

CUSTOMIZE YOUR BARRIER DIRECTLY AT THE SURGICAL SITE

ATRISORB® FreeFlow™ GTR Barrier

The first liquid barrier customized directly at the surgical site.

Facilitate tissue regeneration using Atrisorb®, the first in a new line of products used as a combination therapy based on Atrigel technology. Applied as a viscous gel using a simple, direct in situ technique, this resorbable barrier is effective in isolating the healing periodontum from the epithelial and gingival connective tissues, supporting the regeneration of the periodontal ligament.

Bioadhesive:

- No stabilizing sutures required
- Adheres directly to tooth and surrounding bone

Bioabsorbable:

- Eliminates the need for second surgery
- Maintains structural integrity for approximately 6 months
- Complete bioabsorption within 9-12 months

Economical:

- Each sterile, single-patient use syringe treats multiple defects in one patient visit
- Eliminates costly inventory of barrier shapes and sizes

Combined surgical approach in intrabony lesions:

- Mean gain of 50% in CAL from baseline
- Mean PD at 6 months reduced on average by >60% to 5 mm or less



ONE BOX OF ATRISORB CONTAINS 3 APPLICATORS OF 0.5 g EACH.



*Innovative and unique solutions
to your surgical needs*



ATRISORB®

*Bioabsorbable Guided Tissue
Regeneration (GTR) Barrier*

**Eliminates cutting, trimming or
handling of preformed barriers**

**Reduces surgical time because
barrier is formed directly at the
surgical site**

**Unique flowable polymer
readily adapts to root
morphology**

For additional information
call your local product specialist
or call us toll free at:

**1-877-243-6724
www.citagenix.com**

FREQUENTLY ASKED QUESTIONS

Q1 — How long does ATRISORB FreeFlow take to bioabsorb?

ATRISORB FreeFlow retains structural integrity for about 6 months. The barrier is bioabsorbable and slowly disintegrate over a period of 9 to 12 months, depending on the thickness of the material applied.

Q2 — Is it necessary to apply ATRISORB FreeFlow at a uniform thickness? Can additional polymer be applied to the polymer that has already «set»?

It is not necessary to apply ATRISORB FreeFlow at a uniform thickness. It is important to cover the entire surgical graft area. The amount (thickness) of polymer applied has no impact on efficacy, but the thicker the application, the longer the retention of material. If more polymer is required, it can be added and «set» with sterile water or saline spray.

Q3 — What is the protocol for the maximum width of the defect in which you can place ATRISORB FreeFlow?

Regenerative therapy should only be performed in defects where a reasonable likelihood of success exists. When treating defects, Class II furcation defects are often considered good candidates for GTR treatment. However, size, defect morphology, and location of these defects vary considerably, and as a result, the predictability of success in these areas may be quite variable. When treating intrabony sites, defects deeper than 3mm have greater potential for regeneration. Based on these factors, general guidelines for defect selection are as follows:

Favorable – Class II furcation defects, intrabony defects deeper than 3mm.

Less Favorable – Class III defects, horizontal defects (Ø-walled), and shallow intrabony defects.

Q4 — What is the average number of periodontal defects that can be treated with a single patient use syringe of ATRISORB FreeFlow?

The number of periodontal defects that can be treated with a single patient use syringe is dependent on the size and type of defects involved. The single patient use syringe contains 0.5gm (approximately 0.5mL) of polymer, which is enough material to treat 3 to 5 defects.

Q5 — Is it okay if the barrier is exposed?

Generally, exposed material will disappear within 6 to 8 weeks following surgery due to absorption or attrition.

Instruct your patient to keep the exposed material clean by applying chlorhexidine directly to the site with a cotton tip applicator.

Q6 — How soon after surgery and barrier application can the patient begin normal oral hygiene practices?

The patient should not brush, floss, or use other interdental cleaning techniques around the surgical site for 8 weeks. It is recommended that patients rinse with an antimicrobial agent, such as chlorhexidine, until mechanical tooth cleaning can begin. Professional removal of supragingival plaque should be performed every week for 4 weeks, then biweekly through 8 weeks.

Q7 — How should ATRISORB FreeFlow be stored?

ATRISORB FreeFlow can be stored at room temperature.

Guided Tissue Regeneration (GTR) is a widely used surgical technique to enhance the regeneration of the periodontal tissues destroyed by periodontal disease. ATRISORB® FreeFlow™ (Bioabsorbable Guided Tissue Regeneration Barrier) is a barrier device indicated for the surgical treatment of periodontal defects to aid in the regeneration of tissue components in GTR procedures.

ATRISORB FreeFlow contains a gel polymer that is applied at the defect site where it solidifies upon contact with oral fluids or sterile saline water to form a custom-fitted barrier.

ATRISORB FreeFlow has several unique features:

- **Bioadhesive** – Adheres directly to tooth/surrounding bone; no need for stabilizing sutures.
- **Bioabsorbable** – Eliminates the need for a second surgery to remove the barrier. Complete absorption in 9 to 12 months.^{1,2}
- **Cost Effective** – One unit can treat multiple defects; no need to carry different barrier shapes and sizes (reduces inventory carrying cost).
- **Fast Preparation** – Custom formed in place; no need for cutting or trimming.

1. Data on file.

2. Coonts BA, Whitman SL, O'Donnell M, et al. Biodegradation and biocompatibility of a guided tissue regeneration barrier membrane formed from a liquid polymer material. J Biomed Mater Res. 1998; 42:303-311.

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