

EXPASYL™

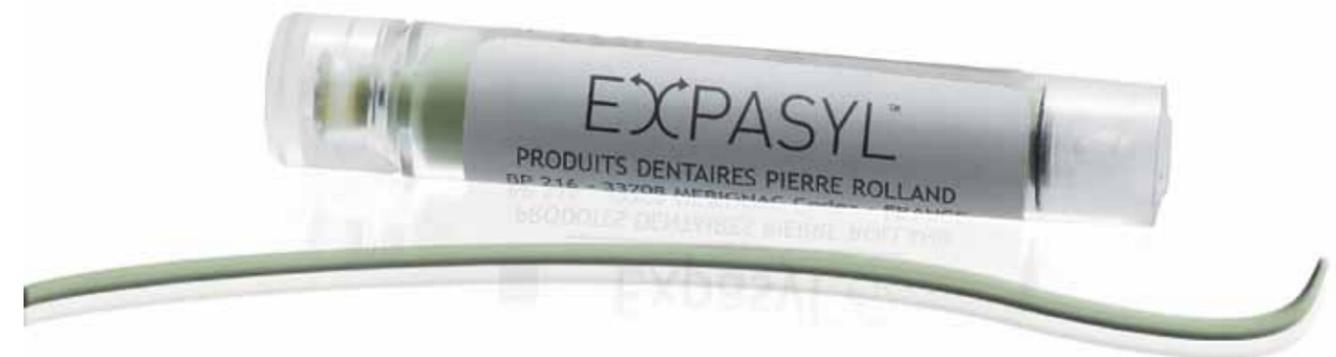


References	Description
KIT & APPLICATOR	
294100	EXPASYL Intro Kit (Applicator Gun+6 Capsules+12 Applicator Tips)
260900	EXPASYL Applicator Gun
CAPSULES & APPLICATOR TIPS	
261030	EXPASYL Capsule - 20 pack (Standard)
261001	EXPASYL Capsule - 20 pack (Strawberry)
261040	EXPASYL Applicator Tip - Box of 40
261005	EXPASYL Applicator Tip - Box of 100

EXPASYL™

**Effective and atraumatic
gingival retraction paste**

F0355 / June 1, 2016



YOUR GREATEST ALLY FOR A NATURAL AND ESTHETIC PROSTHESIS

EXPASYL™

15 YEARS
OF CLINICAL
EXPERIENCE



THE RIGHT PRESSURE FOR A SAFE AND EFFECTIVE RESULT

Expasyl provides excellent benefits with little risk. Its viscosity has been carefully calculated to open the sulcus effectively without damaging the epithelial attachment. The opening quality is equivalent to that obtained with a retraction cord. Your procedure is both safe and effective with very little bleeding and no pain.

UNPARALLELED
PERFORMANCE

- Top-quality opening and efficient drying
- Preserves the epithelial attachment and gum line
- No bleeding
- No recession. No pain
- Fast, simple and cost effective protocol



AJ. Faucher, Académie du Sourire

MULTIPLE
INDICATIONS

- Expasyl offers a wide range of applications:
- Conventional and digital impression
 - Sealing / Bonding
 - Class II and V preservative care
 - Implantology

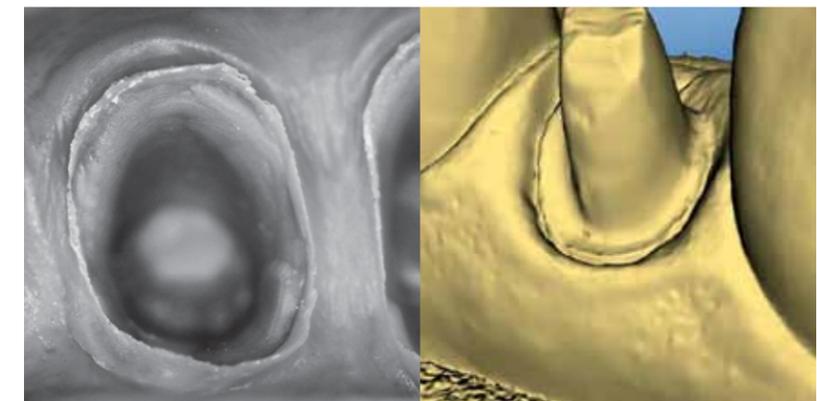


WITH EXPASYL, EXPERIENCE PRECISE IMPRESSIONS

The prosthesis is natural, attractive and perfectly adjusted. The gingival tissue remains intact.



AJ. Faucher, Académie du Sourire



M. Elmosnino

P. Lalet, e-dentisterie

THE RIGHT PRESSURE FOR A PERFECT SULCULAR OPENING WITH NO TRAUMA OR PAIN

MAXIMUM
EFFICIENCY

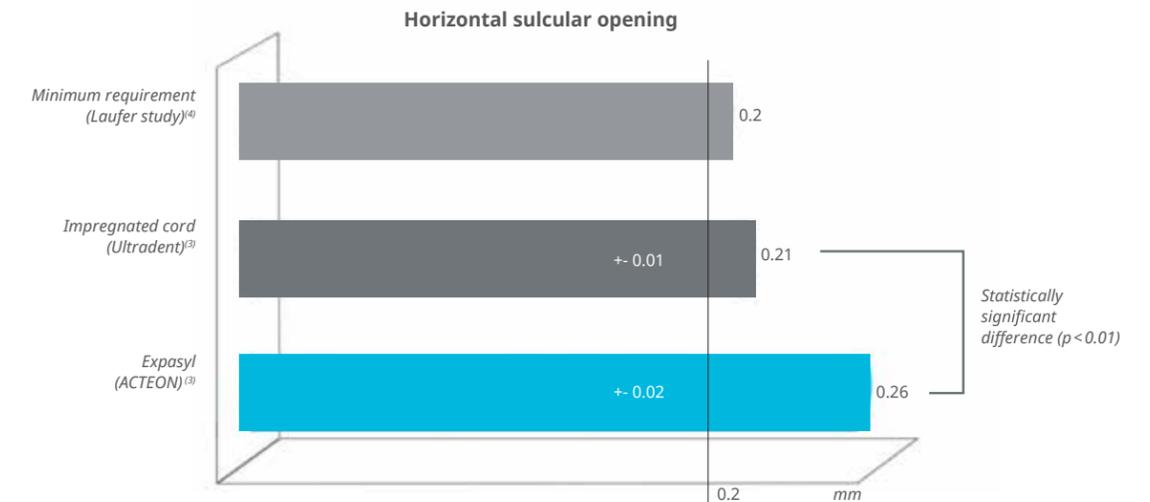
- The compound opens the sulcus and dries blood, saliva and fluids efficiently
- Combination with an accessory solution or additional procedure is no longer necessary
- The preparation limits and emergence profile are fully accessible
- No cotton cap required

PAINLESS
& ATRAUMATIC
PROCEDURE

- Expasyl generates a pressure that is 37 times less than that of a cord (143 vs 5396 kPa)⁽¹⁾
- The epithelial attachment is preserved (the integrity of the epithelial attachment is not guaranteed above 2400 kPa)⁽²⁾. The risk of gingival recession and bone resorption are reduced

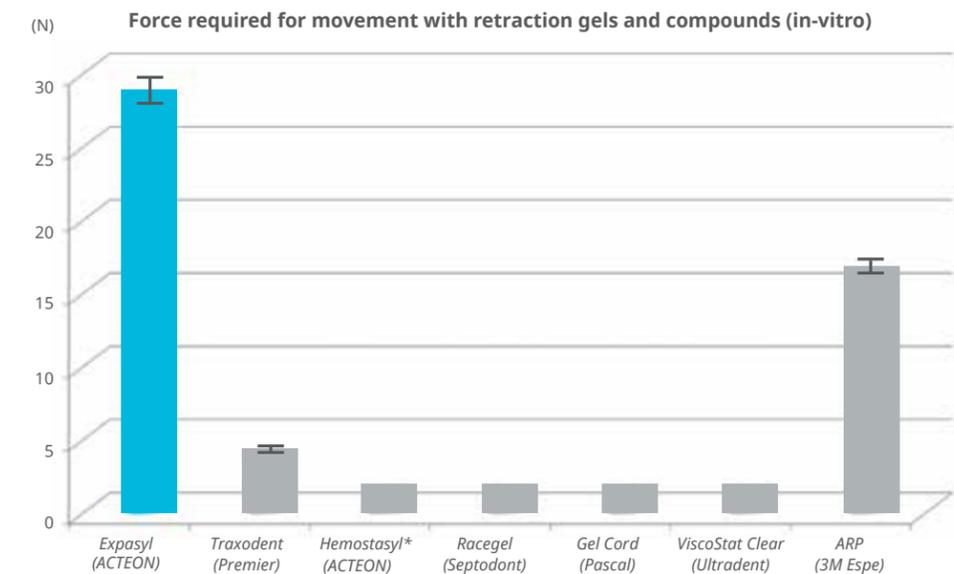
Better opening than a retraction cord

Expasyl provides a significantly better horizontal sulcular opening than can be obtained with a retraction cord⁽³⁾.



Greater pressure than other compounds

Expasyl generates a pressure that is 1.7 to 9.2 times greater than other retraction compounds available on the market⁽⁵⁾.



G. ALDIE



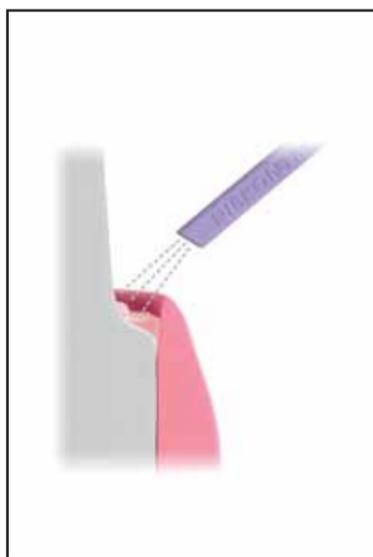
G. ALDIE

(3) Prasanna GS, Reddy K, Kumar RK, Shivaprakash S. Evaluation of efficacy of different gingival displacement materials on gingival sulcus width. *J Contemp Dent Pract.* 2013 Mar 1;14(2):217-21. (4) Laufer BZ, Baharav H, Langer Y, Cardash HS. The closure of the gingival crevice following gingival retraction for impression making. *J Oral Rehabil.* 1997 Sep;24(9):629-35. (5) Abstract #1364. American Association for Dental Research. 2012 March. * Note: Hemostasyl is included in this study but is not a retraction compound.

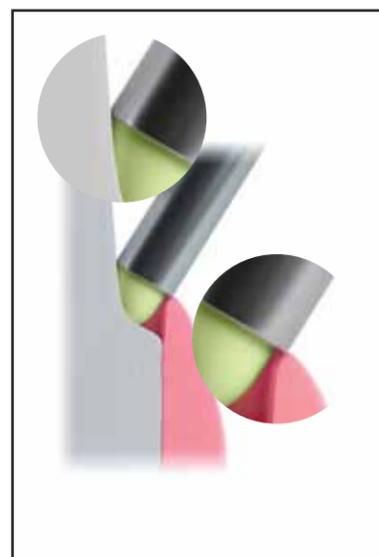
(1) Bennani V, Aarts JM, He LH. A comparison of pressure generated by cordless gingival displacement techniques. *J Prosthet Dent.* 2012 June;107(6):388-92. (2) Bennani V, Inger M, Aarts JM. Comparison of pressure generated by cordless gingival displacement materials. *J Prosthet Dent.* 2014 Aug;112(2):163-7.

FAST, SIMPLE AND COST EFFECTIVE

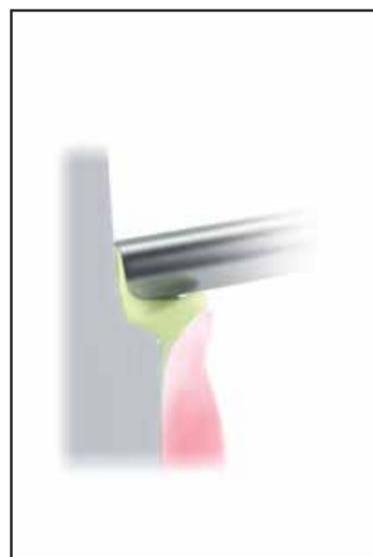
SIMPLE PROCEDURE



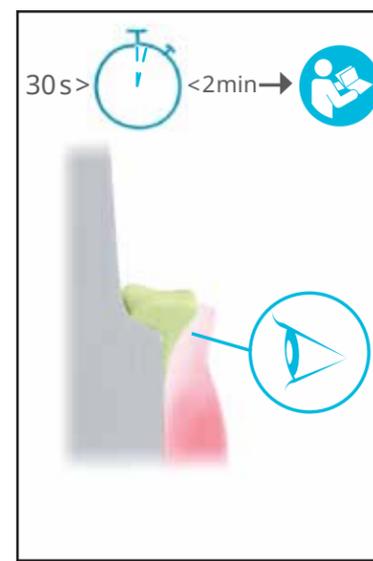
1 Gently rinse and dry the preparation.



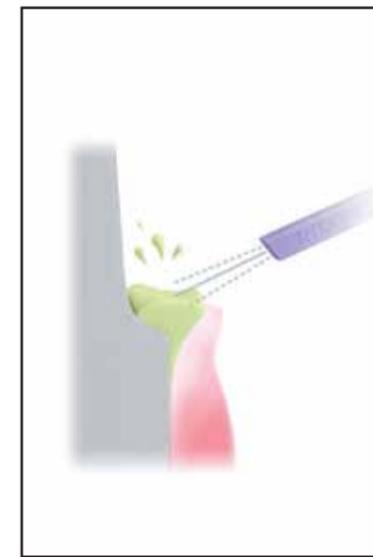
2 Position the end of the applicator tip to create a closed space. Slowly extrude the material.



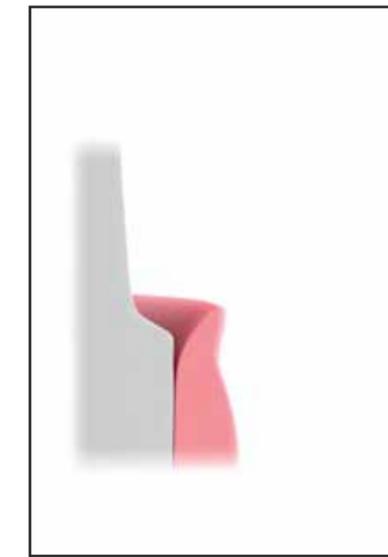
3 After applying, press the end of the applicator tip to the tooth and pivot it. The compound cord is easily broken away.



4 Let Expasyl act for 1-2 minutes. The gum tissue whitens, indicating the compression exerted by the material.



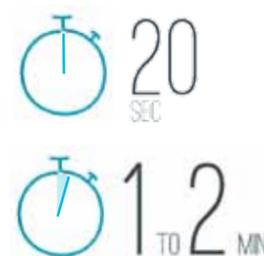
5 Clear with a gentle air-water spray.



6 The sulcus is opened, and the site is completely dry. No injury. No pain. No bleeding.

TIME SAVINGS

- Placement: Expasyl easily inserts into the sulcus in less than 20 seconds
- Contact time: Expasyl works in just 1-2 minutes
- Removal: Expasyl is easily cleared with a gentle air-water spray



COST SAVINGS

- With Expasyl, there is no need for additional anesthesia or hemostasis
- Multifunctional operation takes the place of other products
- Impression made at the same clinical time, even with heavy bleeding

A COMPOUND SUITABLE FOR ALL CLINICAL CASES

1



The teeth are prepared for veneer restorations. The limits are very slightly subgingival

2



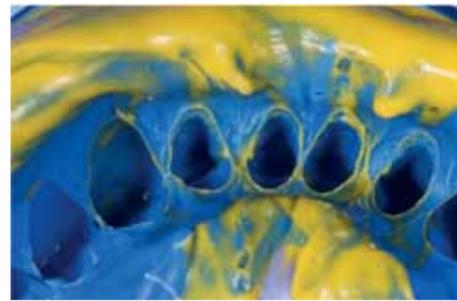
End of gingival retroversion with nothing but the use of Expasyl left on for 2 minutes.

3



After removing the product and drying the preparations, light silicone is applied to the incisal area. It is pushed into the open sulcus with no trauma by the heavy silicone, using the triple mixture method.

4



Result of the imprint: the sulcular space is defined by the light silicone.

5



The temporary veneers are in place.

6



Final result one year after the procedure. AJ. Faucher Académie du sourire

Like a traditional impression, a digital imprint requires a precise reading of the limits and no bleeding. For this subgingival preparation covering the dark side of the tooth, the gum tissue quickly repositions itself on the margin, making it impossible to read.

Expasyl makes it possible to open and dry the sulcus for a perfect impression. Because reading is easier, the procedure is completed more quickly.

P. Lalet
e-dentisterie

1



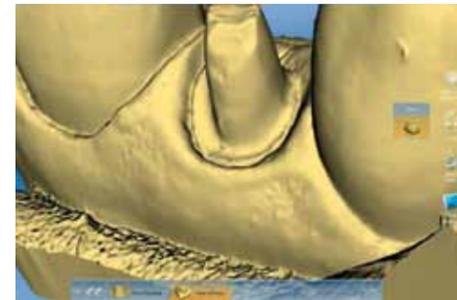
2



3



4



5



1



Teeth 16 and 17 before Expasyl.

2



Expasyl left in place for 1 minute.

3



Teeth 16 and 17 after Expasyl removal.

4



Digital impression of preparations 16 and 17. Very readable preparation limits thanks to Expasyl.

5



CAD porcelain caps in place (photo 10 days after placement). The limits are met, and the gum tissue is intact. G. Aldié

APPROVED BY EXPERTS

EXPASYL™ IS RECOMMENDED BY:



Expasyl and Intact Epithelial Attachment

The epithelial attachment is the most fragile part of the periodontium. It must be approached with care during treatment and when working with prosthesis so as not to cause breakage and/or irritation. ACTEON was the first to offer the Expasyl™ system, making it possible to deflect the gums without breaking the epithelial attachment and to create an impression for a prosthesis that is state of the art. As periodontists, we are naturally excited about not being iatrogenic and preventing unfortunate attachment loss and unsightly gingival recession.

*Dr. Jacques CHARON
Periodontist*

Designer of the PerioConcept Method



Expasyl and Intact Epithelial Attachment

A system for gentle gum eversion and reliable hemostasis, such as Expasyl, is an essential part of the preparation protocol prior to recording optical data. [...] An additional specific advantage in using Expasyl with direct CAD/CAM (full treatment during one session) is that Expasyl treats the epithelial attachment, which means that bonding can be carried out during the same while preserving the gum line during all the phases of creation, in a single operation.

*Dr. Fabienne JORDAN-COMBARIEU
Dental Surgeon
Trainer for e-dentisterie, approved by the ISCD
(International Society of Computerized Dentistry)*



Expasyl and Implantology

Even though the majority of prosthetic steps are done using transfers and replicas, often avoiding aggression to the soft peri-implant tissue, clinicians may need a better view of the cervical edges of implants and must therefore keep in mind the fragility of the periimplant attachment (adhesion of the more vulnerable hemidesmosomes, collagen fibres running parallel to the main axis of the implant and therefore less anchored, peri-implant conjunctive tissue with fewer cells and blood vessels than the periodontal conjunctive tissue of a natural tooth, etc.).

*Dr. Francis LOUISE
Periodontist
UP-HP*

Expasyl and Ceramic Bonding

Expasyl is a product I cannot do without in my day-to-day practice. It is extraordinary for making impression and, in the time of ceramic restoration, essential for eliminating gingival fluid during bonding.

*Dr. Gary M. RADZ
Private Practice - DDS
Cosmetic Dentistry of Colorado
L'ACA D E M I E D U S O U R I R E
RECOMMANDÉ PAR*

The reference in terms of CEREC ab-initio training and the mastery of advanced practices.