

The sinus bone graft techniques : FAQs and answers.

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The maxillary posterior edentulous region presents unique challenging conditions in implant dentistry compared with other regions of jaws. The available bone is lost from inferior expansion of the sinus after tooth loss, involving the residual ridge region. The bone density in this region also decrease rapidly and on average is the least dense of any oral region. The bite force is greater in the posterior region of the mouth compared with the anterior region. However, despite all these concerns, treatment modalities designed specially for this area allow it to be as predictable as any other intraoral region. Most noteworthy of these treatments are sinus grafts to increase available bone height, modified surgical approaches that relate to bone density, and progressive bone loading during the prosthodontic phase of reconstruction.

Recently, grafting the floor of the maxillary sinus, including both lateral window interventions and osteotome interventions, has become the most common surgical intervention for increasing alveolar bone height prior to endosseous dental implant in the posterior maxilla. At present, we have many clinical evidences support that the procedures has been shown to be a safe technique with high predictability of success. However, there are still many concerns to debate as well as variables that may alter the outcome of this procedure. Those are the matters related to specific surgical techniques, use of barrier membranes, selection of graft materials, designs of implant, and so forth.

In this presentation, we will discuss several concerns still to debate and suggest possible answers to overcome some troubles which we frequently face up to in the clinical practice.

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