An implant like no other.

NobelActive® for exceptionally high initial stability and esthetic excellence

NEW

Ø 3.0 mm for limited spaces
Three-year data from an ongoing five-year study demonstrates continued positive trends consistent with the one- and two-year results. Bone remodeling occurred during the first three months of the study, followed by increasing or stable bone levels. Soft tissue variables have been stable throughout the study. Illustrations show first and second molar, immediately loaded single crowns at insertion and after 24 months (courtesy of Prof M. Lorenzoni, Graz, Austria).


Maximum soft tissue volume
Built-in platform shifting designed to improve soft tissue for natural-looking esthetics.

Enhanced osseointegration
Unique oxidized TiUnite surface with grooves (Groovy) increases implant stability through faster bone formation and ensures long-term success.

The unique combination of controlled titanium oxide texture and porosity makes bone grow directly onto and into the surface. (Courtesy of Dr Peter Schüpbach, Switzerland)
**Dual-function prosthetic connection**
Internal conical connection for abutment-supported restorations and external platform for unique implant level bridges in titanium and zirconia.

![Image of single-unit and multiple-unit interface.](image)

**Strong sealed connection**
Internal conical connection with hexagonal interlocking offers tight seal and secure positioning of abutments.

![Image of magnification (10x) of the interface between abutment and implant.](image)

**Digital precision**

*Next generation diagnostics and treatment planning with NobelClinician Software*

- Enhanced diagnostics combining 2D and 3D views of the patient’s anatomy
- Digital treatment planning considering availability of bone and prosthetic needs
- Online collaboration between treatment partners with NobelConnect
- Seamless integration with NobelGuide treatment concept

**Esthetic excellence**

*Precision Milled Restorations with NobelProcera*

- Broad choice of solutions from individualized abutments to screw-retained crowns, implant bridges and implant bars overdenture
- Wide range of materials for cement-retained full-contour crowns, copings and bridges on abutments
- Medical device standards and consistent precision of fit through industrial production

*Now for Mac OS X and Windows*
Anterior restoration
20-year-old male, non-smoker, congenitally missing two upper lateral incisors, labial profile with concavities and lack of bone volume

Diagnosis
CT scan confirmed sufficient bone volume (labial/palatal width) for placement of narrow diameter implants due to slight subsidence of facial bone table.

Implant placement
Minimally invasive surgical approach with a semi-lunar primary incision of the ridge and two very short release incisions. Placement of two NobelActive NP 3.5 × 13 mm implants.

Soft tissue contour development
Intra-oral resizing of Procera Esthetic Abutments Zirconia using profuse irrigation.

Provisional restoration
Immediate function with provisional crowns. Picture shows tissue response to provisional restoration six weeks after implant placement.

Final restoration
Placement of NobelProcera Crowns four months after surgery. The soft tissue and radiographic results after 24 months show excellent soft tissue contours and stable bone levels.

Case courtesy of Dr Eric Rompen (Belgium)
Provisional restoration C. Legros, final restoration C. Binamé, dental laboratory M. Picone

«An incredibly effective implant that provides excellent stability even in compromised sites; because of its unique features to preserve the biology of marginal hard and soft tissues, NobelActive has become my No.1 implant in the esthetic area.»

Dr Eric Rompen, Professor and Department Head of Periodontology/Dental Surgery, University of Liège, Belgium

Precise margin adaptation of the provisional restoration

X-rays 24 months after implantation showing stable bone levels

Esthetics like no other.
Maximum alveolar bone volume
Back-tapered coronal design for optimal soft tissue support.

High initial stability even in compromised bone situations
Expanding tapered implant body with double-lead thread design condenses bone gradually.

Adjustable implant orientation
Reverse-cutting flutes with drilling blades on apex enable experienced clinicians to adjust implant position for optimal restorative orientation, particularly in extraction sites.

Maximum bone preservation
Apex with drilling blades enables smaller osteotomy.

Optimal soft tissue support
Back-tapered collar provides additional bone volume.

Optimal prosthetic orientation
Minimally invasive insertion and adjustable implant orientation optimize the prosthetic orientation.
Try it once, you’ll never go back.

NobelActive®

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* NobelActive 3.0 is only indicated for the replacement of single-unit maxillary lateral incisors and single-unit mandibular lateral and central incisors. Multiple-unit restorations are neither indicated nor accommodated by restorative components.

NEW NobelActive 3.0 for limited spaces.

On all Nobel Biocare implants including prefabricated prosthetic components.

nobelbiocare.com/nobelactive