

K091729

Traditional 510(k) Submission –Bone Grafting Material

5. 510(k) Summaries

DEC 23 2009

5.1 510(k) Summary – Alpha-bsm

**Submitter:** ETEX Corporation  
38 Sidney Street  
Cambridge, MA 02139  
Registration No.: 1225112  
Owner/Operator No.: 9014709

**Contact Person:** Christopher Klaczyk  
Regulatory Affairs Manager  
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**Date Prepared:** June 9, 2009

**Product Code(s):** LYC (21 CFR 872.3930)

**Device Class:** II (21 CFR 872.3930)

**Classification Panel:** Dental

**Classification Name:** Bone Grafting Material, Synthetic (21 CFR 872.3930)

**Proprietary Name:** Alpha-bsm Bone Substitute Material

**Predicate Device(s):**  $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K962548 LYC Dental indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K980223 LZK Maxillofacial indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K983009 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K032307 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K072636 MQV Extremities, Pelvis and Spine indication)  
GRAFTON<sup>®</sup> DBM (Osteotech, K051188, NUN)

**Device Description:** Alpha-bsm Bone Substitute Material is a synthetic, biocompatible bone graft substitute material. At the time of use, the powder component is combined with a specified volume of mixing solution and mixed to form a paste. Mixing is facilitated by a silicone bulb mixing system. The

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resulting paste can be administered to the treatment site by injection or manual application. The material can be shaped into a desired form *in-situ* prior to implantation. After the paste is applied to the treatment site, it hardens at body temperature and converts to an apatitic calcium phosphate material. The end product, poorly crystalline hydroxyapatite (PCHA), is of low crystalline order with a similar chemical and crystalline structure to that of natural bone minerals. Alpha-bsm Bone Substitute Material is an osteoconductive material that is resorbed and replaced by natural bone over time.

**Intended Use:** Alpha-bsm Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material nano-that forms a crystalline matix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Alpha-bsm Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, introral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

**Materials:** Synthetic calcium phosphate

**Performance Data:** Testing consistent with *Class II Special Controls Guidance Document: Dental Bone Grafting Material Devices* (dated April 28, 2005) has been submitted.

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Traditional 510(k) Submission – Bone Grafting Material

**5.2 510(k) Summary – Beta-bsm**

**Submitter:** ETEX Corporation  
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Cambridge, MA 02139  
Registration No.: 1225112  
Owner/Operator No.: 9014709

**Contact Person:** Christopher Klaczyk  
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**Date Prepared:** June 9, 2009

**Product Code(s):** LYC (21 CFR 872.3930)

**Device Class:** II (21 CFR 872.3930)

**Classification Panel:** Dental

**Classification Name:** Bone Grafting Material, Synthetic (21 CFR 872.3930)

**Proprietary Name:** Beta-bsm Injectable Bone Substitute Material

**Predicate Device(s):**  $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K962548 LYC Dental indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K980223 LZK Maxillofacial indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K983009 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K032307 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K072636 MQV Extremities, Pelvis and Spine indication)  
Beta-bsm Injectable Bone Substitute Material (ETEX Corporation, K090242)  
GRAFTON<sup>®</sup> DBM (Osteotech, K051188, NUN)

**Device Description:** Beta-bsm Injectable Bone Substitute Material is a synthetic, biocompatible bone graft substitute material. At the time of use, the powder component is combined with a specified volume of mixing solution and mixed to form a

## Traditional 510(k) Submission –Bone Grafting Material

paste. Mixing is facilitated by a syringe-to-syringe mixing system. The resulting paste can be administered to the treatment site by injection or manual application. The material can be shaped into a desired form *in-situ* prior to implantation. After the paste is applied to the treatment site, it hardens at body temperature and converts to an apatitic calcium phosphate material. The end product, poorly crystalline hydroxyapatite (PCHA), is of low crystalline order with a similar chemical and crystalline structure to that of natural bone minerals. Beta-bsm Injectable Bone Substitute Material is an osteoconductive material that is resorbed and replaced by natural bone over time.

### **Intended Use:**

Beta-bsm Injectable Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Beta-bsm Injectable Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

### **Materials:**

Synthetic calcium phosphate

### **Performance Data:**

Testing consistent with *Class II Special Controls Guidance Document: Dental Bone Grafting Material Devices* (dated April 28, 2005) has been submitted.

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Traditional 510(k) Submission – Bone Grafting Material

**5.3 510(k) Summary – Gamma-bsm**

**Submitter:** ETEX Corporation  
38 Sidney Street  
Cambridge, MA 02139  
Registration No.: 1225112  
Owner/Operator No.: 9014709

**Contact Person:** Christopher Klaczyk  
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Fax: (617) 577-7170  
E-Mail: cklaczyk@etexcorp.com

**Date Prepared:** June 9, 2009

**Product Code(s):** LYC (21 CFR 872.3930)

**Device Class:** II (21 CFR 872.3930)

**Classification Panel:** Dental

**Classification Name:** Bone Grafting Material, Synthetic (21 CFR 872.3930)

**Proprietary Name:** Gamma-bsm Moldable Bone Substitute Material

**Predicate Device(s):**  $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K962548 LYC Dental indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K980223 LZK Maxillofacial indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K983009 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K032307 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K072636 MQV Extremities, Pelvis and Spine indication)  
Gamma-bsm Moldable Bone Substitute Material (ETEX Corporation, K090242)  
GRAFTON<sup>®</sup> DBM (Osteotech, K051188, NUN)

**Device Description:** Gamma-bsm Moldable Bone Substitute Material is a synthetic, biocompatible bone graft substitute material. At the time of use, the powder component is combined with a specified volume of mixing solution and mixed to form a

## Traditional 510(k) Submission –Bone Grafting Material

putty. The resulting putty is administered to the treatment site by manual application. The material can be shaped into a desired form *in-situ* prior to implantation. After the putty is applied to the treatment site, it hardens at body temperature and converts to an apatitic calcium phosphate material. The end product, poorly crystalline hydroxyapatite (PCHA), is of low crystalline order with a similar chemical and crystalline structure to that of natural bone minerals. Gamma-bsm Moldable Bone Substitute Material is an osteoconductive material that is resorbed and replaced by natural bone over time.

**Intended Use:** Gamma-bsm Moldable Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Gamma-bsm Moldable Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

**Materials:** Synthetic calcium phosphate

**Performance Data:** Testing consistent with *Class II Special Controls Guidance Document: Dental Bone Grafting Material Devices* (dated April 28, 2005) has been submitted.

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Traditional 510(k) Submission – Bone Grafting Material

**5.4 510(k) Summary – EquivaBone**

**Submitter:** ETEX Corporation  
38 Sidney Street  
Cambridge, MA 02139  
Registration No.: 1225112  
Owner/Operator No.: 9014709

**Contact Person:** Christopher Klaczyk  
Regulatory Affairs Manager  
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**Date Prepared:** June 9, 2009

**Product Code(s):** NUN (21 CFR 872.3930)

**Device Class:** II (21 CFR 872.3930)

**Classification Panel:** Dental

**Classification Name:** Bone Grafting Material, Human Source (21 CFR 872.3930)

**Proprietary Name:** EquivaBone Osteoinductive Bone Graft Substitute

**Predicate Device(s):**  $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K962548 LYC Dental indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K980223 LZK Maxillofacial indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K983009 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K032307 GXP Cranioplasty indication)  
 $\alpha$ -BSM Bone Substitute Material (ETEX Corporation, K072636 MQV Extremities, Pelvis and Spine indication)  
EquivaBone Osteoinductive Bone Graft Substitute (ETEX Corporation, K080329 and K090310)  
GRAFTON<sup>®</sup> DBM (Osteotech, K051188, NUN)

**Device Description:** EquivaBone is a biocompatible bone graft substitute material consisting of synthetic calcium phosphate, carboxymethyl cellulose (CMC) and human demineralized bone matrix (DBM). It is supplied in a single use kit as

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sterile powders and hydration solution that are mixed together at the time of use in the operating room to form flowable putty which is implanted manually or can be extruded through a syringe. After implantation the product hardens at body temperature and resorbs and remodels during the healing process. Each lot of DBM contained within EquivaBone is assayed for osteoinductive potential in an athymic nude mouse model. This may or may not be predictive of EquivaBone osteoinductivity in humans.

**Intended Use:** EquivaBone Osteoinductive Bone Graft Substitute is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix combined with demineralized bone matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

EquivaBone Osteoinductive Bone Graft Substitute is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

**Materials:** Synthetic calcium phosphate, sodium carboxymethyl cellulose, Demineralized Bone Matrix (DBM)

**Performance Data:** Testing consistent with *Class II Special Controls Guidance Document: Dental Bone Grafting Material Devices* (dated April 28, 2005) has been submitted.



Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Room W-066-0609  
Silver Spring, MD 20993-0002

Mr. Christopher Klaczyk  
Regulatory Affairs Manager  
ETEX Corporation  
38 Sidney Street  
Cambridge, Massachusetts 02139

DEC 23 2009

Re: K091729  
Trade/Device Name: EquivaBone Osteoinductive Bone Graft Substitute  
Gamma-bsm Moldable Bone Substitute Material  
Beta-bsm Injectable Bone Substitute Material  
Alpha-bsm Bone Substitute Material  
Regulation Number: 21CFR 872.3930  
Regulation Name: Bone Grafting Material  
Regulatory Class: II  
Product Code: LYC, NUN  
Dated: December 9, 2009  
Received: December 10, 2009

Dear Mr. Klaczyk:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to

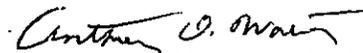
<http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

<http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

<http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,



Anthony D. Watson, B.S., M.S., M.B.A.

Director

Division of Anesthesiology, General Hospital,

Infection Control and Dental Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

K091729

4.4 Indications For Use – EquivaBone

510(k) Number (if known): K091729

Device Name: EquivaBone Osteoinductive Bone Graft Substitute

Indications for Use:

EquivaBone Osteoinductive Bone Graft Substitute is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix combined with demineralized bone matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

EquivaBone Osteoinductive Bone Graft Substitute is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

Prescription Use  X   
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
\_\_\_\_\_  
(Division Sign-Off)

Division of Anesthesiology, General Hospital  
Infection Control, Dental Devices

510(k) Number:  K091729

K091729

4. Indications For Use

4.1 Indications For Use – Alpha-bsm

510(k) Number (if known): K091729

Device Name: Alpha-bsm Bone Substitute Material

Indications for Use:

Alpha-bsm Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Alpha-bsm Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

Prescription Use   X    
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)



(Division Sign-Off)

Division of Anesthesiology, General Hospital  
Infection Control, Dental Devices

510(k) Number:   K091729

K091729

**4.3 Indications For Use – Gamma-bsm**

510(k) Number (if known): K091729

Device Name: Gamma-bsm Moldable Bone Substitute Material

**Indications for Use:**

Gamma-bsm Moldable Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Gamma-bsm Moldable Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

Prescription Use   X    
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)



(Division Sign-Off)

Division of Anesthesiology, General Hospital  
Infection Control, Dental Devices

510(k) Number: K091729

K091729

**4.2 Indications For Use – Beta-BSM**

510(k) Number (if known): K091729

Device Name: Beta-BSM Injectable Bone Substitute Material

**Indications for Use:**

Beta-BSM Injectable Bone Substitute Material is an implantable synthetic calcium phosphate bone graft material that forms a nano-crystalline matrix that resorbs and is replaced with new bone during the healing process. It is indicated for use in filling and/or augmentation of bone voids, gaps or defects that are not intrinsic to the stability of the bony structure. These defects may be surgically created osseous defects or osseous defects created from traumatic injury to the bone.

Beta-BSM Injectable Bone Substitute Material is intended to be used in bony voids or gaps to fill and/or augment dental intraosseous, intraoral and maxillofacial defects. These defects include, but are not limited to, periodontal/infrabony defects; alveolar ridge augmentation (osteotomy, apicoectomy, cystectomy); dental extraction sites (ridge maintenance, implant preparation/placement); sinus lifts; cystic defects; craniofacial augmentation.

Prescription Use   X    
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

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Concurrence of CDRH, Office of Device Evaluation (ODE)



(Division Sign-Off)

Division of Anesthesiology, General Hospital  
Infection Control, Dental Devices

510(k) Number: K091729