

# OraGRAFT®

## Unicortical Block



A Predictable, Reliable  
Alternative to Autografts for  
Alveolar Ridge Augmentation

# OraGRAFT® Unicortical Block

OraGraft Unicortical Block is an allograft implant composed of a single cortical wall with attached cancellous. This solution, which is supported by clinical data and backed by LifeNet Health's proven technologies, is an ideal alternative to autograft for alveolar ridge reconstruction.

## Safety:

Sterile with a Sterility Assurance Level (SAL) of  $10^{-6}$

## Optimal Remodeling:

Cortico/Cancellous blocks allow for space maintenance and remodeling due to trabecular architecture

## Convenient Storage:

- Ambient temperature with 5-year shelf life
- Ready to use, preserved with LifeNet Health's proprietary Preservon® technology



# OraGRAFT® Unicortical Block

## Dental Allograft Solution, Backed by Science

The OraGraft Unicortical Block is less prone to micromotion than particulate graft, and is strong and rigid allowing its fixation in the recipient site and a reliable option for ridge augmentation.

*“A solid block graft is less prone to micromotion than particulate graft, thus providing more predictability. In some cases, depending on the ridge area needing augmentation, the use of particulate with the addition of metal mesh or a nonresorbable titanium reinforced membrane makes the procedure unnecessarily complex.”<sup>1</sup>*

*“A block graft is recommended on the anterior maxilla, if the required augmentation exceeds 3 mm in either width, height or both.”<sup>2</sup>*

*“The compromised alveolar ridge in the anterior maxilla does not provide a natural cavity to contain the particulated grafting material as seen in the sinuses. Therefore the graft must possess strength and rigidity to allow its fixation in the recipient site, and the three dimensional stability to withstand muscular forces.”<sup>2</sup>*

*“Atrophied maxillary reconstruction with allogeneic bone block grafts represents a reliable option as shown by low block graft failure rate, minimal resorption, and high implant survival rate.”<sup>4</sup>*

## A Predictable, Reliable Alternative to Autografts

The OraGraft Unicortical Block is a reliable alternative to autogenous bone blocks. It avoids disadvantages associated with autograft, such as prolonged operation times, limited graft acquisition and other risks associated with harvesting autograft.

*“Although autogenous bone block grafting yields satisfactory results, this technique is associated with disadvantages such as prolonged operation times, limited graft acquisition, and risk for damage to adjacent teeth, neurosensory deficits, donor area flap exposure, bleeding and infection.”<sup>3</sup>*

*“The vertical and horizontal dimensions did not significantly differ between autogenous and allogeneic bone grafts at any time point. There were no statistically significant differences in graft remodeling rates.”<sup>3</sup>*

*“Within the limitations of this systematic review, it can be concluded that the use of allogeneic bone block grafts represent a reliable alternative to autogenous block grafts for augmenting the atrophic maxilla.”<sup>4</sup>*

## Supported by Clinical Data on LifeNet Health Allografts

More than 10 published studies using OraGraft Block Grafts for ridge augmentation.

# OraGRAFT<sup>®</sup> Unicortical Block



OraGRAFT Unicortical Block	
Ambient Temperature Storage (10°C - 37°C), 5 year shelf life	
Size	Order Code
10 x 15 x 8 mm	UB101508
10 x 25 x 8 mm	UB102508

Instructions for use available at [LifeNetHealth.org/IFU](https://www.lifenethealth.org/IFU)

## References:

1. Sfasciotti, GL, Trapani CT, Powers RM Mandibular Ridge Augmentation Using a Mineralized Ilium Block: A Case Letter. J Oral Implantol. 2016 Apr;42(2):215-9. Epub 2015 May 11
2. Nissan, J, Mardinger O, Calderon S, Romanos GE, Chaushu G. Cancellous Bone Block Allografts for the Augmentation of the Anterior Atrophic Maxilla. Clin Impl Dent and Rel Res, 2011.
3. Kloss FR, Offermanns V, Kloss-Brandstätter A. Comparison of allogeneic and autogenous bone grafts for augmentation of alveolar ridge defects-A 12-month retrospective radiographic evaluation. Clin Oral Implants Res. 2018 Oct 10. [Epub ahead of print]
4. Monje A, Pikos MA, Chan HL, Suarez F, Gargallo-Albiol J, Hernández-Alfaro F, Galindo-Moreno P, Wang HL. On the feasibility of utilizing allogeneic bone blocks for atrophic maxillary augmentation. Biomed Res Int. 2014;2014:814578. Epub 2014 Sep 11.