

Study design

A randomized controlled clinical study comparing NobelActive™ Internal and External with NobelReplace™ Tapered. Implants (single or multiple) were placed in healed sites in maxilla or mandible, both anterior and posterior. All implants were subjected to immediate function.

Study population

12 centers in Europe included 177 patients and 325 implants in the study. 199 NobelActive™ implants (both Internal and External) and 126 NobelReplace™ Tapered implants (control group) were placed.

Survival rate

The cumulative survival rates for NobelActive™ and NobelReplace™ implants after 1 year are virtually the same, 96.5% and 97.6% respectively. No significant differences between groups.

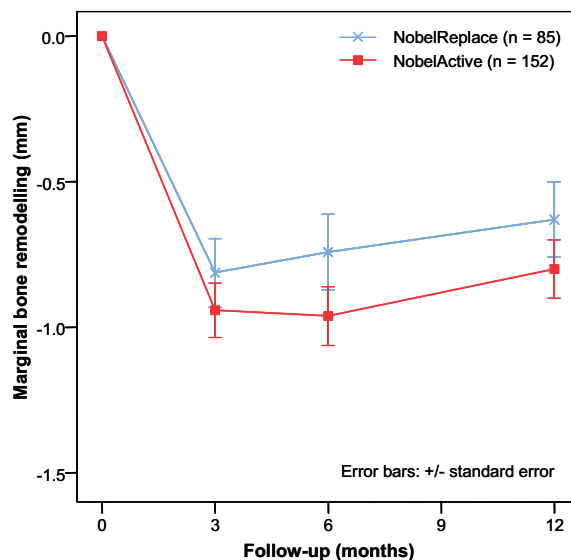
Marginal bone remodelling

The marginal bone resorption between implant insertion and the one-year follow-up was 0.8 ± 1.2 mm for NobelActive™, and 0.6 ± 1.2 mm for NobelReplace™. No significant differences between groups.

Soft tissue parameters

The papilla index improved over time in both NobelActive™ and NobelReplace™ sites.

Soft tissue variables, plaque and periimplant mucosa, were stable over time for both implant types.



Conclusions

- The study shows good survival data for NobelActive™ with a cumulative survival rate of 96.5%. This survival rate is at an expected level for implants placed in immediate function without bone grafting.
- Good crestal bone preservation with bone levels and bone resorption comparable to the NobelReplace™ control group.
- Stable soft tissue conditions during the first year in function.
- The study shows that NobelActive™ performs well under demanding clinical conditions, i.e. immediate function.
- The study shows that NobelActive™ performs well in a wide variety of indications (from single tooth to full arch cases), in all positions and in all bone qualities.