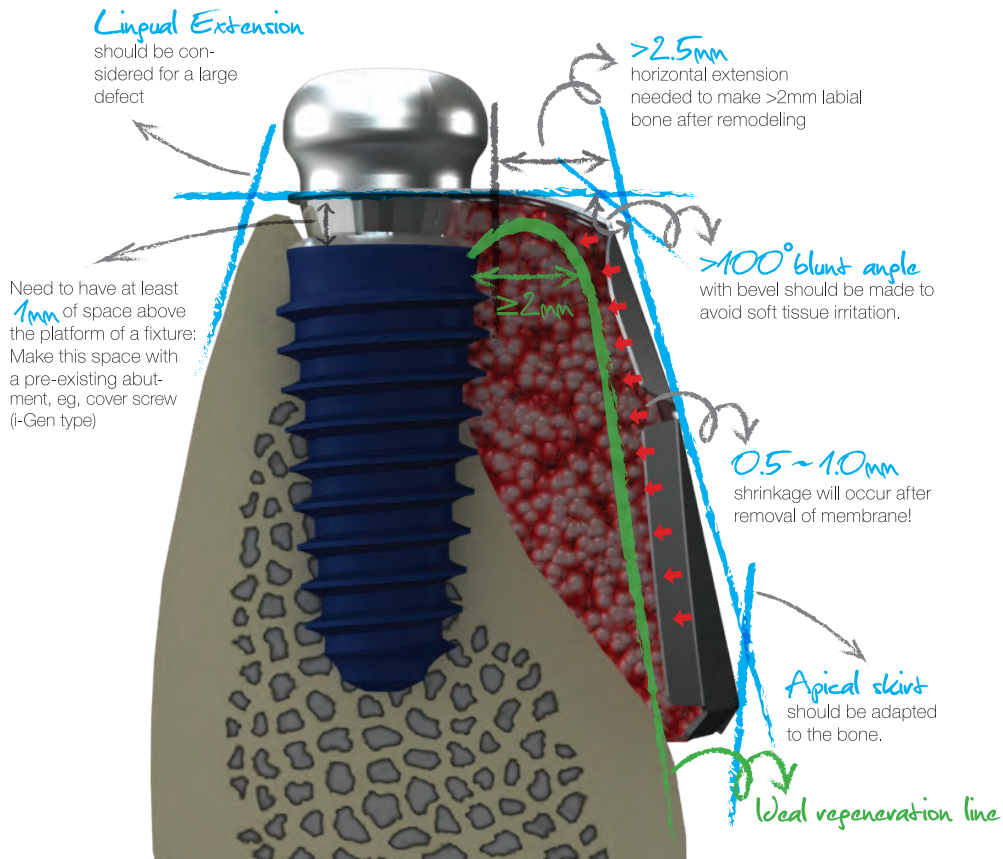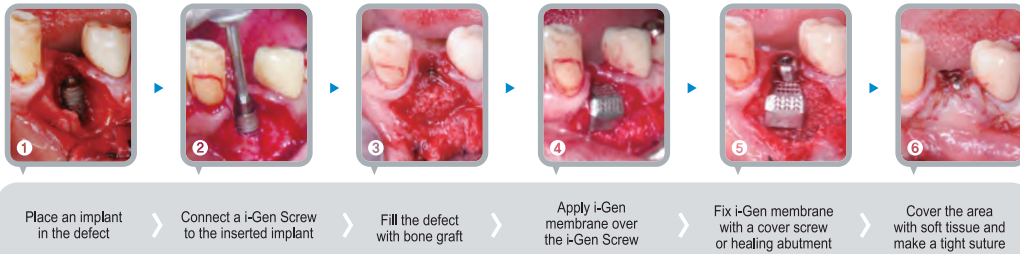# i-Gen

TITANIUM MESH MEMBRANE

This titanium mesh membrane is manufactured in 9 different configurations so you can graft sites where a stable implant has been placed but the surrounding bone is insufficient. It features an opening that allows you to secure the membrane (graft) in place. Several of the different designs feature a 100 degree bend which provides ample space for GBR. The design features a wider titanium mesh to allow for more buccal bone growth. i-Gen can be used with most of the popular implant systems.


Lingual Extension should be considered for a large defect

Need to have at least **1mm** of space above the platform of a fixture: Make this space with a pre-existing abutment, eg, cover screw (i-Gen type)

>2.5mm horizontal extension needed to make >2mm labial bone after remodeling

>100° blunt angle with bevel should be made to avoid soft tissue irritation.

0.5~1.0mm shrinkage will occur after removal of membrane!

Apical skirt should be adapted to the bone.

Ideal regeneration line

≥2mm

Ι Surgical guide

1. Place an implant in the defect
2. Connect a i-Gen Screw to the inserted implant
3. Fill the defect with bone graft
4. Apply i-Gen membrane over the i-Gen Screw
5. Fix i-Gen membrane with a cover screw or healing abutment
6. Cover the area with soft tissue and make a tight suture

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How to Use i-Gen

Ideal Regeneration Membrane

1. Place an implant into the recipient site.

2. Connect a flat abutment to the implant and bone graft. Usually 1 mm cuff height is good enough for vertical space, but 2 or 3 mm cuff height of flat abutment can be chosen according to situation. The amount of graft material should be enough to fill the space between i-Gen and the fixture.

3. Selection of i-Gen and placement. According to the size and shape of bone defect, an i-Gen can be chosen from 12 different shapes. Match the hole of i-Gen with the screw hole of flat abutment.

4. Fixate i-Gen with a healing abutment. Choose a healing abutment or cover screw to fix i-Gen membrane depending on the need of one or two stage surgery. And tight adaptation of soft tissue flap is recommended.
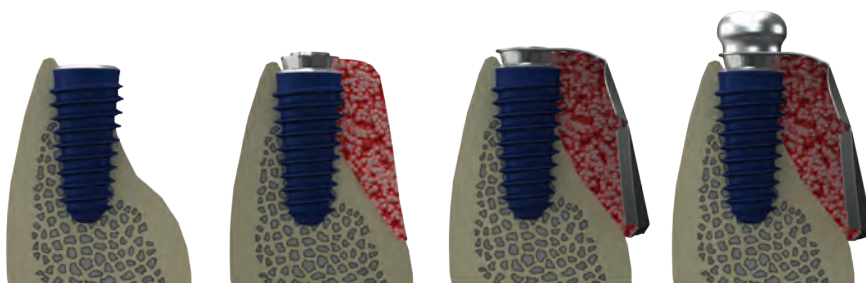
Which i-Gen?

i-Gen Membrane has 9 different sizes and shapes.

As seen on the figure left, alveolar bone has different widths according to locations. It can be divided into three categories; Anterior (Light Blue dots), Premolar (Blue dots) and Molar (Purple dots). For Anteriors, 'narrow' membranes can be used, which has 4.5mm buccal horizontal extension from the center of fixture. For Premolars, 'Regular' membranes which has 5.5mm buccal extension, can be selected. The molar area usually needs wide membrane (6.5mm from fixture center), especially at the immediate placement case with wall defects.

Type A and B membranes are only to cover single wall defects. Type C has a lingual extension to cover lingual wall defect. Type C has a lingual extension to cover lingual wall defect.
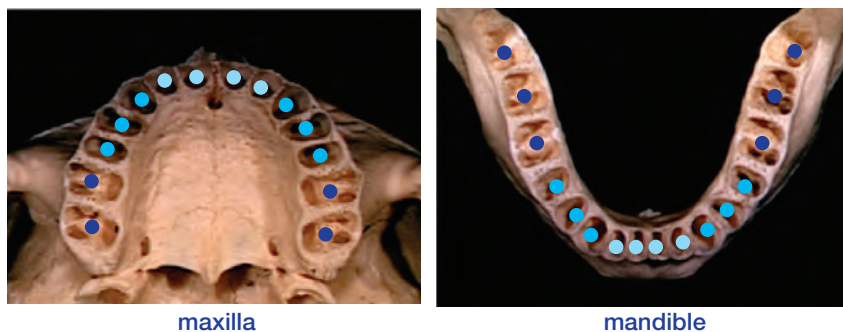
maxilla   mandible

i-GEN membrane			Dimension				Quantity	Code
			PL (Proximal Length)	BW (Buccal width)	BL (Buccal Length)	BD (Buccal Distance)		
A1	A2	A3	4	9	11	4.5	2	IGA1
			4	10	11	5.5	1	IGA2
			4	11	11	6.5	1	IGA3
B1	B2	B3	5	9	11	4.5	2	GB1
			6.5	11	11	5.5	1	IGB2
			9	13	11	6.5	1	IGB3
C1	C2	C3	5	9	11	4.5	2	IGC1
			6.5	11	11	5.5	1	IGC2
			9	13	11	6.5	1	IGC3

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i-Gen Full Package

- 12 i-Gen membranes
- 12 Flat abutments (1mm, 2mm, 3mm cuff x 4 each)
- 6 Cover screws
- 6 Healing abutments (3 & 4 mm height)
- 1 Hex hand driver (1.6)

• Individual items can be ordered separately to fill the package.
• Different connections of Flat abutment for other implant system are available.

M2.0 Internal Connection

- MegaGen (AnyOne, EZ Plus(R&W) & MegaFix)
- Straumann (Standard & Standard Plus)
- Nobel Biocare (Nobel Replace Tapered Groovy)
- Dentium (Superline)
- Dio (Steady, SM, IFI)
- Neobiotech (IS)
- Osstem (TSVI)

Type	Cuff Height (mm)	Ref. C
M2.0	1.0	IA2010
	2.0	IA2020
	3.0	IA2030

M1.8 Internal Connection

- MegaGen (AnyRidge)
- Dentsply-Frident (Ankylos C/X Implant)
- Zimmer (TSV)

Type	Cuff Height (mm)	Ref. C
M1.8	1.0	IA1810
	2.0	IA1820
	3.0	IA1830

M1.6 Internal Connection

- MegaGen (EZ Plus Internal _Small)
- Straumann (Bone Level)
- 3i (Osseotite Certain & Full Osseotite NT Certain)

Type	Cuff Height (mm)	Ref. C
M1.6	1.0	IA1610
	2.0	IA1620
	3.0	IA1630

M1.4 Internal Connection

- MegaGen (MiNi)

Type	Cuff Height (mm)	Ref. C
M1.4	1.5	IA1415
	2.0	IA1420
	3.0	IA1430

* Cover Screw

- Use hand driver(Hex1.2)

Type	Height(mm)	Ref. C
Hex 1.2	1.0	ICS3510

We recommend that you verify the size of the abutment screws before use, it should be noted that it may not be fully compatible depending on the tolerance of each manufacturer.

Straumann, Nobel Biocare, Dentium, Dio, Neobiotech, Osstem, Dentsply-Frident, Zimmer and 3i are not trademarks of ids.

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Clinical Case

Case I. Mandibular premolar

Fig 1. This 65 year-old male patient visited with a chief complaint of discomfort on #24 during chewing. On the panoramic view, large bone defect was observed.
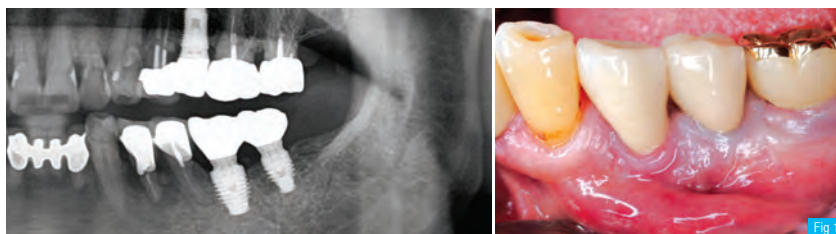
Fig 2. The tooth was extracted and socket was degranulated thoroughly. A 4.5 mm AnyRidge fixture was placed at the center of socket with excellent initial stability.
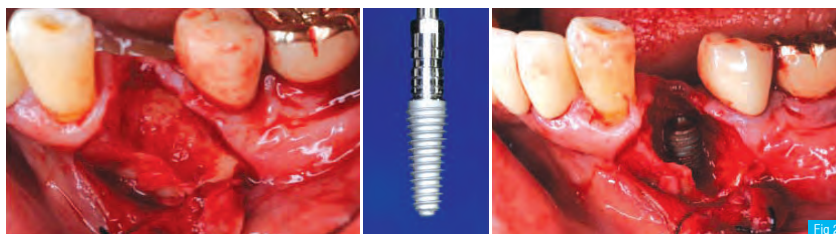
Fig 3. A flat abutment, 1 mm cuff height, was connected with the fixture. A 1.6mm hex driver is needed to place a flat abutment, which is included in the kit. Mega-Oss allograft was grafted into the defect.

Fig 4. The combined image of i-Gen, a flat abutment and a healing abutment. A healing abutment was connected on the Flat abutment to fix the i-Gen for one stage surgical approach. Watch the horizontal extension of i-Gen.

Fig 5. Simple suture was made to adapt the buccal flap against the healing abutment.

Fig 1

Fig 2

Fig 3

Fig 4

Fig 5

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Clinical Case

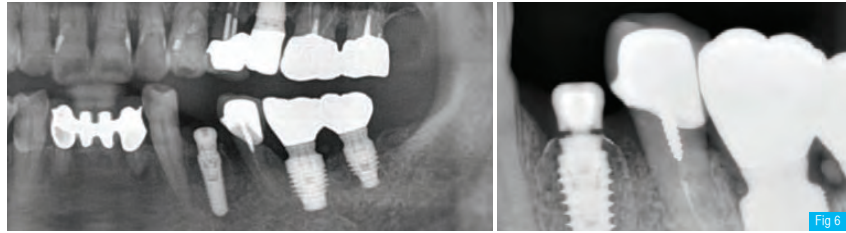Fig 6. Postoperative panoramic and intraoral radiograph.

Fig 7. 3 months after surgery. Gingival healing was excellent and intraoral radiograph showed considerable increase in radiopacity.

Fig 8. Usually flap opening is not necessary to remove i-Gen, but in this case the flap was elevated to check the bone regeneration. The i-Gen was maintained very stable in the tissue, and it was easily removed with a hemostat.

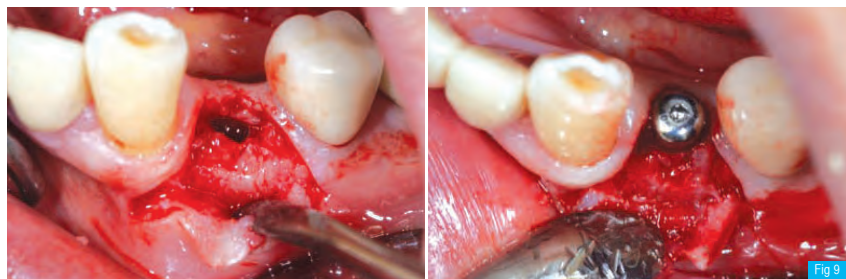Fig 9. The defect was filled with healthy regenerated bone. From the occlusal view, the buccal bone has more than 3mm width at the level of implant platform.

Fig 10. Flap was closed with simple suture.

Fig 6

Fig 7

Fig 8

Fig 9

Fig 10

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