

Heal Bones Naturally

Ask your doctor about OSSIOfiber[®] implants, engineered for strength and designed to integrate into the body—leaving nothing but your own healthy bones behind.

Why OSSIOfiber[®]?

Traditional metal implants have not changed significantly in over a century. Even after return to function, many people experience ongoing discomfort from permanent metal implants, like painful swelling and new sensitivity to cold temperatures. They can leave surrounding bone weaker than healthy bones and prone to new injury.

1 in 4 people have 'permanent' metal hardware removed in a second operation.¹ This can require an average of **10 additional sick leave days**² and still lead to new complications like infections or wound healing issues, lack of pain relief or improvement in function.^{1,3,4}

OSSIOfiber[®] implants provide strong and bio-integrative fixation to restore, regrow, and renew bone avoiding the risks and costs associated with permanent metal hardware.



IN A RECENT CLINICAL STUDY :

100% OF PATIENTS WERE SATISFIED AND WOULD RECOMMEND OSSIOfiber[®] TO OTHERS.⁵

How it Works



RESTORE

Surgery

Securely fixates bones while utilizing the surgeon's established surgical approach



REGROW

Post-Operative Healing

Supports the body's natural rehabilitation while new bone is forming, attaching, and growing throughout the internal structure of the implant



RENEW

Only Nature Remains

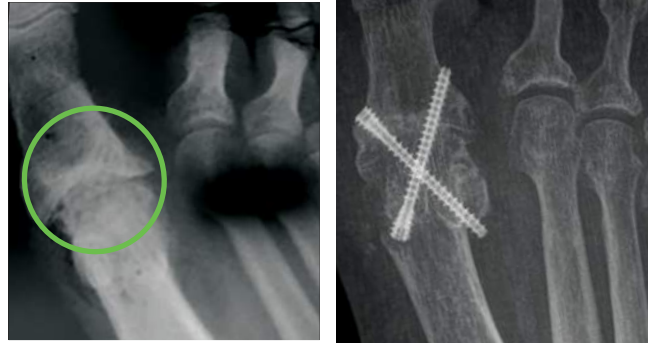
Return to function in the same time as metal implants. Turns into bone or tissue without adverse complications.⁶

FOR DOCTORS:

Why offer strong and Bio-Integrative Implants to your Patients?

Bio-Integrative OSSIOfiber® implants provide strong, secure fixation with 1.5x strength of cortical bone⁵, enable bone attachment and in-growth during the healing process, and gradually integrate into the surrounding anatomy within 78 – 104 weeks⁶ – leaving no permanent hardware behind.

- Avoid the risks and costs associated with permanent metal hardware
- Doesn't cause the adverse inflammation commonly seen with resorbable implants⁶
- Use existing reimbursement and surgical techniques
- Promotes a more natural healing environment
- In a recent clinical study, 100% of patients were satisfied and would recommend OSSIOfiber® to others⁵



SEE FUSION, NOT HARDWARE

These X-rays are of two similar patients who underwent an identical surgical procedure. One patient was treated with Bio-Integrative OSSIOfiber® while the other was treated with traditional metal compression screws.*

* Results shown here are not predictive of results in other cases. Results may vary.

OSSIOfiber® Products for Foot/Ankle & Hand/Wrist Procedures

TRIMMABLE FIXATION NAIL

HAMMERTOE FIXATION SYSTEM

HEADLESS COMPRESSION SCREWS

OSSIOfiber® Technology can be manufactured into endless implant designs to offer strong and Bio-Integrative fixation solutions across orthopedic specialties such as trauma, sports medicine, pediatrics, spine, and more.



See Case Studies and Learn More about OSSIOfiber® at www.ossio.io

For Product Inquiries, Customer Service & Ordering Information, contact us at:

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1. Kaiser, P. B., Watkins, I., Riedel, M. D., Cronin, P., Briceno, J., & Kwon, J. Y. (2019). Implant Removal Matrix for the Foot and Ankle Orthopaedic Surgeon. *Foot & Ankle Specialist*, 12(1), 79–97. <https://doi.org/10.1177/1938640018791015> 2. Busam ML, Esther RJ, Obremsky WT. Hardware Removal: Indications and Expectations. *Journal of the American Academy of Orthopaedic Surgeons*. 2006;14(2):113-120. doi:10.5435/00124635-200602000-00006. 3. Pot J, Wensen RV, Olsman J. Hardware Related Pain and Hardware Removal after Open Reduction and Internal Fixation of Ankle Fractures. *The Foot and Ankle Online Journal*. 2011;4(5). doi:10.3827/foaj.2011.0405.0001. 4. Brown OL, Dirschl DR, Obremsky WT. Incidence of Hardware-Related Pain and Its Effect on Functional Outcomes After Open Reduction and Internal Fixation of Ankle Fractures. *Journal of Orthopaedic Trauma*. 2001;15(4):271-274. doi:10.1097/00005131-200105000-00006. 5. Data on File at OSSIO. 6. Pre-clinical animal studies (in-bone implantation of OSSIOfiber and PLDLA control in rabbit femurs).

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