

The specific case

Management of
a massive follicular
cyst defect with
CERASORB® M

CERASORB®-Promise

CERASORB®.

Keeps its words in bone regeneration.

The specific case

+ Follicular cyst treatment

Management of a massive follicular cyst defect with **CERASORB® M**

*“Since the goal is a physiological bone regeneration, **CERASORB® M** is an ideal choice in this case. The interconnecting, open cellular-porous structure is a good platform for vascularisation, biocompatibility and bone regeneration.”*

PD. Dr. Dr. Arwed Ludwig

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+ Case History

T = Months

A 9-year old patient with an extensive follicular cyst in the region 23 was examined in the clinic [Fig. 1]. Due to large extension towards the maxillary sinus, an urgent cyst-removal was necessary [Fig. 2 and 3].

[Fig. 1]

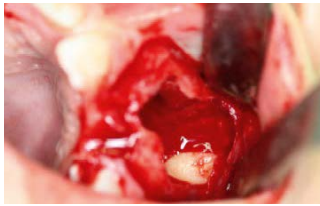


Pre-op panoramic scan [Fig. 1].

Take home messages

- + Fully resorbable, biomimetic pure-phase bone graft materials, such as **CERASORB® M**, can offer appropriate solutions for the management of large cyst defects.
- + The results can always be reproduced, which is important when treating young patients with incomplete bone maturity.
- + The quality of the regenerated bone tissue is the same as native bone.

[Fig. 2]



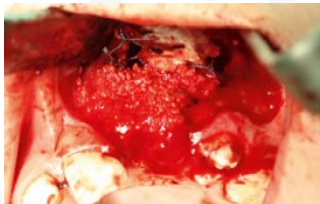
Cyst extirpation [Fig. 2].

[Fig. 3]



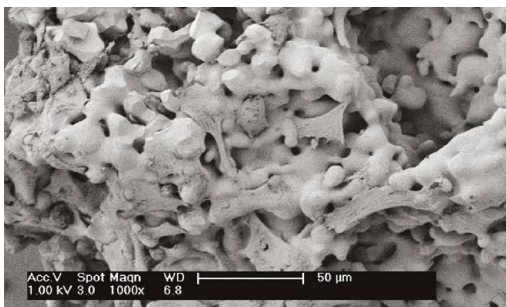
Extensive bone defect, after cyst extirpation [Fig. 3].

[Fig. 4]



A mixture of **CERASORB® M** granules and patient's own blood was applied in a 1:1 ratio [Fig. 4].

[Fig. 5]



Proliferation of **CERASORB® M** granules with osteoblasts [Fig. 5].

The 6 month post-op panoramic scan shows a perfect balance between the biomimetic graft material and the natural bone tissue [Fig. 5 and 6].



[Fig. 6]

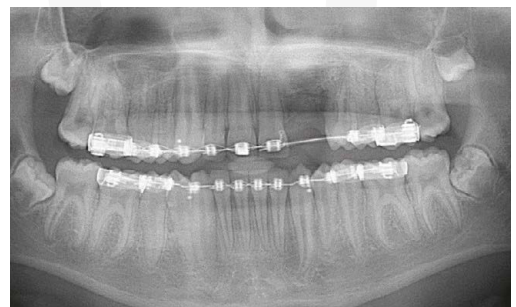


**72 months
(6 years)**



The panoramic scan after 6 years shows a solid base for a future implant placement, which in this case has to wait until complete bone maturity [Fig. 7].

[Fig. 7]



+ Proven Quality

CERASORB® M Granules

CERASORB® M are pure-phase, biomimetic β -TCP granules. Depending on the area of application, **CERASORB® M** granules are available in different grain sizes for oral surgery: 150 – 500 μm , 500 – 1.000 μm , and 1.000 – 2.000 μm .



Dental



Granules

Type of use:

- + Filling of defects after extirpation of bone cysts.
- + Augmentation of atrophied alveolar ridge, sinus lifting / sinus base elevation.
- + Peri-implantitis treatment.
- + Filling of defects after surgical removal of retained teeth.
- + In combination with autologous materials, cells and growth factors e.g. bone chips, BMA¹, PRP² or PRF³.

Handling:

- + **CERASORB® M** granules are soaked with patients' defect blood or bone marrow aspirate in a ratio of 1:1 or 1:2.

1 Bone Marrow Aspirate | 2 Platelet Rich Plasma | 3 Platelet Rich Fibrin

CERASORB® bone-regeneration materials.

We offer tailor-made solutions for diverse requirements.



You have our word!

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