

Articles Published by the Independent Clinicians Who Used **OSTEOBONE** in Their Clinics with Successful Outcomes

OSTEOBONE versus bone autograft for calcaneal fractures accompanied with bone defect
G. Yi, J. Yang, L. Zhang, S. Fu, X. Guo, Y. Liu, B. Qin, G. Wang. Orthopedic Surgery of China. Vol. 8, 706-711, 2019.

Abstract: To compare the clinical outcomes of **OSTEOBONE** versus bone autograft, 72 patients of calcaneal fractures accompanied with bone defect from January 2014 to January 2017 in our hospital were randomly divided into two groups, a study group of 37 patients received artificial **OSTEOBONE** (AB), control group of 35 patients treated with bone autograft (BA). Results: The AB group proved significantly superior to the BA group regarding to the operation blood loss, operation time and postoperative drainage ($P < 0.05$). The follow up period lasted for more than 1 year. No significant difference was proved in fracture healing time between the two groups ($P > 0.05$). The AOFAS scores significantly increased as time went on in both groups ($P < 0.05$). Conclusion: The **OSTEOBONE** as an alternative to bone autograft does achieve satisfactory clinical outcomes with few complications and is suitable to calcaneal fractures accompanied with bone defect.

https://cstj.cqvip.com/Qikan/Article/Detail?id=90748883504849574856484857&from=Qikan_Article_Detail

Gray Scale Ratio Evaluation of the Effectiveness of **OSTEOBONE** Repair Materials in Repairing Mandibular Bone Defects

X. Luo, Y. Wang. Chinese Journal of Aesthetic Medicine. Vol.3, 114-117, 2018.

Abstract: To evaluate the osteogenic effect of **OSTEOBONE** repair material through the changes in imaging grayscale ratio after it is implanted into the mandibular defect, 20 patients with bone defects in the posterior mandibular area due to odontogenic cysts were selected and implanted with **OSTEOBONE** repair materials. CBCT was taken before surgery and at 1, 3, and 6 months after surgery. The grayscale ratio of the normal and coronal planes and the healthy side was measured. Conclusion: **OSTEOBONE** repair material has a significant osteogenic effect in repairing bone defects in the posterior mandibular area.

<http://www.cqvip.com/qk/90129a/201803/7000560621.html>

Clinical Efficacy of **OSTEOBONE** Repair Materials in GBR at the Same Time as Extraction of Impacted Mandibular Third Molars

W. Chen, Z. Chen, W. Zhang, K. Chen. Journal of Clinical Stomatology. Vol. 7, 421-423, 2019.

Abstract: To observe and analyze the clinical efficacy of **OSTEOBONE** repair materials in guided bone re-generation (GBR) during the extraction of impacted mandibular third molars at the same time, 40 patients with impacted mandibular third molars were treated in randomly divided GBR group and control group (20 cases each). The GBR group underwent guided bone tissue regeneration using **OSTEOBONE** repair materials after tooth extraction, while the control group underwent routine treatment of tooth extraction wounds with only tight suturing. Records were recorded 6 months after surgery. The bone density of the tooth extraction area, the change

in the distal alveolar ridge height of the second molar and the pain were measured in the two groups. **Results:** Bone density (Hu) of the **OSTEOBONE** group (137.35 ± 8.82) was higher than that of the control group (109.10 ± 11.40); The change in the height of the distal alveolar ridge of the second molar (H) in the **OSTEOBONE** group (4.56 ± 1.43) mm was higher than that in the control group (0.93 ± 0.83) mm; the visual analog scale value was significantly smaller than that of the control group (2.00 ± 1.15) ($P<0.01$). **Conclusion:** **OSTEOBONE** repair material can be used at the same time after the extraction of mandibular impacted third molars. The therapeutic effect is remarkable with **OSTEOBONE**.

https://www.nstl.gov.cn/paper_detail.html?id=5c6498d3594138f31b6af493e5143f3d

https://xueshu.baidu.com/usercenter/paper/show?paperid=1p4f0vs0aj300a70ux4w02e0c2032862&site=xueshu_se

Synchrotron radiation imaging to compare the effectiveness of two different bone repair materials in repairing femoral defects in rabbits

L. Sun, Y. Liu, Z. Wang. Chinese Journal of Tissue Engineering Research. Vol. 27(21), 3343-3348, 2023.

Abstract: To compare the effectiveness of Bio-Oss bone powder and **OSTEOBONE** bone repair materials in repairing bone defects using synchrotron radiation micro-tomography imaging and histopathologic examination, 32 white rabbits were randomly divided into a control group ($n=12$) and an experimental group ($n=20$). The control group was filled with physiological saline, and the experimental group was filled with **OSTEOBONE**. Eight weeks after the operation, the repair effects of the two repair materials were evaluated through gross observation, imaging, and histopathological examination. **Results and conclusion:** The CT value of **OSTEOBONE** side at 8 weeks was significantly higher than that of the Bio-Oss bone powder side ($P<0.05$). The results show that **OSTEOBONE** repair material can promote the formation of new bone and damage repair.

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Comparison of Clinical Efficacy of the Double-Incision Locking Plate Combined with **OSTEOBONE Implantation and Autogenous Iliac Bone Graft in the Treatment of Complex Tibial Plateau Fractures**

G. Yi, L. Zhang, S. Fu, X. Guo, Y. Liu, B. Bo, Y. Luo, G. Wang. Chinese Journal of Tissue Engineering Research. Vol. 23(16), 2486-2492, 2019.

Abstract: To compare the clinical efficacy of double-incision locking plate combined with **OSTEOBONE** implantation and autologous iliac bone graft in the treatment of complicated tibial plateau fractures, clinical data of 71 patients with complex tibial plateau fractures who underwent open reduction and internal fixation with double-incision locking plate and bone graft were analyzed retrospectively. Among them, 35 cases were treated with double-incision locking plate combined with **OSTEOBONE**, and 36 cases (control group) were treated with double-incision locking plate combined with autologous iliac bone graft.

RESULTS AND CONCLUSION: Follow-up results showed that the operation time, intraoperative blood loss, postoperative drainage volume, fracture healing time, pain and symptom points in Knee Injury and Osteoarthritis Outcome score, collapse score and total score

in Rasmussen imaging, and incidence of complications in **OSTEOBONE** group were significantly better than those in the control group ($P < 0.05$). These results imply that compared with the autologous iliac bone graft, the treatment of complex tibial plateau fractures with the double-incision locking plate internal fixation combined with **OSTEOBONE** can shorten the operation time, reduce bleeding and complications, form a stronger support, and accelerate fracture healing.

<https://www.cjter.com/CN/10.3969/j.issn.2095-4344.1204>