



Startanius NRI (Narrow Ridge Implant) and NR piezo + LED osteotomy Surgical Unit

This article is written from two perspectives. The first (Lewis) has been placing implants since 1987. The second (Stahl) with less than 10 years' experience.

Ted Lewis, DMD, FICOI, FAAIP

NR piezo + LED: This instrument revolutionizes the method in creating precise osteotomies. Tip design makes uniform and accurate osteotomies easy for the new implantologist. Great lighting from the LED in the tip of the handpiece and adjustable irrigation pump all complement light touch handling.

Startanius NRI (Narrow Ridge Implant): All of the advancements that have been developed over the last 20 years are honored in this exciting implant. The Startanius NRI is made of surgical titanium that is ideal for subcrestal placement and undisturbed osseointegration. All possible exchangeable/removable abutment configurations are available including snap-on, fixed, and fixed removable. The Startanius NRI high surface area maximizes integration strength, outperforms root form implants in the narrow ridge, and makes implant-retained prosthetics available in scenarios where there is lack of bone.

Benefits to the dental patient: The new achievements listed above give patients hope and a chance to overcome the bad news that their bone was not good enough for implants. They will appreciate the fact that this is an uncomplicated procedure. They have heard, "You have to get used to the fact your lower denture will never get any better." The patient can now hope to feel normal when eating and talking. Dentists will have the ability to replace teeth where they had no good options before.

Placing the Startanius NRI is quite predictable. A full thickness mucoperiosteal flap is reflected and an osteotomy is planned and performed with attention to the emergence angle of the prosthetic choice. The Startanius NRI is tapped into place with ease. Adjusting mesial to distal angulation and counter-sinking of the Startanius NRI are accomplished using the provided armamentarium. Bone fill is placed over the shoulders of the narrow ridge implant and any other gaps in the osteotomy. A PRF or commercial membrane is placed to assure that good primary closure is achieved. After osseointegration in 4-6 months, the implant head is uncovered using conventional methods and the prosthetic attachments are torqued into place.

Phillip Stahl, DDS, FICOI, FAAIP

My experience prior to placing my first Startanius NRI has been with mini dental implants and root form implants. The osteotomy preparation for the NRI is different than those implant types, but not complicated. Use of a piezo ultrasonic for bony surgery allows for a precise osteotomy without risk of soft tissue damage. The piezotome tips help to guide the preparation once a path has been established, which cannot be said for carbide burs. To finish the osteotomy, width is increased at the center of the preparation to accommodate the conical taper of the NRI. The Startanius NRI is set in the osteotomy site and a placement instrument seated over the implant. A mallet is used to tap on the placement instrument to fully seat the implant. The most technique-sensitive part of the process is making sure that the mesial and distal shoulders of the NRI are parallel to the bony crest of ridge, but adjusting for this becomes intuitive after practice. On the whole, I felt that learning to place the narrow ridge implant was easier than learning to place mini or root form implants.

My office sees many denture wearers with atrophied ridges. For some, implant-retained dentures were simply not an option in the past because of their poor anatomy. The Startanius NRI solves this problem by having minimal width, great surface area, and interchangeable abutments. I am pleased to include it in my implant armamentarium.

For more information, please contact:

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