

Case Study

Placement of a Zimmer[®] Trabecular Metal[™] Dental Implant with Simultaneous Ridge Augmentation and Immediate Non-Functional Loading Following Tooth Extraction and Orthodontic Treatment for Implant Site Development

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Pre-operative buccal view shows a missing maxillary right lateral incisor provisionally restored with a composite pontic veneer during adult orthodontic treatment for implant site development.







Pre-operative periapical radiograph shows the healed extraction site with the provisional composite pontic veneer in place supported by orthodontic wire.







Buccal view of the edentulous site after removing the provisional composite pontic veneer and orthodontic wire.







The edentulous ridge is surgically exposed and an osteotomy is sequentially prepared using internally irrigated drills in graduated diameters and copious external irrigation. During the procedure, a depth gauge is placed into the osteotomy to ensure parallelism with the adjacent dentition and to measure the depth of drill penetration.







Further flap reflection after preparation of the osteotomy reveals an undercut in the alveolar process.







A Zimmer[®] Trabecular Metal[™] Dental Implant, 4.1 mm x 13 mm, is threaded into the osteotomy utilizing its fixture mount with a hex instrument and surgical screwdriver handle.





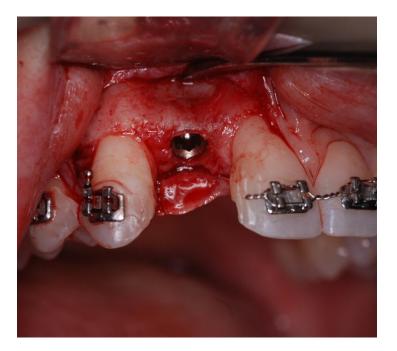


Buccal view shows the Zimmer[®] Trabecular Metal[™] Dental Implant fully seated in the osteotomy.

Note that the fixture mount has achieved parallelism with the adjacent teeth.





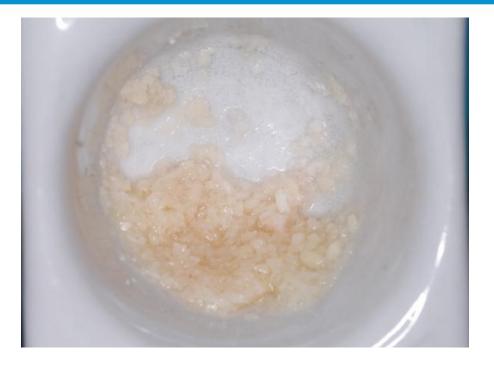


The fixture mount is removed from the implant and prepared for use as a provisional abutment.

Note the implant's lead-in bevel and internal hex connection.







Puros® Cortico-Cancellous Particulate Allograft is hydrated prior to use.







The prepared fixture mount is attached to the implant and its screw access hole is occluded with composite material. *Puros* Cortico-Cancellous Particulate Allograft is placed in the ridge defect and covered with a barrier membrane.







A composite crown is provisionally cemented onto the temporary abutment. The soft tissues are mobilized for tension-free closure and sutured around the provisional restoration.







Buccal view of the surgical site at suture removal 14 days post-operative.







Post-operative periapical radiograph shows the implant and provisional restoration in place.







3 month post-operative buccal view of restoration.







3 month post-operative buccal view of restoration.







3 month post-operative periapical radiograph showing implant and final restoration.







10 month post-operative buccal view of surgical site.







10 month post-operative full buccal view.







10 month post-operative periapical radiograph shows the implant and final restoration.

