

*** EXPERIENCE PIEZOSURGERY®

EXPERIENCE PRECISION.

Why the PIEZOSURGERY® technology is a cut above the average.

When it comes to cutting bone, you can of course use traditional burs and saws. They do cut bone, too – but they do not differentiate: any soft tissue getting in their way will also be cut.

The special ultrasonic microvibrations of the original PIEZOSURGERY® technique cut bone – and nothing else. No soft tissue is damaged, which allows you to work with a precision that facilitates not only surgery itself, but reduces postoperative discomfort for your patients at the same time.

So, if you are looking for a technology with maximum precision and control – and minimal stress for you and your patients – here you go.

→ MICROMETRIC CUTS

PIEZOSURGERY® provides micrometric cuts for minimally invasive surgeries with maximum surgical precision and intra-operative tactile sensation.

→ SELECTIVE CUTS

PIEZOSURGERY® protects any kind of soft tissue. Nerves, vessels and membranes will not be injured while cutting bone. Thus PIEZOSURGERY® offers maximum safety for surgeons and patients.

--- CAVITATION EFFECT

PIEZOSURGERY® offers maximum intra-operative visibility. The cavitation effect of the ultrasonic movements lead to a blood-free surgical site.



---> THE PATIENT'S BENEFIT

- soft tissue will be protected, f.e. in lateral sinus lift surgery the risk of perforation is reduced over 80%
- less swelling after surgery with PIEZOSURGERY®
 faster and better osseointegration after implant site preparation with PIEZOSURGERY®
- faster and less traumatic post-operative recovery.



→ MACROVIBRATIONS



Bone bur

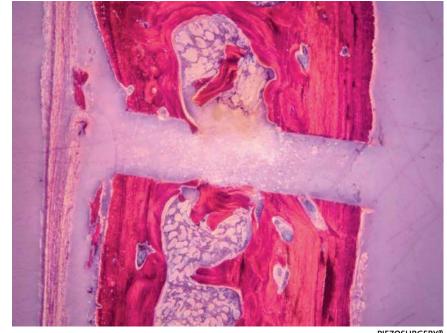


→ limited surgical

→ lack of precision

control

→ MICROVIBRATIONS



- PIEZOSURGERY®
- → high surgical control
- → precision and safety
- ---> clinical and histological advantages





Comparative studies have demonstrated both the clinical and histological advantages of the PIEZOSURGERY® device.

Gleizal A, Li S, Pialat JB, Béziat JL. Transcriptional expression of calvarial bone after treatment with low-intensity ultrasound: An in vitro study. Ultrasound Med Biol. 2006; 32(10):1569-1574

EXPERIENCE SAFETY.

How clinical applications benefit from PIEZOSURGERY® technology.

→ SINUS LIFT TECHNIQUE





- ---- safer opening of the lateral window
- ----> less membrane perforations
- ---> less post-operative complications

→ IMPLANT SITE PREPARATION





- ----> less post-operative inflammation
- ---> possibility of immediate post-extractive implant site prep
- possibility of differential implant site prep (correction of the axis)

REFERENCES

- → Kühl S, Kirmeier R, Platzer S, Bianco N, Jakse N, Payer M. Transcrestal maxillary sinus augmentation: Summers' versus a piezo-electric technique an experimental cadaver study. Clin. Oral Impl. Res. 2015-02-16 online; DOI: 10.1111/clr.12546.

- Vercellotti T, De Paoli S, Nevins M. The Piezoelectric Bony Window Osteotomy and Sinus Membrane Elevation: Introduction of a New Technique for Simplification of the Sinus Augmentation Procedure. Int J Periodontics Restorative Dent. 2001; 21(6):561-567

... DEEEDENICES

- Di Alberti I., Stacchi C, Russo C, Rebaudi A, Vincenzi G, Pratella U, Baldi D, Mozzati M, Monagheddu C, Sentineri R, Cuneo T, Di Alberti L, Carossa S, Schierano G. Ultrasonic implant site preparation using piezosurgery: a multicenter case series study analyzing 3,579 implants with a 1- to 3-year follow-up. Int J Periodontics Restorative Dent. 2014 Jan-Feb; 34(1):11-18.
- --> Preti G, Martinasso G, Peirone B, Navone R, Manzella C, Muzio G, Russo C, Canuto RA, Schierano G.
 Cytokines and Growth Factors Involved in the Osseointegration of Oral Titanium Implants Positioned using Piezoelectric Bone
 Surgery Versus a Drill Technique: A Pilot Study in Minipigs. J Periodontol. 2007; 78(4):716-722
- ---> Stacchi C, Vercellotti T, Torelli L, Furlan F, Di Lenarda R. Changes in Implant Stability Using Different Site Preparation Techniques: Twist Drills versus Piezosurgery. A Single-Blinded, Randomized, Controlled Clinical Trial. Clin Implant Dent Relat Res. 2013; 15(2):188-97





Whether it is about sinus lift or implant site preparation, about extraction or bone block grafting – one of the most important features you demand from your operating device is safety.

Now that is exactly what PIEZOSURGERY® is about. Its major strength is minimizing the risk of cutting soft tissue like vascular and nerve masses – as these are not sensitive to the frequencies used by the PIEZOSURGERY® technology.

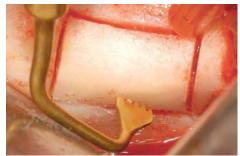
→ EXTRACTION/EXPLANTATION

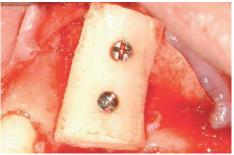




- -> bone preservation in impacted or ankylosed root and third molar extractions
- -> safe preparation in regard to the mandibular nerve for wisdom tooth extraction
- -> reduced amount of facial swelling and trismus 24 hours after surgery
- immediate implant site preparation due to the maximun precision in alveolar bone osteotomy-osteoplasty.

--- BONE BLOCK GRAFTING





- maximum surgical control in bone grafting from mandibular ramus and chin
- -> presence of nucleated osteocytes, indicative of the atraumatic effect

REFERENCES

- Spinato S., Rebaudi A., Bernardello F., Bertoldi C., Zaffe D. Piezosurgical treatment of crestal bone: quantitative comparison of post-extractive socket outcomes with those of traditional treatment. Clin Oral Implants Res. 2015-01-30 online; DOI: 10.1111/ clr.12555
- → Rullo R, Addabbo F, Papaccio G, D'Aquino R, Festa VM. Piezoelectric device vs. conventional rotative instruments in impacted third molar surgery: relationships between surgical difficulty and postoperative pain with histological evaluations. J Craniomaxillofac Surg. 2013 Mar;41(2):e33-8.
- ---> Sortino F, Pedullà E, Masoli V. The piezoelectric and rotatory osteotomy technique in impacted third molar surgery: comparison of postoperative recovery. J Oral Maxillofac Surg. 2008 Dec;66(12):2444-8.
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- ---> Marini E, Cisterna V, Messina AM. The removal of a malpositioned implant in the anterior mandible using piezosurgery. Oral Surg Oral Med Oral Pathol Oral Radiol. 2013 May;115(5):e1-5.

---> REFERENCES

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- ---> Chiriac G, Herten M, Schwarz F, Rothamel D, Becker J. Autogenous bone chips: influence of a new piezoelectric device (PIEZOSURGERY®) on chips morphology, cell viability and differentiation. J Clin Periodontol. 2005; 32(9):994-999
- ---> Sivolella S, Berengo M, Scarin M, Mella F. Martinelli F. Autogenous particulate bone collected with a piezo-electric surgical device and bone trap: a microbiological and histomorphometric study. Arch Oral Biol. 2006; 51(10):883-891



*** EXPERIENCE ERGONOMICS.

How mectron re-defines bone surgery again with the new PIEZOSURGERY® devices.

When mectron introduced PIEZOSURGERY® in 2001, the technology was revolutionary for bone surgery: a device providing precision, safety, perfect ergonomics and the highest quality to surgeons all around the world. The new technology immediately became state-of-the-art for bone surgery devices.

Having set this benchmark, we improved the technology in the following years - with a strong focus on ergonomics. The outcome: two devices offering a perfect balance between cutting performance and safety – PIEZOSURGERY® touch and the new PIEZOSURGERY® white.





→ WORKING EFFICIENCY

Providing the optimal ratio between power and security is one of the key success factors of every surgery.

Thanks to its intelligent electronic feedback-system the original mectron PIEZOSURGERY® technology provides the maximum of power and achieves perfect cutting efficacy in every situation – for surgeries which are time-efficient, secure and successful.



...... FXPFRIENCE

PIEZOSURGERY® touch and PIEZOSURGERY® white are already the fourth and fifth generation of the original PIEZOSURGERY® technique. mectron has been designing and manufacturing PIEZOSURGERY® devices since 2001. This experience, plus the input of surgeons worldwide, has been incorporated into our PIEZOSURGERY® devices.



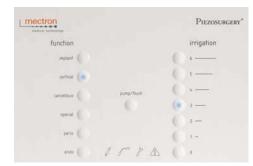


→ HOW PIEZOSURGERY® LETS YOU FOCUS 100% ON SURGERY

STEP 1: tap on the surgery type. **STEP 2:** choose the irrigation type. **STEP 3:** start surgery. Believe us: it is as easy as that. No further insert specific adjustments are required – the fine tuning and indication for each insert is automatically achieved by the PIEZOSURGERY® electronic feedback-system.

This feedback-system is the heart of our PIEZOSURGERY® technology. It automatically detects each insert in few hundredths of a second, continuously monitors and adjusts things like the optimal insert movement or the appropriate power used – and lets you concentrate on your actual job: surgery itself.







-> FLEXIBLE IRRIGATION

SYSTEM

- the irrigation system works with cost-effective standard parts
- → tube of peristaltic pump is reusable
- ---> standard connections for tubing



... STEDII E DPOTECTION EOILS

The exclusive touch display of PIEZOSURGERY® touch and PIEZOSURGERY® white can be protected with a dedicated, individually packed, sterile transparent foil. Thanks to these invisible shields, no dirt, scratches or fingerprints will affect your keyboard.



- easy to adapt handpiece
 holder
- ---- 4 positions
- ---> sterilizable





EXPERIENCE ECONOMY.

How mectron gets you started with the new PIEZOSURGERY® white.

This is your perfect starting tool into bone surgery with PIEZOSURGERY®: The new PIEZOSURGERY® white comes with 100% simple handling for utmost treatment security, materials especially selected for easy cleaning, disinfection and sterilization and cost-effective standard parts for perfect economy.

So if you always wanted to use the groundbreaking PIEZOSURGERY® technology, but were hold back by economical considerations – here's your chance to take your bone surgery to the next level.







→ APC (AUTOMATIC PROTECTION CONTROL)

- → recognizes deviations from standard functioning automatically
- stops power and liquid in less than 0,1 seconds
- shows cause of the interruption on the keyboard

---> FLEXIBILITY

→ 360° function of the foot control



→ FLUSH FUNCTION

started by a finger tip
 cleaning cycle for
 the device's main
 irrigation tubes



---> HANDPIECE

- handpiece and handpiece cord (including the irrigation line) are fully sterilizable together
- --- handpiece cord is extremely flexible

*** EXPERIENCE PERFECTION.

How mectron raises bone surgery to a completely new level with the PIEZOSURGERY® touch.

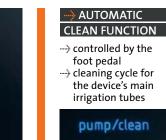
The actual benchmark in bone surgery comes with 100% perfection in every detail: An exclusive black glass touch screen, the easy to handle user interface and features like the the handpiece with rotatable LED raise the work flow in bone surgery to a completely new level.

Get ready for selecting bone quality and irrigation flow, all it takes is a touch. Get ready for the most comfortable device in bone surgery ever. Get ready for PIEZOSURGERY® touch.













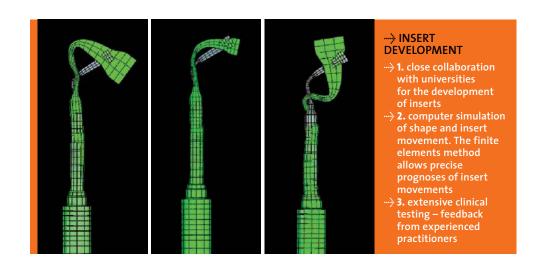
*** EXPERIENCE INNOVATION.

How mectron develops new inserts again and again – with clinicians, for clinicians.

Who could have better ideas and suggestions for new surgical inserts than surgeons themselves? That is why most of our ideas are coming directly from experienced clinicians.

The combination of their ideas with our longstanding experience and technical know-how in insert development is the basis for inserts that are absolutely outstanding and allow highly precise surgical interventions.

A perfect example of our expertise is the world's thinnest osteotomy insert with only 0.25 mm thickness. The best proof of our expertise is that we have more than 80 high quality inserts – the widest range of inserts for piezoelectric bone surgery worldwide.



- gentle and effective bone cutting action
- fine and well-defined cutting line
- used for implant site preparation, osteoplasty techniques and bone chip harvesting

SMOOTHING INSERTS

- diamond-coated surfaces for precise and controlled operation on bone structures
- preparation of difficult and delicate structures (ex: sinus augmentation, nerve lateralization)
- preparation of the final bone shape

BLUNT INSERTS

- --> soft tissue preparation (ex: Schneiderian membrane)



INSERT KITS

- → set of inserts for specific application
- ---> stainless steel tray with depth markings







---- EXPERIENCE QUALITY.

How mectron guarantees highest quality standards for every single insert.

---> PRECISION

A CNC controlled 5-dimensional sharpening machine cuts with an accuracy of up to 0.1 µm. The whole cutting process for a single insert lasts up to 12 min.



During every surgical procedure, an ultrasonic insert oscillates up to 36.000 times per second – an enormous endurance test for the material. That's why only medical grade stainless steel is employed in the production of mectron inserts. And that is why every single ultrasonic insert has to pass 12 working steps before it is ready to bear our name.

Furthermore, these 12 working steps ensure the perfect match of device and insert – which is crucial for the controlled insert vibration, the basis of the PIEZOSURGERY® efficiency.



Depending on the indication, the inserts are coated with specially selected diamonds. The granulometry of the diamond coating is adapted to the respective treatment.



TITANIUM NITRIDE COATING

A coating of titanium nitride, applied to inserts, increases the hardness of the surface, avoids corrosion and therefore increases working life.



---- LABELING

Each insert is labeled gently by a laser.



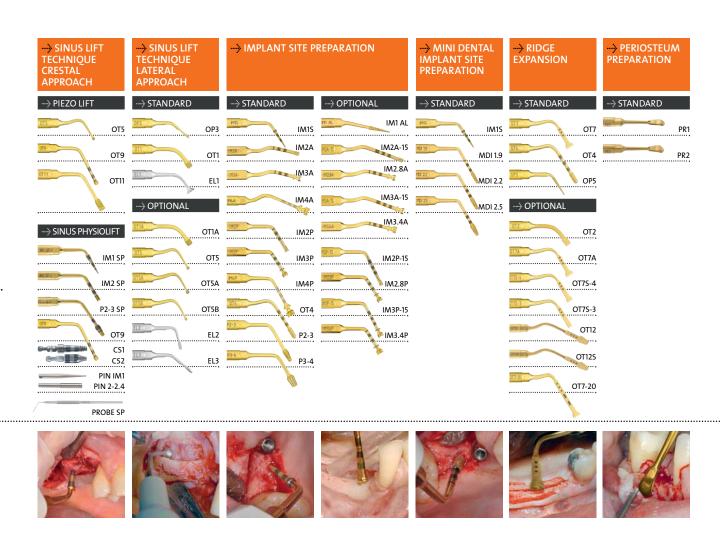
--- OUALITY CHECK

Each insert is checked in detail before getting an OK for sales.

EXPERIENCE DIVERSITY.

How PIEZOSURGERY® covers everything from implantology to orthodontic surgery.

Around 70 different inserts have been already developed for mectron PIEZOSURGERY®, creating the most complete range of tips on the market for a large variety of clinical indications.







EXPERIENCE INTEGRATION.

How PIEZOSURGERY® will support osseointegration of implants!

Implant site preparation with PIEZOSURGERY®, the revolutionary technique – safe and precise.

- faster osseointegration: thanks to the reduction of inflammatory cells and the more active neo-osteogenesis compared to drilled sites
- high intraoperatory control: the particular shape of the implant inserts allows a perfect control of the site preparation
- preparation of 2, 2.8, 3, 3.4 and 4 mm: site preparation with PIEZOSURGERY® allows placement of all common implants







- 1 initial pilot osteotomy

 OPTIONAL: check the preparation axis with alignment PIN IM1S
- 2 pilot osteotomy in anterior or posterior region OPTIONAL: check the preparation axis with alignment PIN 2-2.4
- 3 to optimize concentricity of implant site preparation between Ø 2 and Ø 3 mm, preparation of the cortical basal bone
- 4 to enlarge or to finalize the implant site preparation; insert with double irrigation for optimum cooling



---- IN LITERATURE

Ultrasonic implant site preparation using PIEZOSURGERY®: a multicenter case series study analyzing 3.579 implants with a 1- to 3-year follow-up.

Vercellotti T, Stacchi C, Russo C, Rebaudi A, Vincenzi G, Pratella U, Baldi D, Mozzati M, Monagheddu C, Sentineri R, Cuneo T, Di Alberti L, Carossa S, Schierano G.; Int J Periodontics Restorative Dent. 2014 Jan-Feb;34(1):11-8. doi: 10.11607/prd.1860

Abstract

This multicenter case series introduces an innovative ultrasonic implant site preparation (UISP) technique as an alternative to the use of traditional rotary instruments. A total of 3,579 implants were inserted in 1,885 subjects, and the sites were prepared using a specific ultrasonic device with a 1- to 3-year follow-up. No surgical complications related to the UISP protocol were reported for any of the implant sites. Seventy-eight implants (59 maxillary, 19 mandibular) failed within 5 months of insertion, for an overall osseointegration percentage of 97.82% (97.14% maxilla, 98.75% mandible). Three maxillary implants failed after 3 years of loading, with an overall implant survival rate of 97.74% (96.99% maxilla, 98.75% mandible).

Cytokines and Growth Fa in the Osseointegration o Implants Positioned (Isin Bone Surgery Versus a D A Pilot Study in Minipigs	of Oral Titanium og Piezoelectric Orill Technique:
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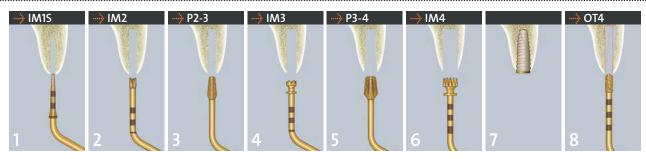
Cytokines and Growth Factors Involved in the Osseointegration of Oral Titanium Implants Positioned using Piezoelectric Bone Surgery Versus a Drill Technique: A Pilot Study in Minipigs.

Preti G, Martinasso G, Peirone B, Navone R, Manzella C, Muzio G, Russo C, Canuto RA, Schierano G.; J Periodontol. 2007; 78(4):716-722

Conclusion

Piezoelectric bone surgery appears to be more efficient in the first phases of bone healing; it induced an earlier increase in BMPs, controlled the inflammatory process better, and stimulated bone remodeling as early as 56 days post-treatment.





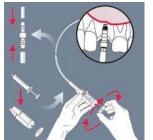
- 5 to optimize concentricity of implant site preparation between Ø 3 and Ø 4 mm, preparation of the cortical basal bone
- 6 to finalize the implant site preparation; insert with double irrigation to avoid overheating
- 7 implant positioning
- 8 OPTIONAL: to correct pilot osteotomy axis (differential implant site preparation), to finalize the implant site preparation close to the alveolar nerve

EXPERIENCE CONTROL.

How the SINUS PHYSIOLIFT® II gives you perfect control during sinus lift operations.

The new SINUS PHYSIOLIFT® II controls the pressure in the sinus cavity!

- Elevation of the sinus membrane with micrometric precision by means of hydrodynamic pressure
- → Watertight sinus elevators CS1 or CS2 for hydrodynamic sinus lift
- -> Atraumatic technique not requiring the use of hammer and osteotome
- Implant site preparation using PIEZOSURGERY® the new insert P2-3 SP allows to remove the sinus basal cortex with minimal risk of penetrating into sinus cavity due to its conical shape
- → Multiple implant placement can be performed
- → A flapless procedure can be performed in some cases



→ HANDLING

After preparation of the site with PIEZOSURGERY®, the CS1 or CS2 elevator is introduced, and the tube connected to a syringe containing 2 ml of physiological saline solution is then inserted in the CS1 or CS2. With the SINUS PHYSIOLIFT® II protocol, it is possible to elevate the Schneiderian membrane safely, controlling the pressure of the liquid by means of the attached Physiolifter device.











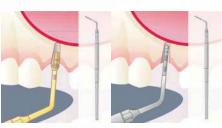
SINGLE IMPLANT SINUS LIFT



1 Incision



2 Preparation for inserting the elevator



3 Basal cortex erosion



3a Option to the sinus basal cortex erosion



4 Insertion of the CS1 elevator



4a Optional: insertion of the CS2 elevator



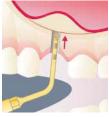
5 Attachement of Physiolifter



6 Elevation of the Schneiderian membrane



7 The actual lift



8 Compacting the graft matrial



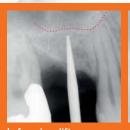
9 Implant placement

→ MULTIPLE IMPLANT SINUS LIFT

This technique, devised for single tooth gaps, can be used even if several teeth are missing. The surgical procedure is identical for the second implant site: a second screw elevator CS1 or CS2 is inserted. It must be ensured during this procedure that the



first screw elevator is impenetrable by applying a special airtight seal so that the system is not pneumatized during the second lift.*



before sinus lift

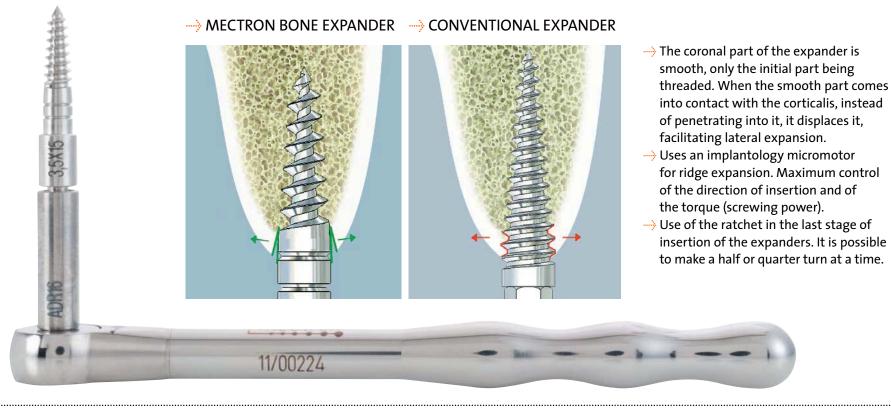


---> CLINICAL OUTCOME
The radiographic controls

The radiographic controls showed that the graft material was distributed evenly around the implants, suggesting the integrity of the membrane.*



¹⁹





- 1 2-mm thick ridge
 2 Initial osteoplasty (insert OP3) to increase
- the thickness of the ridge from 2 to 3 mm
 Crestal osteotomy with 0.35 mm thick
 PIEZOSURGERY® insert OT7S-4
- 4 Introduction of 2.5 mm and 3.5 mm bone expanders in sequence
- 5 X-ray of bone expanders
- 6 End result



EXPERIENCE STABILITY.

How mectron bone expanders guarantee you perfect stability in implantology.

- Technique for expanding the atrophic alveolar ridge
- → Lateral bone condensation technique – lateral compacting of the trabeculae in poor quality bone, greatly improving primary stability
- Technique is less traumatic for the patient than working with a hammer and chisel



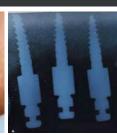














- 1 Thickness of the ridge: 3 mm cancellous bone quality D4
- 2 Initial preparation of the site with IM1 insert
- 3 Preparation of the site with PIEZOSURGERY® insert IM2P
- 4 Bone expanders inserted, lateral bone compacting of the medullary bone, with transition from D4 to D3
- 5 X-ray view showing expanders in place
- 6 Implants in place

→ PIEZOSURGERY® – HISTORY OF A SUCCESS

BONE HEALING



As bone healing is not disturbed by the PIEZO-SURGERY®, but even seems to be improved, this method will have a major influence on new minimally invasive bone surgery techniques with special regard to biomechanics.

Stübinger S, Goethe JW. Bone Healing After PIEZOSURGERY® and its influence on Clinical Applications. Journal of Oral and Maxillofacial Surgery 2007, Sep;65(9):39.e7-39.e8.

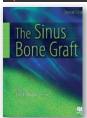
SENSITIVITY



When using the PIEZO-SURGERY® technique, on the other hand, the effort required to make a cut is very slight. This means that greater precision is achieved, guaranteed by the microvibrations of the insert.

Boioli LT, Vercellotti T, Tecucianu JF. La chirurgie piézoélectrique: Une alternative aux techniques classiques de chirurgie osseuse. Inf Dent. 2004;86(41):2887-2893

SIMPLICITY



The revolutionary properties of piezoelectric surgery have simplified many common osseous surgical procedures, including sinus bone grafting.

Vercellotti T, Nevins M, Jensen Ole T. Piezoelectric Bone Surgery for Sinus Bone Grafting. The Sinus Bone Graft, Second Edition. Edited by Ole T. Jensen, Quintessence Books. 2006; 23:273-279

SECURITY



The membrane perforation rate in this series of 100 consecutive cases using the piezoelectric technique has been reduced from the average reported rate of 30% with rotary instrumentation to 7%.

Wallace SS, Mazor Z, Froum SJ, Cho SC, Tarnow DP. Schneiderian membrane perforation rate during sinus elevation using piezosurgery: clinical results of 100 consecutive cases. Int J Periodontics Restorative Dent. 2007; 27(5):413-419

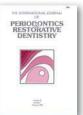
EFFECTIVITY



The morphometrical analysis revealed a statistically significant more voluminous size of the particles collected with PIEZOSURGERY® than rotating drills.

Chiriac G, Herten M, Schwarz F, Rothamel D, Becker J. Autogenous bone chips: influence of a new piezoelectric device (PIEZOSURGERY®) on chips morphology, cell viability and differentiation. J Clin Periodontol. 2005: 32(9):994-999

PATIENT COMFORT



Microvibration and reduced noise minimize a patient's psychologic stress and fear during osteotomy under localanesthesia.

Sohn DS, Ahn MR, Lee WH, Yeo DS, Lim SY. Piezoelectric osteotomy for intraoral harvesting of bone blocks. Int J Periodontics Restorative Dent. 2007; 27(2):127-131

• 199

- mectron and Prof. Tomaso Vercellotti developed the idea of piezoelectric bone surgery
- mectron produces the first prototype devices
- first extraction treatments

- → first lateral sinus lift vercellotti introduced the name PIEZOSURGERY® for the new
 - method

 → first bone
 splitting treatments in the
 maxilla

→ 2000



- first bone splitting in the mandible
 first case studies about ridge expansion

→ 2001

- → first crestal sinus lift
 → Piezosurgery® I, the
- world-wide first unit of piezoelectric bone surgery, is presented by mectron at IDS
- --- over 20 inserts are available
- → first study about sinus lift with PIEZOSURGERY® presented

--- 2002

- development
 of periodontal
 resection
 surgeries
- → first bone block grafting treatments

--- 2004



- more powerful and better ergonomics – mectron presents the 2nd generation of the PIEZOSURGERY® device
- first orthodontic microsurgery treatments

22





medical technology

EXPERIENCE EXPERIENCE.

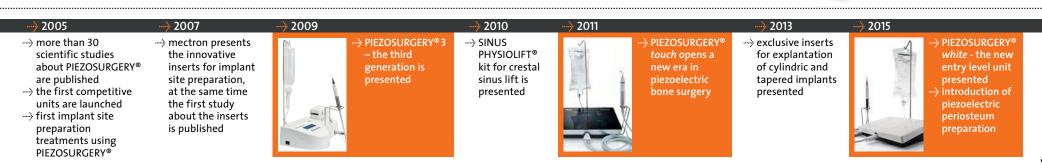
How mectron has been defining the future of bone surgery for the last 18 years.

Have you ever looked for scientific studies on bone surgery using other devices than PIEZOSURGERY®? Well, you could as well look for a needle in a haystack – their number is extremely slight.

From the very beginning 18 years ago we have worked together closely with scientific institutes and done successful clinical research. That is why the PIEZOSURGERY® method is the only one supported by more than 250 clinical and scientific studies.

But find out for yourself – on www.mectron.com. Here you will find the abstract collections as well as an updated list of publications about PIEZOSURGERY®.





EXPERIENCE EDUCATION.

How mectron prepares you for the PIEZOSURGERY® method.

Besides its revolutionary technology, its unique level of quality and its perfect ergonomics there is another important factor for the success of the PIEZOSURGERY® technology: you.

That's why we offer you the perfect preparation: intensive training and continuing education that has been crucial for PIEZOSURGERY® since the beginning – and which have made it what it is today: state-of-the-art in various surgical procedures.

MECTRON PIEZOSURGERY CLINICAL APPLICATIONS PIEZOSURGERY mectron

DVD CLINICAL APPLICATION

More than 60 videos of surgeries are on the DVD. Allowing an easy orientation about the possibilities PIEZOSURGERY® is offering.









→ WWW.PIEZOSURGERYACADEMY.COM

Welcome to the PIEZOSURGERY® Academy – an independent institute for the advancement of the original PIEZOSURGERY® method. Feel free to discover the various possibilities of PIEZOSURGERY® and join one of our diverse seminars - of course offered in different languages.



→ WWW.MECTRON.COM/EDUCATION

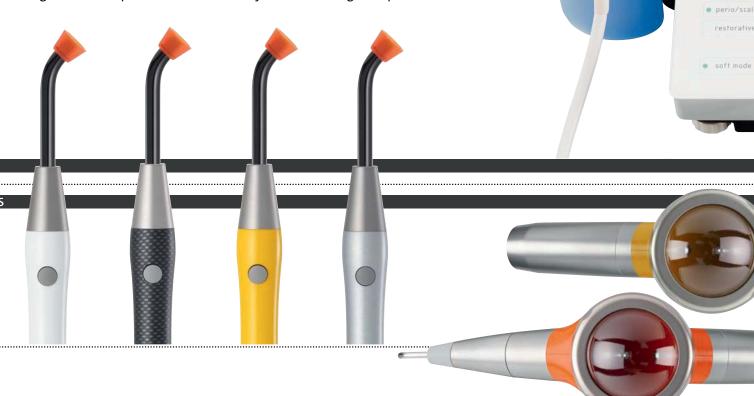
On www.mectron.com we offer you even more seminars: In the section courses and workshops you will find different seminars on PIEZOSURGERY® in English. Please contact your mectron partner for courses in your local language – you will find the contact address in the dealer list on our website.



How mectron covers a wide range of products for almost every dental demand.

Now, after learning about the various benefits of the PIEZOSURGERY® technology, you might ask yourself: can I get this quality, this precision, this experience and this efficiency in other dental fields, too?

The answer is: yes. mectron offers you a wide range of dental products from air-polishing to LED-polymerization lights and ultrasonic scalers. So if you are looking for a strong and reliable partner for almost every dental challenge – experience mectron.



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