

C–15. Simultaneous Transmucosal Implant Placement Associated with Ridge Splitting Technique and Guided Tissue Regeneration

Chang-Sung Kim^{1,2}, Ui-Won Jung¹, Gyung-Joon Chae¹, Seong-Ho Choi^{1,2},
Kyoo-Sung Cho^{1,2}, Chong-Kwan Kim^{1,2}

¹Department of Periodontology, Research Institute for Periodontal Regeneration

²Brain Korea 21 Project for Medical Science, College of Dentistry, Yonsei University, Seoul, Korea.

Background

Inadequate width of the alveolar ridge present an anatomical limitation to the placement of implants. Recently, the ridge splitting technique has been introduced to reestablish an appropriate alveolar ridge width. This case report demonstrates simultaneous transmucosal implant placement associated with ridge splitting technique and guided tissue regeneration.

Methods

Two male patients (26 and 36 years) with mandibular alveolar atrophy were presented. A series of chisel specially designed for splitting technique was used to make a fine cut and spread apart the labial and lingual cortical plates. Strauman ITI implants were simultaneously placed and bony defects were covered with expanded polytetrafluoroethylene membrane. The membrane was removed 4 weeks postsurgery. In both cases, the defect was filled with newly-formed tissue and further healing was uneventful. Restorative treatment was done 5 months after the surgery.

Results

Clinical examination performed over a 2-year after the surgery revealed probing depths around implants of =3mm at all sites, without bleeding on probing. A periapical radiograph was taken and showed no radiolucency around implants. A favorable marginal bone level was observed during a follow-up period

Conclusion

The positive clinical and radiographic results over a 2-year period encourage the use of this technique.

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