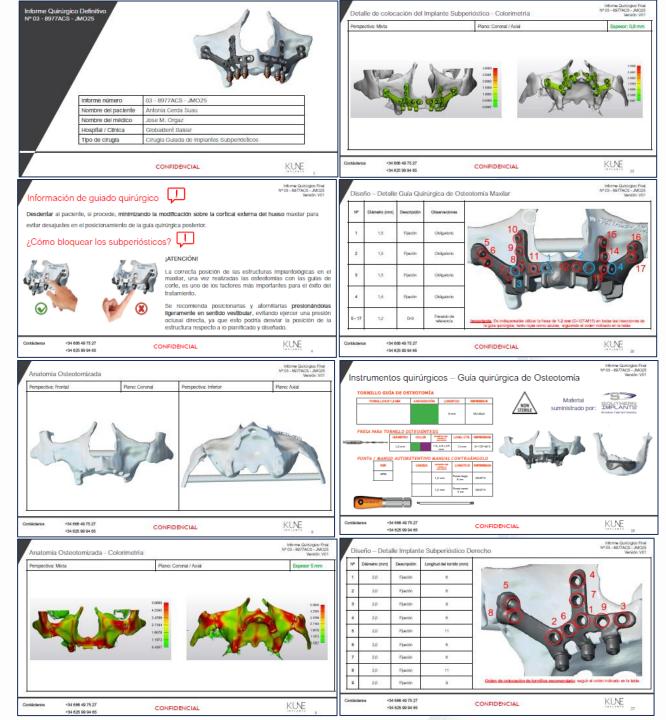


SURGICAL REPORT

Extensive surgical report.

Kune Implants engineers a comprehensive and extensive surgical report of approximately 25 to 30 pages to perform a successful surgery.

Contenido					
Uds	PSI Solution	Referencia	Descripción	Meterial	Previsualización
1	SI-L	03 - 8977ACS - JM025	Implante Subperióstico Izquierdo	TI-8AI-4V	The
1	SI-R	03 - 8977ACS - JM025	Implante Subperióstico Derecho	TI-8AI-4V	1
1	8G-O	02 - 8977ACS - JMO25	Guis Quirúrgice de Ostectomia Maxillar	Pollamida	fresh
1	SG-P	02 - 8977ACS - JM025	Guis Quirúrgics de Comprobación de Ostectomía Maxilar	Pollamida	
1	Biomodelo	01 - 8977ACS - JMO25	Biomodelo Anatómico	Polamida	-
1	Biomodelo	01 - 8977ACS - JMO25	Biomodelo Anatómico Osteotomizado	Polamida	The same of the sa



NEW SURGICAL MATERIAL



New surgery kit.

All instruments and osteotomy screws are delivered in a surgical kit, to facilitate the surgery and to have all the material grouped together.

