



Firm Foundations, New Beginnings

CAPE FEAR PERIODONTICS AND DENTAL IMPLANTS

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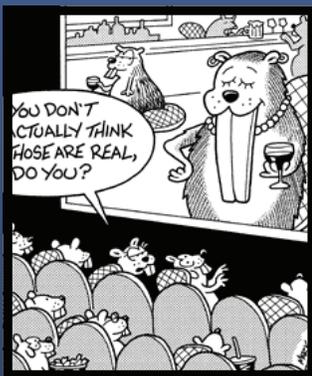
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Headline: Immediate Implant Placement & Flapless Crown Lengthening

In this issue we would like to highlight a few key surgical principles which help lead to more predictable restorative outcomes. 1) **Placement considerations for anterior implants** - preventing facial soft tissue loss. 2) **Esthetic Crown Lengthening via a flapless approach** - preventing papilla loss.



In the case above ('Before'), tooth #9 required extraction due to a post fracture. Tooth #8 was short and square in appearance. The treatment plan was to extract #9, place an immediate implant and temporary crown and crown lengthen #8 to match #9.

Placement Considerations: Have you ever worked really hard on the restoration of an anterior implant only to see the gingiva recede a few months or years later? Or worse yet, seen bone loss around an implant due to sub-gingival cement? *Odds are, the implant was placed with the long axis facial to the incisal edge.* Precise placement of an anterior implant in a palatally biased location (see photo below) is the preferred method according to the ITI (International Team for Implantology). It reduces the potential for recession and permits restoration using a screw-retained crown (see photo) which prevents any concern over sub-g cement extrusion and subsequent bone loss.



Papilla loss: This is a complex topic, which can be made very simple. The key to avoiding papilla loss - *Don't touch the papilla.* In a previous newsletter we introduced **tunneling**, a surgical approach to correct recession defects using Alloderm and Connective Tissue without elevating the esthetically sensitive papillae. The reason this approach is so successful - if the papilla is not reflected the blood supply remains intact and it cannot be lost.

Flapless Crown Lengthening: An innovative approach applies the principles of **tunneling** to esthetic crown lengthening. The photo above (middle) was taken at the one week post-op appointment demonstrating Flapless Crown Lengthening of #8 (compare to the 'Before' photo, top of page). Micro-elevators and chisels were used to precisely remove the desired amount of bone and cause relocation of the gingiva to match #9. **And, no sutures were needed!**

We are constantly striving to improve surgical techniques, incision designs, and instrumentation to result in more predictable outcomes for your patients. **Look out for our next issue which will show how we correct facial recession on anterior implants using a papilla sparing incision design with a palatal pedicle graft!**

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