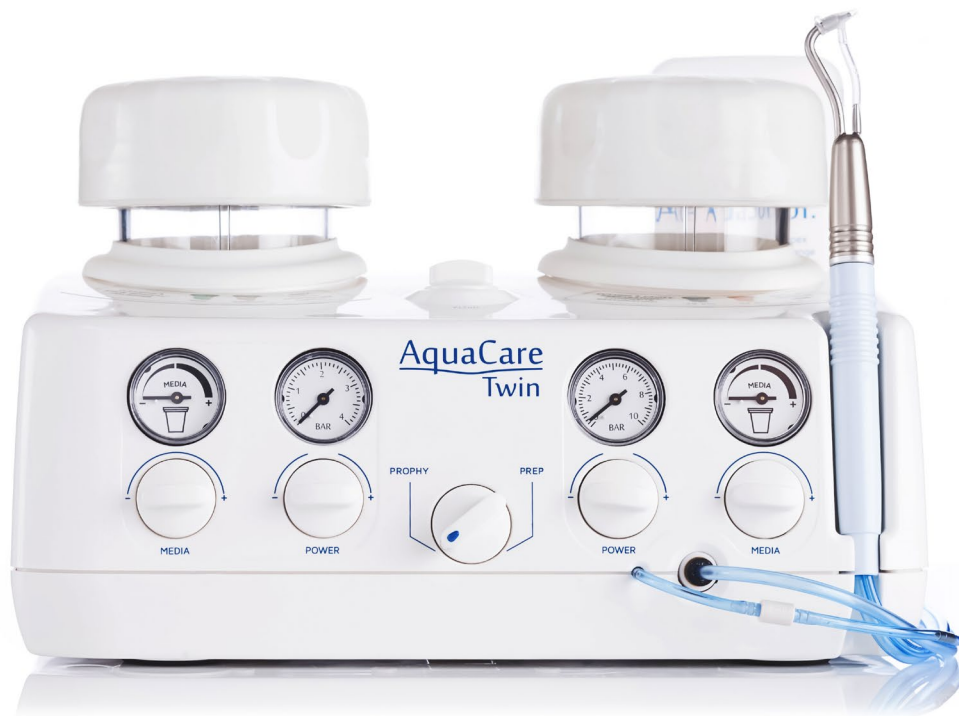


AquaCare

Dentistry's New Norm



*"The Difference between just using a device
or investing in a Philosophy"*

Dr. Dimitris Tsananaktsidis



INNOVATION

AquaCare uses breakthrough technology to deliver a comfortable, quick clean procedure, by using a fine stream of fluid combined with a tiny volume of powder directed at the teeth to be treated.

CONTACTLESS

Unlike conventional rotary cutting instruments, the AquaCare handpiece is not in direct contact with the tooth structure, removing only the minimum of sound tooth material and eliminating the risk of chipping and stress fractures.

VERSATILE & FLEXIBLE

We've designed AquaCare so that it works ideally and provides for the widest range of dental cases.

Our unique cartridge system allows for two chambers to be ready for use at any time; multiplying your options to adapt to any case or situation. It takes just ONE SECOND to switch! As more powders become available the system is future proof.



CAPABILITIES

Adhesive dentistry, Bonding, Clean, Desensitizing, Endo, Hygiene, Implant, Laboratory, MI, Ortho, Pediatric, Pekkton, Perio, Remineralising, Restorative dentistry, Stain removal, Veneers...
Supra or Sub Gingivally.

A SELECTION OF APPLICATIONS...

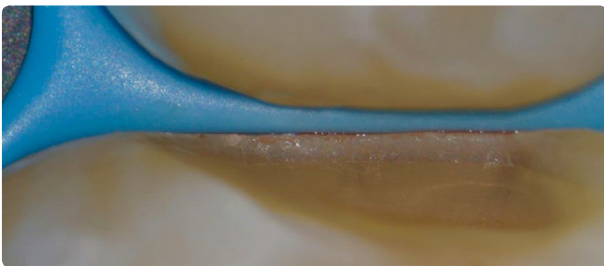
- AquaCare increases bond strength with its texturing of the cavity surface.
- Balanced, slim line fully autoclavable handpiece without bulky attachments.
- Incredibly versatile across a wide variety of restorative dental procedures.
- User-friendly with easy colour code cartridge system makes swapping between types of treatment effortless.
- Minimal need for anaesthetics combined with the lack of vibration, heat generation and noise leads to reduced patient anxiety. AquaCare is recognised as a practice enhancing product.
- Faster, more efficient cleaning for removing stains from all tooth aspects, even accessibly difficult pits and crevices, whilst also treating sensitivity. Patients love their brilliant smiles.



"Air abrasion from buccal and lingual to remove all debris. I use an AquaCare." **Dr. Lincoln Harris**, restoringexcellence.com.au



"Particle abrasion with 29µm Aluminium Oxide to remove aprismatic enamel and improve bond strengths prior to no prep direct bonding to close black triangles which were secondary to periodontal disease." **Dr. Jason Smithson**



"Always finish on 29µm Aluminium Oxide and Syc." **Dr. Thomas Taha**



"Cleaning and conditioning old composites with AquaCare 53µm Aluminium Oxide." **Dr. Jordi Manauta**



"Cleaning with Syc." **Dr. Griya Ridha Raharja**

POWDERS

When it comes to powder, we believe you deserve the best quality so that your experience with AquaCare never fails to be other than outstanding.

That's why we are constantly developing our powders, as well as, our partnerships with trusted manufacturers and close collaborators.



OUR RANGE OF TIPS

Standard Tip

Suitable for all powders and both handpieces, used mainly for hygiene and clean

iTip

Designed for interproximal and diastema use, though routinely used in many other applications

Plus Tip

Ideal for larger particle size and wider coverage e.g. Hypomineralised cases & hygiene use



AQUASOL

AquaSol safely and effectively delivers a sleeve of fluid surrounding the powder in use.

The advanced 'Venturi' design tip ensures mixing is external of the handpiece and blockage free.

It's patient-friendly with a Vanilla aroma.



SPECIFICATIONS



Height: 185mm
Width: 265mm
Depth: 240mm
Weight: 3.066kg



Height: 185mm
Width: 184mm
Depth: 216mm
Weight: 1.900kg

- Min. Air Supply Pressure: 5 bar / 72 psi
Max. Air Supply Pressure: 7 bar / 100psi
Output Pressure: 0-7 bar / 100psi; Infinitely variable for cutting / polishing via control knob and pressure gauge.
Handpiece Tip Sizes: 0.6 Silver / 0.8mm Gold.
Air Abrasion Media: 53µm Aluminium Oxide, 29µm Aluminium Oxide.
Air Polishing Media: Sylc Bioglass, Sodium Bicarbonate.

Sylc Powers

WITH AquaCare

Powered by Novamin, Sylc is a calcium sodium phospho-silicate powder, a highly biocompatible material which was initially developed as a bone conductive material. The bioactive glass material reacts with body fluids (saliva) to deposit hydroxycarbonate apatite (HCA), a mineral that is chemically similar to natural tooth mineral.

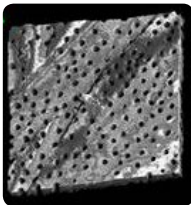
This is one of the reasons why finishing the cavity with Sylc will occlude the dentinal tubules, reduce the water-contamination at the bonding interface with consequent hydrolytic degradation and reduce the risk of postoperative hypersensitivity.



"Always finish on 29µm Aluminium Oxide and Sylc". Thomas Taha

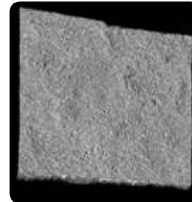
No Magic Powder, Just Science

A



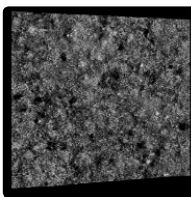
A: Dentine before air-abrasion. Note a smear layer-free surface with many patent dentinal tubules. (Confocal 3D topographic image)

B



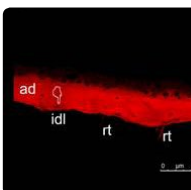
B: Dentine treated using AquaCare and Sylc bioglass. Note the presence of a smear layer occluding the dentinal tubules and covering the entire dentine surface. (Confocal 3D topographic image)

C

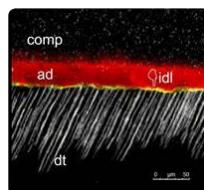


C: Dentine treated using Sylc and conditioned with a universal adhesive in self-etching mode. Note the smear layer partially covering the dentine surface. A Bioglass-rich smear layer is still available for conversion into apatite at the resin-dentine interface. However, most of the dentinal tubules are occluded entirely; the risk for postoperative sensitivity here is very low. (Confocal 3D topographic image)

D



E



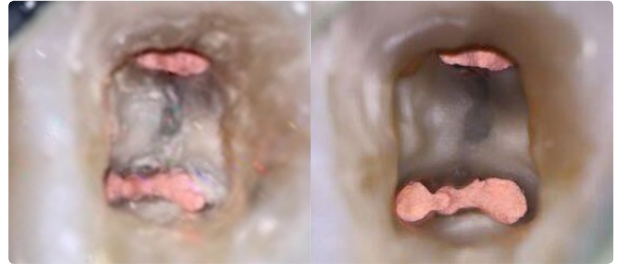
D: Universal adhesive applied in self-etch mode onto a dentine surface treated with AquaCare and Sylc bioglass. Note the adhesive (ad) was able to form a sound interdiffusion layer (IDL: hybrid layer) but with very few resin tags (rt). In the confocal single-projection image (E) it is possible to observe a reflective material obliterating the dentinal tubules. It is most likely that the bioglass particles have penetrated the tubules several microns during the air-abrasion procedures.

Prof. Dr. Salvatore Sauro, Dental Biomaterials, Preventive and Minimally Invasive Dentistry,
Universidad CEU-Cardenal Herrera, Valencia, Spain.

A SELECTION OF APPLICATIONS...



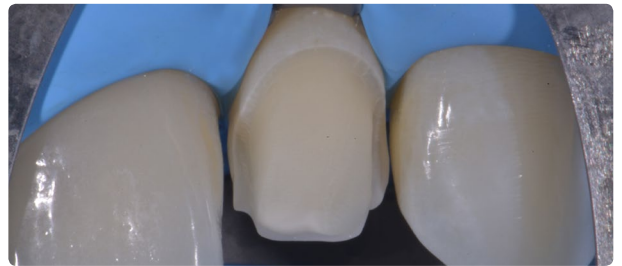
"Used 53µm Aluminium Oxide, then used electrosurgery and isolated by means of Ferrior Clamps and teflon. The image is after sandblasting and before etching." **Dr. Pasquale Venuti**



"Blasting with Sodium Bicarbonate and a curtain of water allows me to remove obturation cement from the floor of the pulp chamber, isthmuses or other retentive areas." **Dr. Freddy Belliard**



"AquaCare allows me finally to sandblast or prophylaxis inside and outside the mouth, with or without water, with the exact amount of media I want to deliver. I'm in full control now of those important procedures." **Dr. Walter Devoto**



"Particle abrasion with 53µm Aluminium Oxide to remove bonding resin used for temporaries, to clean adhesive surfaces and improve bond strengths before cementing four disilicate veneers." **Dr. Lorenzo Vanini**



Bonded and glycerine cure. **Dr. Thomas Taha**



Therapeutic Pre-treatment. **Dr. Florin Cofar**



"In my modest opinion, AquaCare is the best tool to reach a perfect decontamination in adhesive dentistry" **Dr. Gianfranco Politano, Italy, Bio-Emulation**



"Adhesive dentistry is a demanding speciality that doesn't forgive much... nevertheless the key stone of any adhesive treatment is to prepare a clean and a rough surface to bond on. For the purpose, AquaCare is the most efficient and polyvalent device I have used so far. "

Dr. David Gerdolle, Switzerland.



"I don't use AquaCare every day, I use AquaCare every single patient"

Dr. Jason Smithson, UK

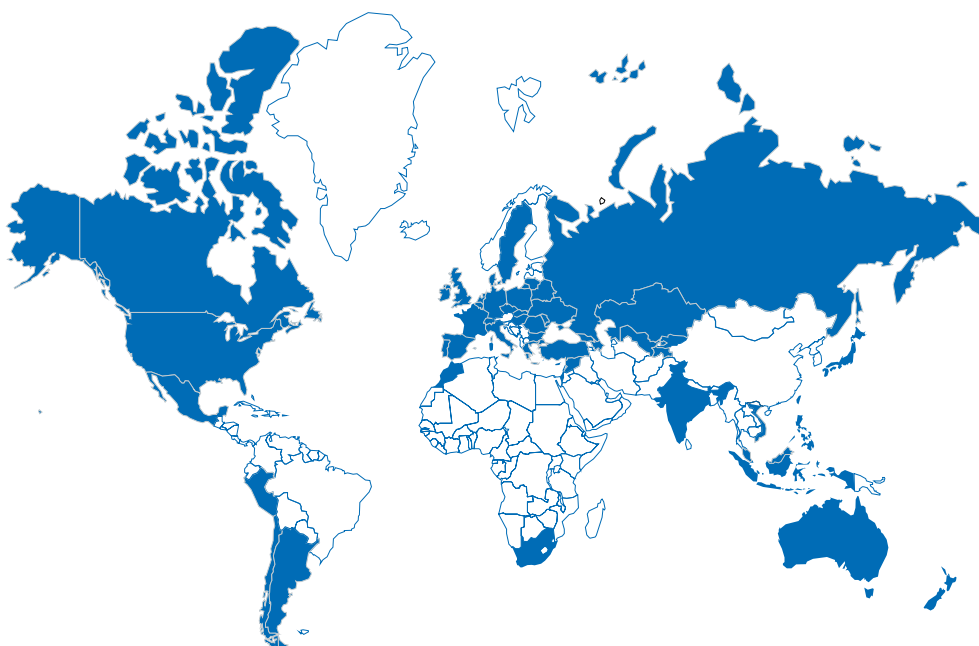
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