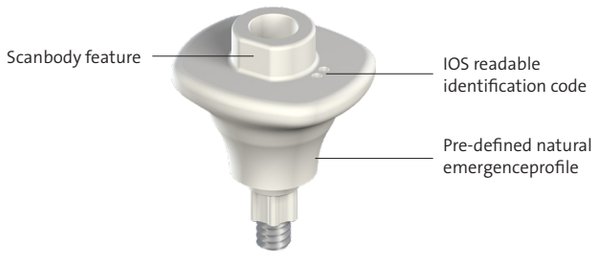
BASIC INFORMATION

Straumann® Anatomic Healing Abutments XC (AHA)

Technical handling information

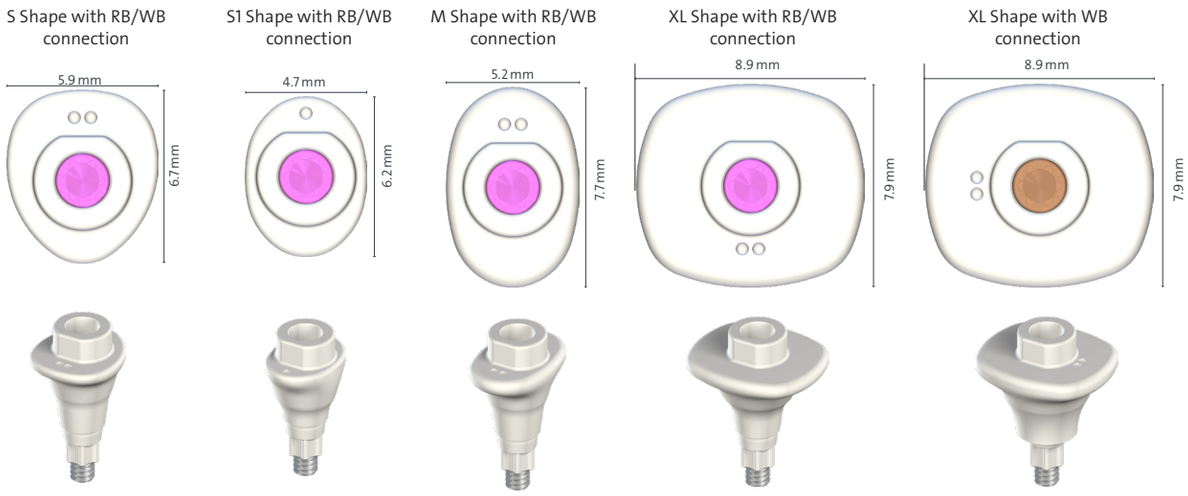
1. ANATOMIC HEALING ABUTMENTS XC

Off the shelf Straumann® Anatomic Healing Abutment XC (AHA) has pre-defined anatomic emergence profile with integrated scanbody. AHA eliminates the need to use separate healing abutment, impression post or scanbody and hence reduces multiple dis-/reconnection of prosthetic components and minimizes the disruption of peri-implant tissue during healing phase. IOS readable identification code represents the type of AHA used and they are visible in stl. lab files. All AHAs are delivered with pre-assembled RB/WB Basal Screw in a sterile package.

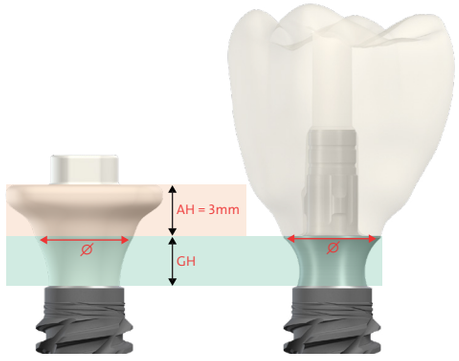


The Straumann® Anatomic Healing Abutment XC is available in

- 4 shapes designed according to typical tooth shapes in specific areas of the dentition: S for central incisor, S1 for lateral upper and lower incisor, M for premolar, XL for molar
- 4 platform diameter (Ø) for 2 prosthetic connections (RB/WB and WB): 3.8mm (RB/WB), 4.5mm (RB/WB), 5.5mm (WB), 6.5mm (WB)
- 2 gingiva heights (GH): 1.5mm, 2.5mm



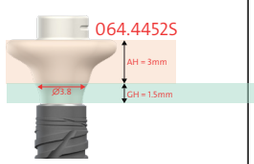
AHA follows the consistent emergence profile of the final abutment and final crown. GH and Ø correspond to the dimensions of final abutment. All AHAs have the standard abutment height (AH) of 3mm. Anatomic emergence profile keeps adequate gingival opening, preventing gingiva interfering with the restoration seating.



2. CONSISTENT EMERGENCE PROFILES, OVERVIEW OF MATCHING COMPONENTS

S Shape			
	Ø3.8 RB/WB Anatomic Healing Abutment	Ø3.8	Final Abutment
GH 1.5mm			
GH 2.5mm			

S1 Shape			
	Ø3.8 RB/WB Anatomic Healing Abutment	Ø3.8	Final Abutment
GH 1.5mm			
GH 2.5mm			

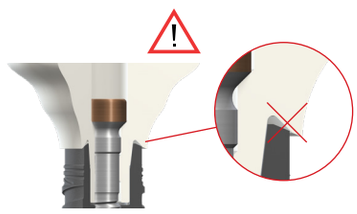
M Shape			
	Ø3.8 RB/WB Anatomic Healing Abutment	Ø3.8	Final Abutment
GH 1.5mm			
GH 2.5mm			

	XL Shape			
	Ø4.5	RB/WB Anatomic Healing Abutment	Ø4.5	Final Abutment
GH 1.5mm	 064.4482S		 062.4944	
GH 2.5mm	 064.4483S		 062.4945	

	XL Shape			
	Ø5.5	WB Anatomic Healing Abutment	Ø5.5	Final Abutment
GH 1.5mm	 064.8482S		 062.4954	
GH 2.5mm	 064.4510S		corresponding final abutment is under development	

	XL Shape			
	Ø6.5	WB Anatomic Healing Abutment	Ø6.5	Final Abutment
GH 1.5mm	 064.4522S		corresponding final abutment is under development	
GH 2.5mm	 064.4523S		corresponding final abutment is under development	

Do not place WB AHAs on RB Implants!

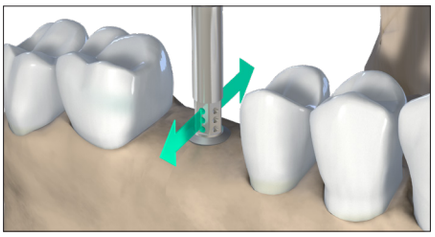


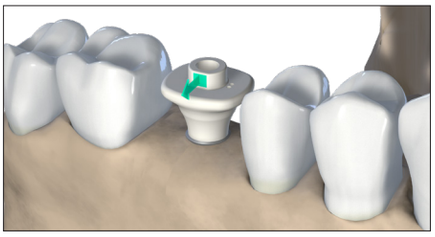
3. STEP-BY-STEP INSTRUCTIONS FOR USE

Option A – standard workflow

Step 1 – Digital Planning (optional)
AHAs can be a part of pre-operative planning by using digital planning software with AHA library.

Step 2 – Insertion
Ensure that the internal configuration of the implant is clean and bloodless.
Insert the AHA with SCS Screwdriver.
Hand tighten (i.e. 14 Ncm) the AHA with pre-assembled self retaining screw.

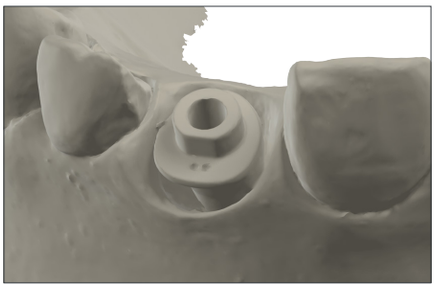




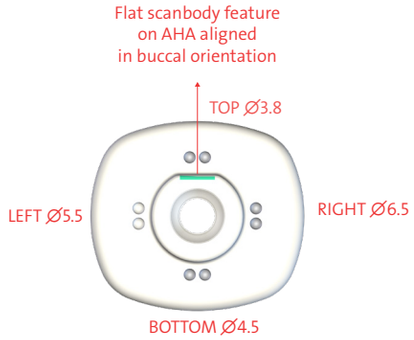
Note: In order to manage the correct indexing of AHA into the implant:
- Orientation dots on the implant driver must be aligned buccal-lingual direction during implant placement.
- Flat scanbody feature on AHA must be aligned in buccal orientation.

Step 3 – Scan
Ensure that AHA is cleaned completely, and no visual defects are observed on the scanbody feature. The AHA is now ready for scanning. Follow the instructions provided with the scanner.

Step 4 – Design
Scanbody part of AHA represents the position and orientation of the respective dental implant in CADCAM scanning procedures. This helps the CADCAM software to correctly align the subsequent CADCAM restorations. Scan files using AHA can be used in CARES® Visual, 3Shape and exocad design systems – the most current libraries for Straumann® centralized and in-house prosthetics can be found in Straumann Download Center.



The identifier code on the occlusal surface of the AHA can be visualized in stl. files by dental laboratories to transfer the information about platform diameter (Ø) and gingiva height (GH) used. Number of dots represent GH of the AHA used (i.e. 1 dot: GH1.5, 2 dots: GH2.5). Place of dots on the occlusal surface of the AHA represent platform diameter (Ø) (i.e. top Ø3.8, bottom Ø4.5, left Ø5.5, right Ø6.5 as shown in the image) Below code map represents the corresponding AHA.



Shape	S	S1	M	XL		
Ø and Platform	Ø 3.8mm RB/WB	Ø 3.8mm RB/WB	Ø 3.8mm RB/WB	Ø 4.5mm RB/WB	Ø 5.5mm WB	Ø 6.5mm WB
GH 1.5mm						
GH 2.5mm						

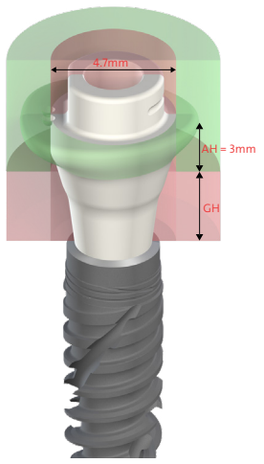
Scanning function of AHA should be only used for single-unit restorations.

Option B – customized workflow

Anatomic Healing Abutments can be modified at chairside if required based on the patient's anatomy by following steps.

Step 1 – Individualization

For the modification limits, please refer to the graphic on the right. To protect the consistent emergence profile of final abutment, maximum 3mm height can be modified from down to the occlusal surface. To preserve the scanning function of AHA, 4.7mm circular area around the central axis of the screw channel cannot be modified. Individualize the AHA on analog outside of the mouth according to the clinical need. Heatless wheels and new cross-toothed millers are recommended for grinding. To avoid smearing of the polymer, adjust bur speed properly (low rpm frequency, little pressure).



The green area can be customized whereas the red area is not to be customized.

Step 2 – 360° scan of the new emergence profile

Place customized AHA in the back side of TorcFit™ Surgical Handle tool (066.4000), which was designed to place TorcFit™ prosthetic components. Record the 360° scan of the new customized emergence profile, to allow the CAD designer to duplicate the modification in the final restoration.

Step 3 – Insertion

Clean, disinfect and sterilize the customized AHA and and hand-tighten (i.e. 14 Ncm) in the implant with the SCS screwdriver

For the following steps, please refer to Step 3 and 4 as explained in standard workflow.

Important:
Make sure that 360° scan file is provided together with the intra-oral scan file to the CADCAM designer for matching the two scans.

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