

StaGraft™
Demineralized Bone Matrix



StaNraft™ DBM – Why Compromise?

StaNraft™ DBM has been scientifically formulated to deliver optimized characteristics without compromise! StaNraft™ DBM delivers biocompatibility, excellent handling, verified osteoinductivity and optimized DBM content. Available as a 40% DBM putty, or a 35% DBM PLUS pre-mixed with Pro Osteon® 500R bone void filler. StaNraft™ DBM products are engineered to meet a variety of clinical needs.

Biocompatibility

The carrier used in StaNraft™ DBM is composed primarily of phosphatidylcholine, commonly referred to as lecithin. Lecithin is:

- 100% natural, derived from soybeans
- Absorbed by the human body
- Key component of cell membrane

Using a natural carrier, such as lecithin, eliminates the potential negatives associated with synthetic carriers.¹

Preferred Handling

StaNraft™ DBM is stored at room temperature and is available as a 40% DBM putty, or a 35% DBM PLUS pre-mixed with Pro Osteon® 500R granules. Because StaNraft™ DBM is non-water soluble it:

- Resists irrigation
- Maintains integrity upon implantation



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Animal studies are not necessarily indicative of human clinical outcomes.

Bench testing is not necessarily indicative of clinical performance.



One Surgeon. One Patient.™

Biomet
P.O. Box 587
56 E. Bell Drive
Warsaw, Indiana 46581-0587

500.348.9500 x 151
www.biomet.com

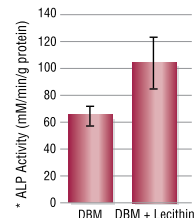
Rx Only.

Verified Osteoinductivity

Each lot of StaNraft™ DBM is verified for osteoinductivity (OI) via the validated “C2C12” assay. This ensures that only lots with verified OI are released. The lecithin carrier helps to keep the DBM *in situ* as compared to DBM alone.¹

Effect of Lecithin on OI

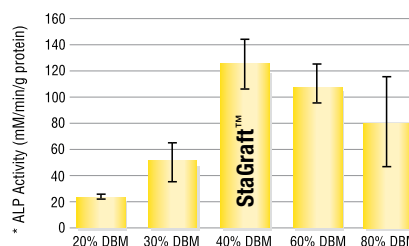
Alkaline phosphatase activity (ALP) is a measurement of osteoinductivity²



Optimized Active DBM Content

To further assist the osteoinductive response the DBM content within the StaNraft™ product has been optimized. The research study² showed a 60/40 ratio optimized ALP Activity.

Percent DBM by Weight



References

1. Biomet Internal Test Report (TR-0894).
2. “Combined effects of phosphatidylcholine and demineralized bone matrix on bone induction”. HanB, TangB, NimniME. Connect Tissue Res. 2003; 44(3-4):160-6.