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MAINTENANCE OF MARGINAL BONE SUPPORT AT OSSEOSPEED TM PROFILE IMPLANTS

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Topic: Implant therapy outcomes, surgical aspects

Background and Aim

lingual/palatal and buccal marginal bone support after 16 weeks when The mean edentulous period was 48 months (range 3-360 months). placing OsseoSpeedTM Profile implants in healed ridge sites, where the Seventy-three percent of the implants were placed in the mandible, and alveolar crest anatomy was sloped in a lingual to buccal direction. The follow-up period will continue for a total of three years.

Methods and Materials

In this prospective, open, multicenter study, 60 patients between 18 and 75 years of age with a need for a single tooth replacement in any location were The complications reported in the study are limited to two loose healing difference of 2.0-5.0 mm and a history of edentulism of at least 3 months. marginal bone level from implant placement to the 16 weeks re-entry visit. Main exclusion criteria were smoking more than 10 cigarettes per day and a health status that would not allow implant placement.

OsseoSpeed™ Profile implants (Astra Tech AB, Mölndal, Sweden) in The study results reveal maintained marginal bone levels at the buccal, used during the 16 weeks healing period. Lingual and buccal bone level the alveolar crest anatomy is sloped in a lingual to buccal direction. alterations were assessed using a periodontal probe at the time of implant placement and the surgical re-entry visit 16 weeks after implant placement.

Results

In situations where the alveolar crest anatomy is sloped in a lingual to A total of 60 implants were placed in the study, and all implants were still buccal direction, the placement of a regular implant is not optimal. A dental in function after 16 weeks. The study population represented a wide implant with a sloped marginal contour, OsseoSpeedTM Profile (Astra Tech variety of patients with respect to age (mean age 49 years; range 20-74 AB, Mölndal, Sweden), has been developed to optimize implant placement years), and smoking history (non-smokers 86%; smokers 14%). There in such situations. The aim of the study was to evaluate the maintenance of was an equal distribution of men and women (30 men, 30 women).

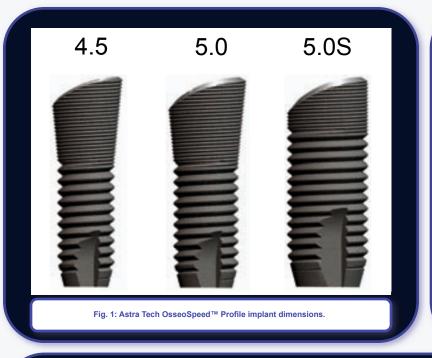
> 27% in the maxilla. The most dominant position for implant placement was the mandibular first molar (55%).

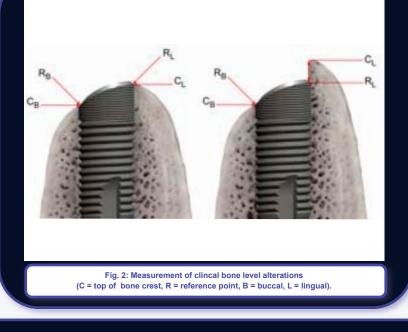
> The mean lingual marginal bone level alteration was -0.2 mm (range: -1.5 - 2.0), while the corresponding change on the buccal aspect was -0.4 mm (range: -12.5 – 2.0).

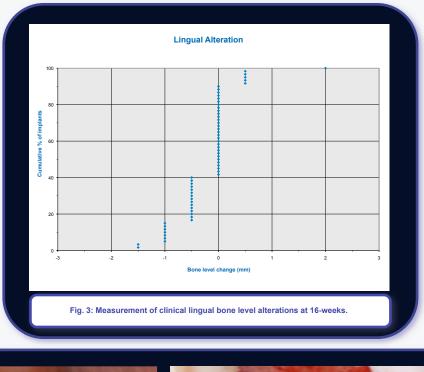
included. The recipient sites presented with a lingual-buccal bone height abutments, and one patient presenting with a 12.5 mm loss of the buccal

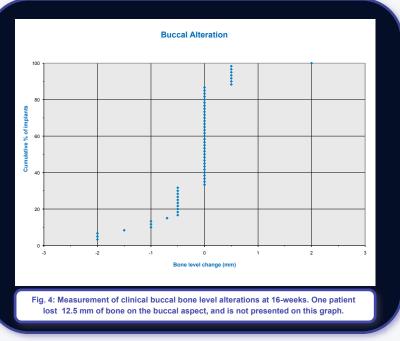
Conclusions

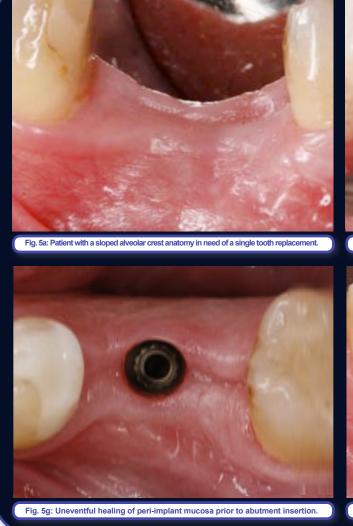
diameters 4.5, 5.0 and 5.0S with lengths 9-15 mm were used in the study. and lingual/palatal aspect of OsseoSpeed™ Profile implants, and A one-stage surgical protocol was utilized, and healing abutments were indicates that this implant is a predictable treatment option in cases where

















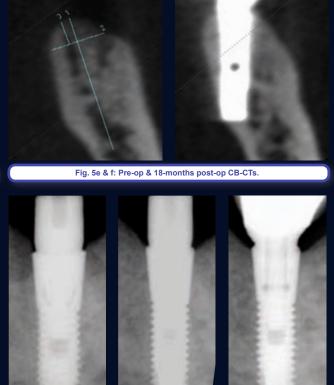


Fig. 5k, 5l & 5m: Radiographs at implant insertion, 16 weeks and 1-year foll

References

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