



STRAUMANN® Pro Arch

Excel in Full-Arch.

System overview

EXCEL IN FULL-ARCH

Of the millions of people facing dental problems, there are no two cases the same. Straumann[®] Pro Arch with iEXCEL empowers you to perform life-changing full-arch restorations delivering patient-centric treatment solutions.¹⁻¹⁰

Powered by iEXCEL, Pro Arch enables tailored treatment solutions for challenging fixed immediate restorations, avoiding bone grafting procedures.^{1,2,3,5} Enhanced performance and versatility with four implant designs and one single instrument set. Integrated digital workflows in combination with innovative technologies like Roxolid[®] and SLActive^{®,5-13}

Meet the future of the dentistry.



PATIENT CENTRIC VERSATILITY

A wide range of treatment options to address challenging situations and patient needs.¹⁻¹⁰

SIMPLICITY FOR CHALLENGING CASES

One connection, one instrument set and short surgical protocols, combined with a simplified abutment portfolio to streamline the workflow. Simplicity you'll love.



Al technology and digital integration for your in-house workflow and to outsource production with Straumann[®] Smile in a Box services.



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COMPROMISED PATIENTS

Peace of mind with SLActive[®] even when treating compromised patients with diabetes or irradiated patients.^{8–10}



REDUCED INVASIVENESS

Roxolid[®] enables the use of narrow^{2,3,5,6} and short implants, designed to preserve bone and avoid severe bone grafting^{*}.



RESTORATIVE FLEXIBILITY

Our prosthetic portfolio addresses patients' esthetic expectations within their financial resources.

Compared to titanium implants and conventional treatment options

PATIENT-CENTRIC VERSATILITY

For a true patient-centric approach. Our ultimate dental performance system, iEXCEL, offers versatility, simplicity and performance even in challenging clinical situations.

Tailor your fixed immediate treatment protocols to patients' needs with:

- → Different tapered designs at both bone and tissue levels
- \rightarrow Implant lengths ranging from 6 mm to 18 mm
- \rightarrow Implant diameters from Ø 3.3 mm to Ø 6.5 mm



A WINNING COMBINATION THAT DIFFERENTIATES YOUR PRACTICE

Bone situation	Sufficient bone availability	Insufficient posterior bone height availability	Insufficient posterior bone availability
Treatment options	Six straight implants	Short implants in posterior region	Tilted posterior implants
Straumann® portfolio highlights	 → Ø 3.75 mm implant for all indication → Narrow implants: BLC/TLC Ø 3.3 mm → Short 6 mm BLX/BLC/TLX/TLC → Long 18 mm implants 		

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Insufficient bone volume in maxillary region

Tilted posterior implants placed in tuberosity

 \rightarrow Bone and tissue level implants in combination with SRA abutments*



Severe atrophy in the maxillary bone

Zygomatic implants

→ Straumann[®] ZAGA[™] Flat and ZAGA™ Round



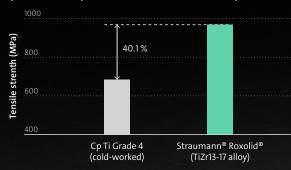
SLActive®



REAL CONFIDENCE

REDUCED INVASIVENESS WITH ROXOLID®*

Invasiveness can be reduced with Straumann[®] Roxolid[®] enabling treatment options with narrower^{2,3,5,6} and shorter implants to preserve bone and avoid grafting in clinical situations with low bone volume.



Comparison of tensile strength of commercially pure Ti grade 4 (coldworked) and Straumann[®] Roxolid (TiZr13-17 alloy)¹⁴

Bernhard et al., 2009, Forum implantologicum 5(1) 30-39.14

REDUCED NEED FOR BONE AUGMENTATION WITH NARROW-DIAMETER IMPLANTS (3.3 MM).⁵

Roxolid[®] allows the use of smaller-diameter implants, \emptyset 3.3 mm with the same reliable clinical performance as regular-diameter titanium implants.^{5,15}

Al-Nawas B et al study results show excellent survival and success rates⁵



For 54% of implants in the study augmentation would be necessary with an implant diameter larger than 3.3 mm.

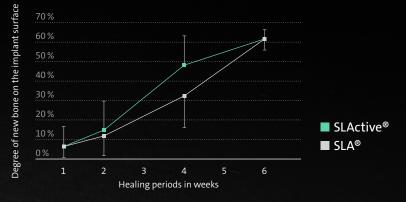
Study Al-Nawas B et al⁵ Study Design: Prospective, non-interventional, multicenter study Population: 357 patients, 603 Roxolid® Implants



SLACTIVE® FOR PEACE OF MIND WHEN TREATING COMPROMISED PATIENTS

Straumann[®] SLActive[®] enhances bone regeneration, reduces healing time and provides high success rates even in compromised patients with diabetes or irradiated patients, giving you peace of mind when treating challenging cases.⁷⁻¹²

Fast integration with SLActive®



The SLActive® surface shows a faster integration into new bone after 4 weeks (50%) compared to SLA® surface (30%). 12

100 % implant success rate in irradiated and diabetic patients⁸⁻¹⁰



*Compared to titanium implants and conventional treatment options.

SIMPLICITY FOR CHALLENGING CASES

Full-arch treatments are complex, but you can streamline the workflow with one connection, one instrument set, and short surgical protocols, complemented by a simplified abutment portfolio. Experience simplicity you'll love.



ONE CONNECTION. ONE DRILL SET. ONE INSTRUMENT SET.









TORCFIT™ CONNECTION

- → One-size prosthetic connection across all diameters
- → Bone-level prosthetics are compatible with Straumann[®] Zygomatic implants

STRAUMANN[®] VELODRILL[™]

- → Allows the use of one drill set that is compatible with all implant designs
- ightarrow Works with X- and C-Design
- ightarrow For guided and freehand surgery
- → All drills are available in three lengths for maximum flexibility

STRAUMANN® MODULAR CASSETTE

→ The Straumann[®] Modular Cassette is a compact instrument cassette that can be assembled and combined in different ways, allowing you to customize it with the tools you need

STRAUMANN® ZYGOMATIC IMPLANT SYSTEM

- → Shares the same prosthetic platform with BLX and BLC implants to simplify the restorative procedure for severely anatomic cases
- → Two implant designs to address different anatomic situations

STRAUMANN® PRO ARCH BONE LEVEL IMPLANTS

Straumann[®] Bone Level Implants are designed for primary stability and offer you optimal treatment flexibility using clinically proven materials and technologies.⁵⁻¹³

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IMPLANT DESIGNS FOR IMMEDIATE PROTOCOLS

Two bone level designs to tackle most patient situations intraoperatively.



SIMPLIFIED DRILL PROTOCOL

Fewer steps and flexible sequence for minimal heat generation.

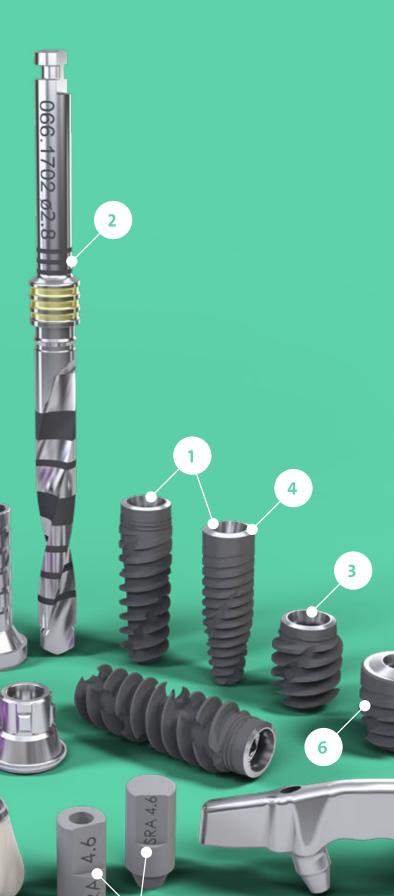


ONE CONNECTION

TorcFit[™] hybrid internal conical connection, one connection from Ø 3.3 to Ø 6.5 mm, with high strength for simplicity and efficiency.



SLActive®



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4 3.75 MM FOR ALL INDICATIONS

Enabling bone-preserving protocols with a \varnothing 3.75 mm implant applicable for all indications.

5 3.3 MM NARROW IMPLANT

Treatment options with narrow implants with Roxolid[®] high-performance material enable clinicians to preserve the bone and avoid bone grafting procedures in clinical situations with low bone volume.^{5,15}

6 MM BLX AND BLC

Short implants can help avoid sinus lift or vertical augmentation in cases where bone height is minimal.

7 ROUNDED ANGULATED ABUTMENT

- ightarrow Designed to maximize space for soft tissue
- → Choice of gingival heights: from 3.5 mm-5.5 mm, 35 Ncm torque
- → Optimized SRA abutments portfolio. Only ten abutments for simplicity and reduced stock

8 DIGITAL INTEGRATION

- \rightarrow Titanium Scanbodies for intraoral scanning.
- → Straumann[®] RevEX scanbody to digitize the workflow from temporary to final restorations.

STRAUMANN® PRO ARCH TISSUE LEVEL INPLANTS

The Straumann[®] iEXCEL Tissue Level Implants respect the key biological principles of hard and soft tissue healing. They are designed to significantly reduce the risk of inflammation and bone resorption as the implant-abutment interface is moved away from the bone.

PERI-IMPLANT HEALTH PRESERVATION

No gap at bone level. Designed for outstanding long-term results. Tissue level implants are the right choice for patients, with a history of periodontal conditions.



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1 DESIGNED FOR IMMEDIATE PROTOCOLS

Two tissue-level designs developed for optimal primary stability and immediate protocols in all bone types.

2 SIMPLICITY AND EFFICIENCY

- → Built-in emergence profile and simple soft-tissue management
- ightarrow Transgingival healing, no second-stage surgery
- → Clear view and accessibility of the connection, even in the posterior region

3 EASY HYGIENE MAINTENANCE

To make patients' lives easier.

4 REDUCING INVASIVENESS

- \rightarrow 6 mm implant for limited bone height
- \rightarrow Narrow implant diameter option TLC 3.3 mm
- ightarrow 3.75 mm for all indications

5 DIRECT TO IMPLANT WORKFLOW

- → Simplicity of the direct to implant protocol with Screw Retained Bridges and Bars or using Variobase[®] Bridge/Bar
- ightarrow Up to 40° compensation of divergence between two implants

6 ONE CONNECTION

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TorcFit^m hybrid internal conical connection, one connection from \emptyset 3.3 mm to \emptyset 6.5 mm, with high strength for simplicity and efficiency.

7 ANGLED ABUTMENT

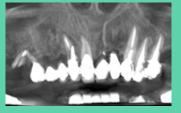
Screw-retained abutments for the clinical situation where stronger tilting the implant is required and thick soft tissue.

Roxolid®

CLINICAL CASES

Immediate maxillary full-arch treatment using Straumann[®] Pro Arch BLC with a digital workflow

















Immediate rehabilitation of the edentulous mandible with Straumann[®] Pro Arch TLX



Dr. Leonello Biscaro













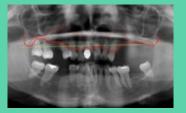




Immediate treatment of the severely atrophic maxilla with Straumann[®] Zygomatic implants and Straumann[®] BLX implants







Panorex of the initial patient situation



Ireatment plan in coDiagnostix®, verification of the trajectory of the screw access holes



Straumann[®] ZAGA[™] Flat with Screw-retained abutment in place



The surgical stent is superimposed over the printed maxilla model with the proposed implant positions and SRA abutments



Post-operative panoramic radiograph at final restoration placement



Straumann[®] BLX \emptyset 4.5 mm implants were placed with 40 Ncm torque



Final restoration in place



SCALE UP WITH STRAUMANN® UN!Q

An outsourced design and production service for patient-specific prosthetics.

In a time of digital transformation, when resources are scarce and competition is fierce, Straumann[®] UN!Q empowers you with a premium service to outsource the planning, design and manufacturing of your custom implant prosthetics.

EXCEL WITH CUSTOM PROSTHETICS

 Scalable: grow your business without

 further investment in CAD resources or

 CAM equipment.



CAM equipment.

Reliable: deliver consistent, predictable results by leveraging the Straumann[®] 70-year legacy of Swiss engineering.

Comprehensive: extensive portfolio and wide compatibility with over 50 implant platforms and design options.

Flexible: pick and choose the on-demand workflow that is tailored to your needs.

RESTORATIVE FLEXIBILITY

With original systems, unequalled precision and consistent high quality, the Straumann[®] prosthetic portfolio addresses patients' esthetic expectations with the flexibility to fit their budget.





MILLED BARS TO SUPPORT ZIRCONIA RESTORATIONS

- → Provides larger surface area for bonding vs. titanium-base coping and enhanced distribution of forces lighter than restorations produced with solid Zr
- ightarrow Available through design service
- → Efficient workflow receive core file for bar and mill zirconia at the same time



THIMBLE BRIDGE – ASC

- → Designed for easy maintenance and repair
- → Angled screw channels for enhanced esthetics
- → Individual crowns allow for a combination of esthetic and high-strength materials



BASIC AND ADVANCED Hybrids

- → Easy tissue relining, ideal solution for ongoing tissue management
- ightarrow Design versatility for retention
- → Circumferential ledge provides additional support for teeth to prevent shearing increasing durability and stability

"Working with your service feels effortless, the flow is very fast and simple. I love the design approval process and the design quality is great."

YDL Dental, Texas.

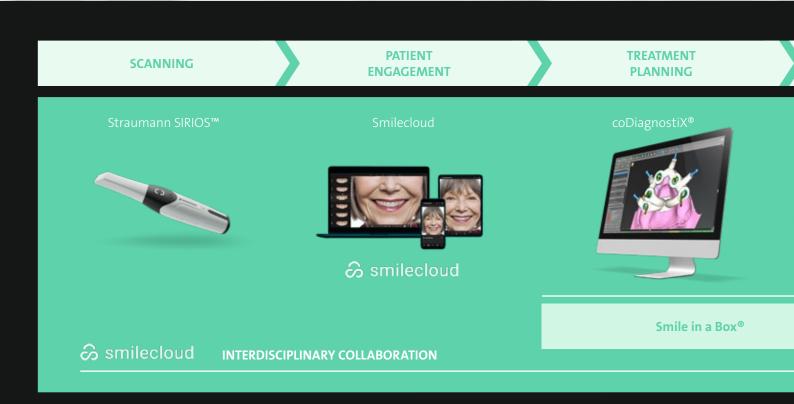
STRAUMANN® VARIOBASE® ABUTMENTS

- → Enables a good solution for full-zirconia bridge/bar restorations
- → Cylindrical upper shape supports reliable bonding of the framework



DIGITAL FULL-ARCH

The Straumann[®] digital workflow empowers your growth with a comprehensive range of straightforward and open solutions, streamlining and upgrading your workflow for the benefit of your patients. Now you can confidently rely on one single provider for all your implant procedures.



STRAUMANN SIRIOS™*

Go beyond image capturing and open the door to digital dentistry with Straumann SIRIOS[™]. With ultimate accuracy and a revolutionary scanning performance, it is specifically designed to unlock streamlined digital workflows.

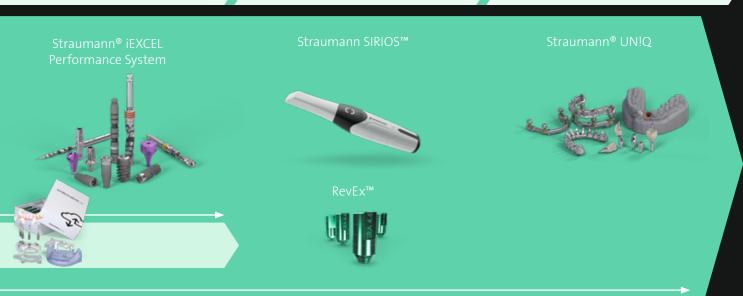
SMILECLOUD

Captivate your patients through natural biometric smile design and effectively engage your network with the potential of interdisciplinary workflows. Start today with Smilecloud.

CODIAGNOSTIX®

Unlock the potential of treatment planning with coDiagnostiX[®] including AI-powered data preparation, visualization and automated tooth extraction designed to efficiently access immediate treatments.





SMILE IN A BOX®

Outsource planning, design, and/or manufacturing and access immediate treatment protocols without the need for additional hardware and software investments.

STRAUMANN[®] REVEX[™] SCANBODY

Capture full-arch implant positions to enable a full-arch workflow from temporary to final restoration. RevEX™ provides greater patient comfort, with fewer visits.¹⁶⁻¹⁸

STRAUMANN® UN!Q*

Use a premium service to outsource the planning, design, and manufacturing of your custom implant prosthetics on demand, based on your specific needs.

The availability varies by region; contact local team for details.

STRAUMANN[®] ZYGOMATIC IMPLANT SYSTEM FOR SEVERELY ATROPHIC SITUATIONS

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STRAUMANN[®] ZAGA FLAT

The flattened shaft design matches the patient's anatomy to accommodate bone deficit while respecting soft-tissue vascularity.



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ROUND AND SMOOTH APICAL END

Protects soft tissue. 2.6 mm diameter

TAPERED DESIGN

- → Maximized zygomatic anchorage
- → Thread pitch optimized to 0.8 mm for controlled and fast implant insertion

REDUCED DISTAL DIAMETER (3.4 MM)

Designed for a less invasive osteotomy and implant placement in patients with smaller anatomy

MACHINED SMOOTH SHAFT

Provides less friction with soft tissue

CORONAL MICRO THREAD

- → Allows bone preservation and osseointegration with bone apposition
- ightarrow Contributes to sinus sealing

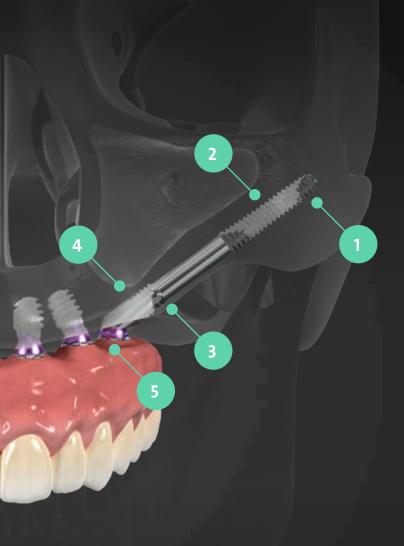


"ZAGA™ Flat design allows a significantly more conservative osteotomy and better bone sealing while avoiding soft tissue compression."

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Dr. Carlos Aparicio

The Zygomatic Implant System completes the Straumann[®] edentulous portfolio with a premium solution providing you all the tools to treat full-arch indications from one source.



STRAUMANN® ZAGA ROUND

The machined smooth round shaft design provides less friction with soft tissue.

ROUND AND SMOOTH APICAL END

Protects soft tissue. 2.6 mm diameter

SANDBLASTED ROUGH SURFACES

Optimizes osseointegration in the zygomatic bone

CORONAL THREAD 3

Enables bone anchorage and osseointegration at the coronal level

CORONAL MICRO THREAD 4

- \rightarrow Allows bone preservation and osseointegration with bone apposition
- \rightarrow Contributes to sinus sealing

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SINGLE PROSTHETIC CONNECTION

Optimized and simplified prosthetic portfolio

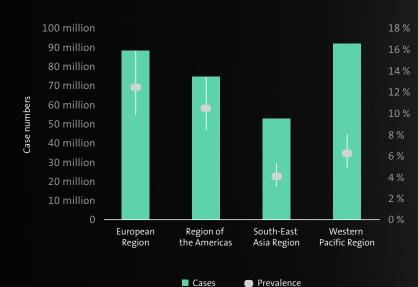
"The Straumann[®] Zygomatic Implant System facilitates the treatment of any maxillary condition ... it provides the total solution for immediacy concept."



Dr. Edmond Bedrossian

READY FOR A CHALLENGE?

The global disease burden of edentulism is high. The World Health Organization (WHO) has estimated that the global prevalence of edentulous adults aged ≥ 60 is 23 % (WHO, Oral Health Factsheet, March 2023). That equates to almost one in four adults older than 60 worldwide.¹⁹



Estimated cases and prevalence of edentulism per WHO region*

Note: Data is age-standardized, ≥20 years, from GBD 2019.¹⁹

* WHO Global oral health status report: Towards universal health coverage for oral health by 2030. ISBN 978-92-4-006148-4 (electronic version)

TRENDS IN DISEASE BURDEN 1990-2019

The global average prevalence of edentulism increased by 8% and the estimated global case numbers rose by 81% between 1990 and 2019, representing an additional 157 million cases.*

Case numbers more than doubled in all country income groups, except in high-income countries, where case numbers increased by 39 %.*

The estimated global average prevalence of complete tooth loss is almost 7% among adults aged 20 years or older. For individuals aged 60 years or older, a much higher global prevalence of 23% has been estimated. Losing teeth can be psychologically traumatic, socially damaging and functionally limiting.¹⁹

WORLDWIDE: 350 MILLION EDENTULOUS CASES 1:4 ADULTS OVER 60 IS EDENTULOUS 39 % INCREASE IN EDENTULISM IN HIGH-INCOME COUNTRIES CASE NUMBERS MORE THAN DOUBLED OVER 30 YEARS

STRAUMANN® PRO ARCH EXCEL IN FULL-ARCH.

REFERENCES

I Eckert SE, Hueler G, Sandler N, Elkattah R, McNeil DC. Immediately Loaded Fixed Full-Arch Implant-Retained Prosthesis: Clinical Analysis When Using a Moderate Insertion Torque. Int J Oral Maxillofac Implants. 2019 Jan 31. **2** Eskan M. A., Yilmaz S, Uzel G. 2019 A Fixed Reconstruction of Complete dentulous Patient with Immediate Function Using A New Implant Design: A Retrospective Clinical Study Data presented during 34th Annual Meeting of the Academy of Osseointegration's, March 13 – 16 in Washington, USA **3** Conskunses FM and Tak O. 2019 Would Narrow Diameter Implants Be a Solution in Rehabilitation of Atrophic Jaws with Immediate Loaded Full Arch Fixed Prosthesis: A Two-Year Clinical Study with the Straumann[®] Pro Arch Treatment Protocol. Manuscript submitted **4** Medvedwe AK, Molotnikov A, Lapovo KR, Zeller R, Berner S, Habersetzer P, Dalia Torre F Microstructure and mechanical properties of Ti-IS2r alloy used as dental implant material. J Mech Behav Biomed Mater. 2016 Sep;62:384-398. **5** Al-Nawas B, Domagala P, Fragola G, Freiberger P, Ortiz-Vigón A, Rousseau P, Tondela J A Prospective. Noninterventional Study to Evaluate Survival and Success of Reduced Diameter Implants Made From Titanium-Zirconium Alloy.J Oral Implantol. 2015 Aug;41(4):e118-25. **6** Müller F et al. Small-diameter titanium grade IV and titanium-zirconium implants in edentulous mandibles: five-year results from a double-blind, randomized controlled trial. (2015). BKO Oral Health. 2015 Oct 12;5(1):123. **7** Nicolau P, Guerra F, Reis R, Krafft T, Benz K, Jackowski J. 10-year outcomes with immediate and early loaded implants with a chemically modified SLA surface. Quintessence Int. 2018 Dec 18:2-12 **8** Heberer S, Kilic S, Hossamo J, Raguse J-D, Nelson K. Clin: Oral Impl. Res. 22, 2011; 546–551. **9** Nelson, K., Stricker, A., Raguse, J-D. and Nahles, S. (2016), Rehabilitation of irradiated patients with chemically modified and conventional sandblasted, acid-etched implants: preliminary results of a split-mouth study. Clin: Oral Im

International Headquarters

Institut Straumann AG Peter Merian-Weg 12 CH-4002 Basel, Switzerland Phone +41 (0)61 965 11 11 Fax +41 (0)61 965 11 01 www.straumann.com

