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# Implants for surgery — In vitro evaluation for apatite-forming ability of implant materials

*Implants chirurgicaux — Évaluation in vitro de la capacité de formation d'apatite des matériaux d'implants*

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# Foreword

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The committee responsible for this document is ISO/TC 150, *Implants for surgery*, Subcommittee SC 1, *Materials*.

This third edition cancels and replaces the second edition (ISO 23317:2012), which has been editorially revised.

 

# Introduction

It has been revealed that materials of various kinds bond to living bone through a layer of apatite. It has been shown that this apatite layer can be reproduced on their surfaces in an acellular and protein-free simulated body fluid (SBF) with ion concentrations nearly equal to those of human blood plasma, and that apatite thus formed is similar to the bone mineral in its composition and structure.

This evaluation of apatite-forming ability on implant material in SBF is useful for evaluating its *in vivo* bone-bonding ability preliminary to animal experiments. When a bioactive material is implanted in a living body, a thin layer rich in Ca and P forms on its surface. The material then connects to the living tissue through this apatite layer without a distinct boundary. It has been shown that this apatite layer can be reproduced on the surfaces of materials in SBF as well, and that apatite thus formed is similar to bone mineral in its composition and structure. As bioactivity increases, apatite forms on the material surface in a shorter time in proportion to this increase. The formation of apatite layers can be detected by thin film X-ray diffraction spectrometry and/or scanning electron microscopy.

The apatite formed in the SBF is, however, similar to bone apatite in the following points.

— Ca-deficient type apatite.

— Lower Ca/P atomic ratio than stoichiometric apatite.

— Containing some impurities such as $Mg^{2+}$, $Na^{+}$, $Cl^{-}$, $HCO_3^{-}$.

— Low crystallinity.

NOTE 1 The material which forms apatite on its surface *in vivo* can bond to living bone, since this apatite is biologically active. Their *in vivo* apatite deposition can be reproduced on their surfaces even *in vitro* in SBF. For example, *in vivo* calcification on surfaces of Bioglass®[1], $CaO\text{-}SiO_2$ glasses, $Na_2O\text{-}CaO\text{-}SiO_2$ glasses, Cerabone®[2] A-W, Ceravital®[3] -type glass-ceramic, sintered hydroxyapatite and alkali-heat-treated titanium metal, are correlated with *in vitro* calcification in SBF. However, this does not exclude the possibility that materials, which do not form apatite on their surfaces *in vivo*, bond to living bone. For example, it is reported that such resorbable materials as beta-tricalcium phosphate ($Ca_3(PO_4)_2$) and calcium carbonate bond to living bone without forming an apatite layer on their surfaces.

NOTE 2 It has been reported that glasses with different compositions in the system $Na_2O\text{-}CaO\text{-}SiO_2$ show a correlation between bone-forming ability of materials implanted into a bone defect of a rabbit and apatite-forming ability on its surface in SBF.

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