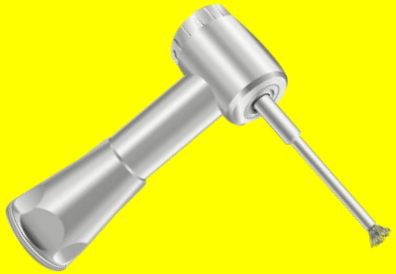
Peri-implantitis? Management of peri-implantitis without the need for implant removal.

Peri-implantitis? NiTi Brush for peri-implantitis treatment

싹쓸이



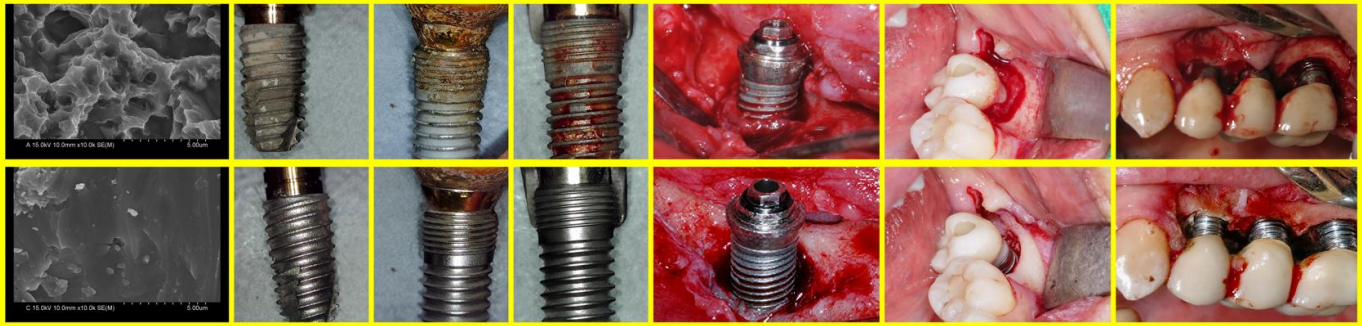
Manage peri-implantitis without implant removal

Treatment without removing the prosthesis

Also for elderly patients & multi-unit bridge cases

NiTi Brush clinical studies (mean age 60–68 yrs, up to 90 yrs)





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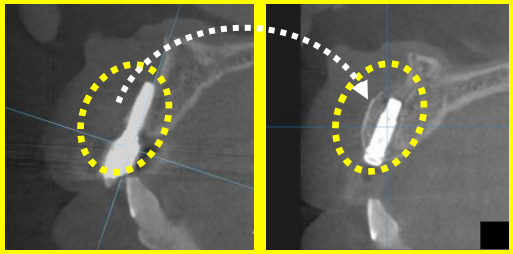
Peri-implantitis? Management of peri-implantitis without the need for implant removal.

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싹쓸이

Peri-Implantitis? Just brush it away - NiTi Brush

Mount on implant motor RPM 600–1,200 (irrigation required)





Elderly patients & multi-unit bridge cases

NiTi Brush clinical studies (mean age 60–68 yrs, up to 90 yrs)

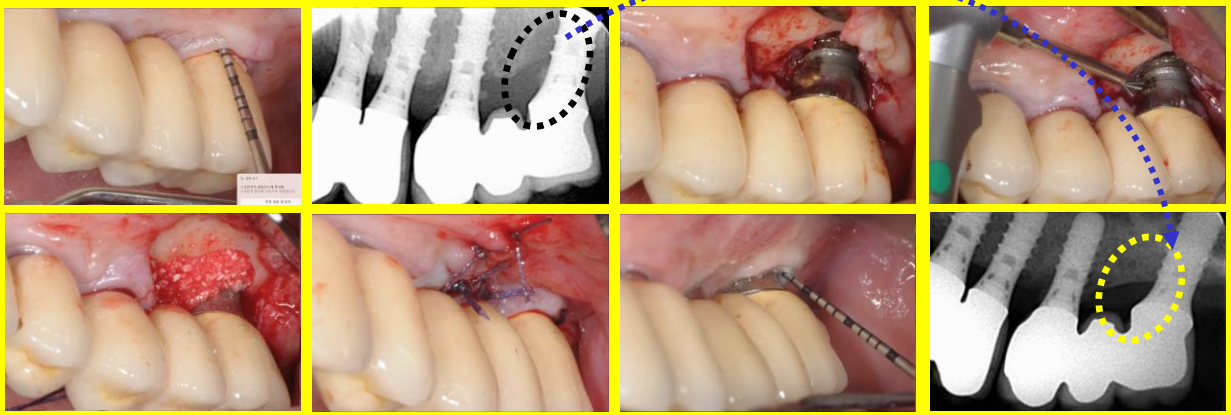
① Derks J, et al. Reconstructive surgical therapy of peri-implantitis: A multicenter randomized controlled clinical trial. Clin Oral Implants Res 2022;33:921–944.

② Alibegovic L, et al. Bone substitute material in the surgical therapy of peri-implantitis: 3-year outcomes of a randomized controlled trial. Clin Oral Implants Res 2025;36:436–448.

③ Monje A, et al. Surface decontamination on the reconstructive therapy of peri-implantitis: A multicenter randomized clinical trial. Clin Implant Dent Relat Res 2025;27:e70075.

④ Monje A, et al. Extent of implantoplasty in the combined surgical therapy of peri-implantitis: A quasi-randomized clinical trial. Clin Implant Dent Relat Res 2026;28:e70144.

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Peri-implantitis? Management of peri-implantitis without the need for implant removal.

Peri-implantitis? NiTi Brush for peri-implantitis treatment

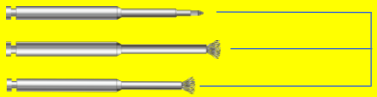
싹쓸이

1. Diagnose peri-implantitis

Measure the **depth of pocket**



2. Select a NiTi Brush according to case



Nano for 1 to 2 thread(s) exposure

Pocket for more than 2 threads exposure

Pocket Short for molars

Choice at the clinician's discretion. Pocket: most cases (flap open).
Nano: mild recurrence, without flap opening.

3. Sterilization before use



Before use, sterilize the NiTi Brush for peri-implantitis

Autoclave in sterile pouch; use at once, do not re-store

134 ℃ / 15 minutes or more

Single use · Contraindicated: Ti/Ni allergy

1. Probe로 Pocket의 깊이를 측정해 주세요

2. 싹쓸이 주요 모델: Nano, Pocket 및 Pocket Short

(모델 선택은 시술 선생님의 판단에 따릅니다)

대부분의 경우 Pocket 을 사용하시면 무난합니다(flap open 요망).

다만, 치료 후 일정 기간이 경과한 다음 주위염이 경미하게 재발할 경우,

Flap open 하지 않고 Nano를 사용하시는 것도 가능합니다.

3. 사용 전 멸균

사용 전 멸균 필수 : 오토클레이브 **134 ℃ / 15분 이상**

멸균 후 바로 사용하세요.(멸균 후 재보관 금지)

반드시 1회용으로 사용하십시오.

티타늄 또는 니켈 알러지 환자에게 사용 금지

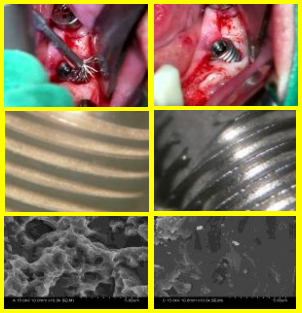
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4. Rotate NiTi Brush: Surface Cleaning



Before After



Implant motor

RPM 600 ~1,200

Saline irrigation(external)

Debridement & Decontamination

Using implant motor

Rotating speed is **RPM 600 ~1,200**

Extensive external saline irrigation during brushing

Removes plaque & calculus from the implant surface

Removes necrotic tissue on the implant surface

The cleaned implant surface can be confirmed visually.
Brushing time varies by implant (literature: approx. 2–3 min at 600 rpm).

4. 표면 이물질 및 오염물질 제거

반드시 임플란트 모터를 사용하십시오.

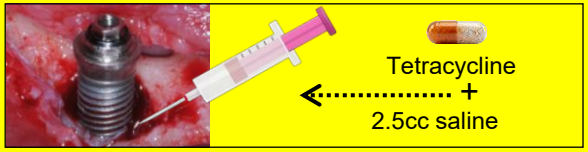
RPM 600 ~1,200 유지해 주세요.
이리게이션을 MAX로 해주십시오.

싹쓸이로 임플란트 표면의 괴사조직·플라그·치석 등 이물질을 제거합니다

이물질이 제거된 임플란트 표면을 육안으로 확인할 수 있습니다.

Brushing time은 임플란트에 따라 상이할 수 있습니다.
(문헌 보고: 600 rpm에서 약 2~3분)

5. Chemical treatment: After brushing (optional)



Using syringe, apply the solution to the treated site

Wait 3 minutes, then rinse with saline

Open the Tetracycline 250mg capsule

Mix Tetracycline 250mg in 2.5cc saline

Using syringe, apply the solution to the treated site

Wait 3 minutes, then rinse with saline

Literature example. Other agents (e.g., minocycline) have also been reported; saline alone in many studies. Related literature available on request.

5. 화학적 처치는 시술 선생님의 판단에 따르며,
하기 예시는 문헌 보고 사례입니다

별도의 처치 없이 식염수 세척만 시행한 연구도 다수 있습니다.

Tetracycline 250mg 캡슐을 열어 2.5CC의 식염수에 희석, 주사기로 T/C 용액을 시술 부위에 도포 후 3 분 뒤에 식염수로 헹궈주세요.

T/C 외에 미노사이클린 등 기타 약제를 사용한 보고도 있습니다.

후속 GBR은 시술 선생님의 판단에 따르며,
화학적 처치관련 논문은 문의 시 제공해 드립니다.

6. GBR: At the clinician's discretion

➢ 보다 자세한 사항은 www.nitibrush.com 참조.

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