

A PERFECT SUPPORT SYSTEM FOR TISSUE HEALING

Preserves, Maintains, Guides...Naturally.



alloguide[®] gf

lyophilized placental membrane

- Preserves protein structures and maintains bioactive capabilities of important wound healing elements of placental tissue
- Preserves extracellular matrix
- Maintains natural tissue thickness
- Excellent handling and ease of application



alloguide gf MEMBRANES

alloguide gf is a lyophilized placental membrane that preserves its endogenous growth factors associated with the repair of oral wounds. alloguide gf is an ideal membrane to support Guided Tissue Regeneration (GTR) and Guided Bone Regeneration (GBR) dental procedures as it retains the high levels of regenerative growth factors naturally present in the placental membrane.

The GF stands for Growth Factor

Placental Tissue is a rich source of extracellular matrix proteins and growth factors that have been shown to be involved in the natural wound repair process¹ and is commonly used in a wide array of therapeutic applications, including wound care and orthopedics.^{2,3} The processing and preservation of the placental tissue allograft will influence the preservation of those growth factors.^{4,5}

A sampling of the preserved growth factors⁶

Growth Factor	Present	Growth Factor	Present
BDNF	✓	HGF	✓
bFGF	✓	OPG	✓
FGF	✓	PDGF	✓
BMP-4	✓	SCF	✓
BMP-5	✓	TGF	✓
BMP-7	✓	TGFβ-3	✓
EGF	✓	VEGF	✓

Characteristics of alloguide gf:

- Preserves protein structures and maintains bioactive capabilities of important wound healing elements of placental tissue
- Preserves extracellular matrix
- Maintains natural tissue thickness
- Excellent handling and ease of application

alloguide gf is recommended for:

- Extraction socket preservation
- Ridge and sinus augmentation
- Periodontal defects
- Sinus elevation
- Grafting for implant placement

alloguide gf Safety:

- AATB[®] standards, FDA regulations and stringent internal processes, policies and procedures
- Processed under aseptic conditions
- Sterility testing performed on every lot

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lyophilized placental membrane



alloguide gf Processing:

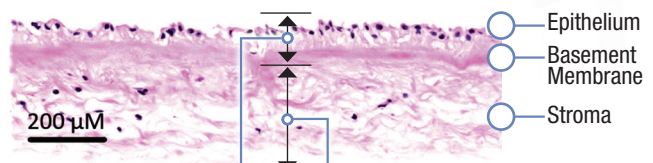
alloguide gf is processed using a proprietary freeze-drying solution during lyophilization

- Preserves protein structures and maintains bioactive capabilities of all the important wound healing elements in the placental tissue
- Preserves the extracellular matrix
- Maintains the natural tissue thickness
- Provides excellent handling characteristics that allow for ease of application

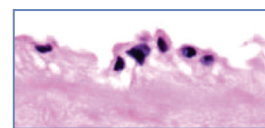
H&E Image of alloguide gf

H&E is the combination of two histological stains:

- Hematoxylin - stains cell nuclei blue ●
- Eosin - stains extracellular matrix pink ●

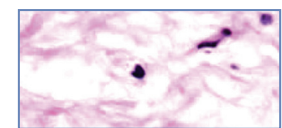


Amnion Layer

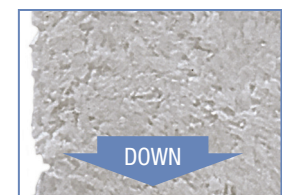
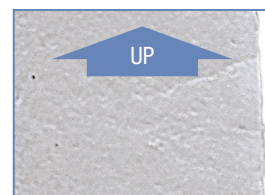


- Placed facing outward
- Smoother, shiny surface
- Can be left exposed

Chorion Layer



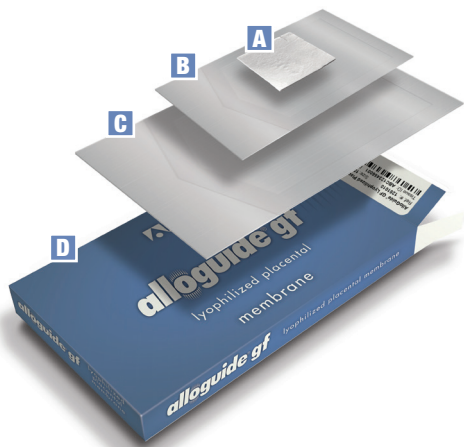
- Placed against the wound
- Textured, dull surface
- More available growth factors



Preparation and Placement Guide for alloguide gf Membrane:

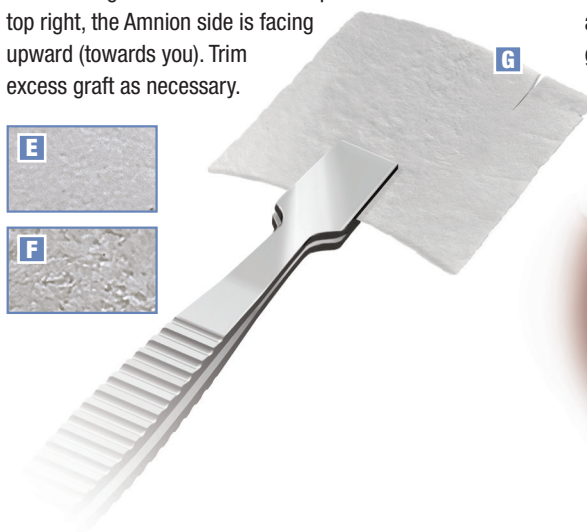
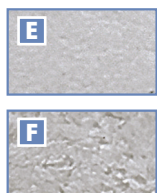
Packaging:

alloguide gf lyophilized placental membrane **A** is enclosed inside a sterile inner pouch **B**, then enclosed in a secondary outer pouch **C**. The outer pouch is contained in a labeled box **D**.



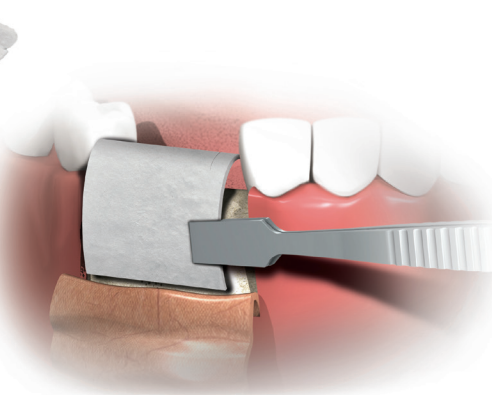
Preparation:

alloguide gf has 2 distinct sides: Amnion **E** and Chorion **F**. The Amnion side is smooth while the Chorion side is rough. The graft has one (1) orientation guide-slit **G** that when positioned on the top right, the Amnion side is facing upward (towards you). Trim excess graft as necessary.



Placement:

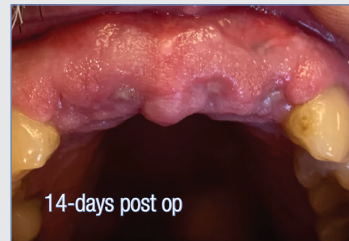
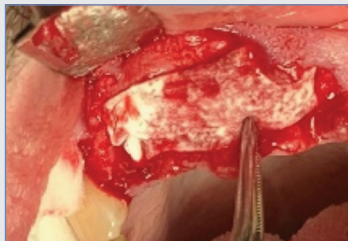
Using sterile instruments, apply the graft directly onto the wound site with the Chorion side facing down (the wound site). The graft should absorb moisture directly from the wound site. If necessary, a few drops of sterile saline may be added to the graft after it has been applied.



alloguide gf Case Study Jason Augustine DDS, MS, PC

A 73-year-old patient with asthma presented with failure in teeth 7-10. The defect was filled with autograft and allograft bone following standard procedures. alloguide gf was trimmed to the shape of the defect and placed dry

to cover the defect with the amnion side facing out. The blood present at the defect site hydrated the membrane. The defect was then sutured closed. At the 14-day follow up, the soft tissue is fully repaired and appears healthy.

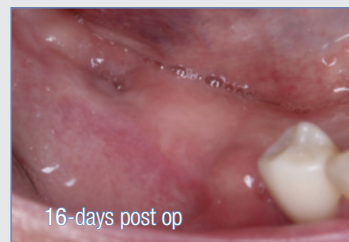
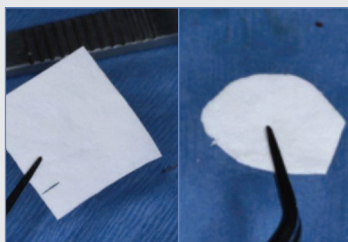


14-days post op

alloguide gf Case Study Kanyon R Keeney DDS

A 68-year-old patient with heavy bruxism had implants placed at tooth positions 29 and 31 in preparation for a 3-unit implant supported bridge. After trimming to desired size and with the amnion side facing out, alloguide gf was placed dry over the implant placement sites to cover the defect.

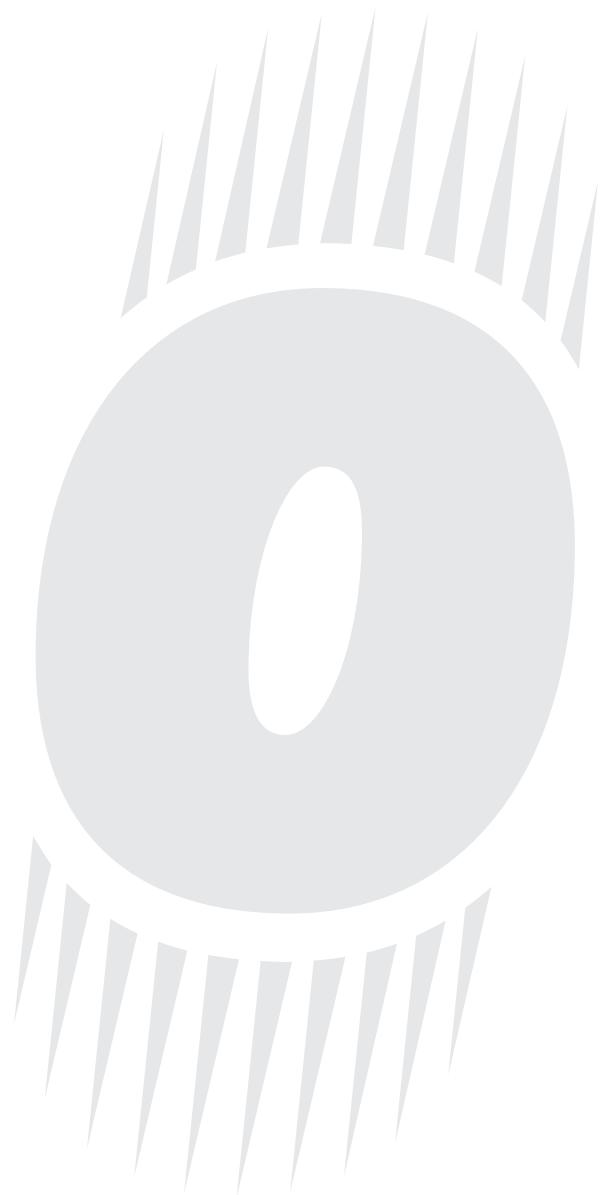
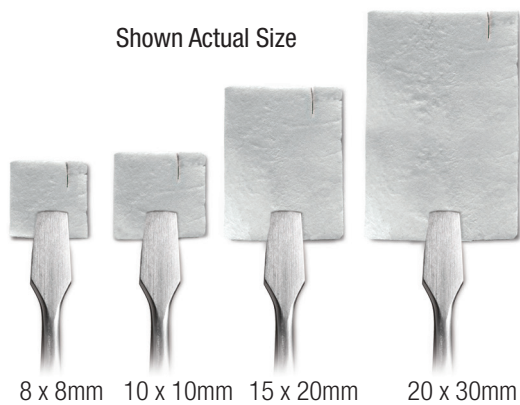
The blood present at the defect site hydrated the membrane. A figure 8 suture was used but primary closure was not achieved. At the 16-day follow up, the soft tissue defect was fully repaired.



16-days post op

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alloguide gf			Regular	Member	Premier	Premier+
1250808	8 x 8mm	each	\$66.49	\$66.49	\$56.52	\$56.52
1251010	10 x 10mm	each	\$90.99	\$90.99	\$77.34	\$77.34
1251520	15 x 20mm	each	\$183.79	\$183.79	\$156.22	\$156.22
1252030	20 x 30mm	each	\$286.29	\$286.29	\$243.35	\$243.35

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All prices are subject to change without notice. Prices shown are domestic prices in U.S. dollars; does not include shipping or any duties. For discount details visit acesouthern.com/ASAP. And for the most up-to-date pricing, please contact ACE SOUTHERN or visit our website.

Footnote References:

- 1 Chopra and Thomas 2013. J Biomim Biomater and Tissue Eng
- 2 Brantley and Verla 2015. Advances in Wound Care
- 3 Heckmann et al 2016. American Journal of Orthopedics
- 4 McQuilling et al 2017. Wounds
- 5 Paolin et al 2016. Cell Tissue Bank
- 6 Data on File