


Rehabilitation of a young patient with a severely degraded dentition

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 MALOCLINIC

 Implant





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Patient

Male, 23 years old, healthy, smoker

Clinical situation

Poor oral health. Severe deterioration in the maxilla, and of the molar teeth in the mandible. Remaining teeth show no sign of periodontal loss and mobility.

Surgical solution

Maxilla: All-on-4® treatment concept with NobelParallel CC implants

Mandible: Extraction of all molar teeth. Implant surgery 6 months after extraction: tooth 3.6 and 4.6

Restorative solution

Provisional: Malo clinic all-acrylic provisional bridge with Temporary Snap Coping Multi-unit Plus

Final: NobelProcera implant bridge, Kulzer Pala Premium teeth and artificial gingiva

Surgery date

October 2017

Total treatment time

Immediate delivery of all-acrylic provisional bridge, 10-day post-operative control

"The high implant and prosthetic survival rates of the All-on-4® treatment concept makes it a safe and predictable surgical protocol from both the clinician's and the patient's point of view. Clinicians should adopt this treatment concept in their daily practice to avoid demanding and time-consuming additional surgeries."

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



The orthopantomogram (OPG) of the maxilla shows a poor prognosis and severe oral impairment. The large granulomas associated with most of the upper teeth will leave extended bone defects in the maxilla. In the mandible, a good preservation of dentition is visible from pre-molar to pre-molar.

Initial clinical situation

Surgical procedure

Restorative procedure

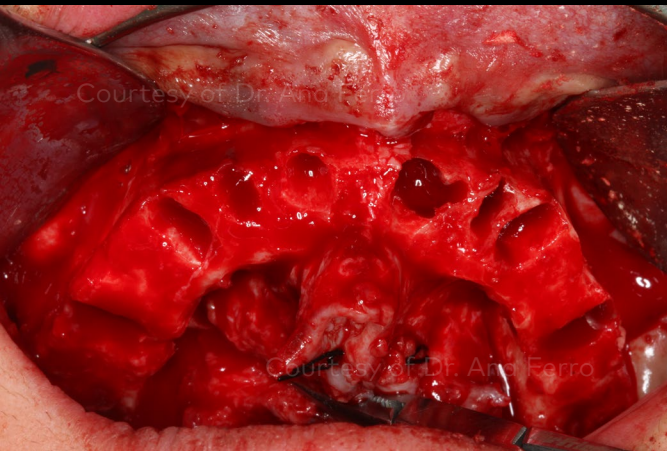
Outcome



Severe tooth decay and absence of prosthetic space, especially in the posterior sectors.

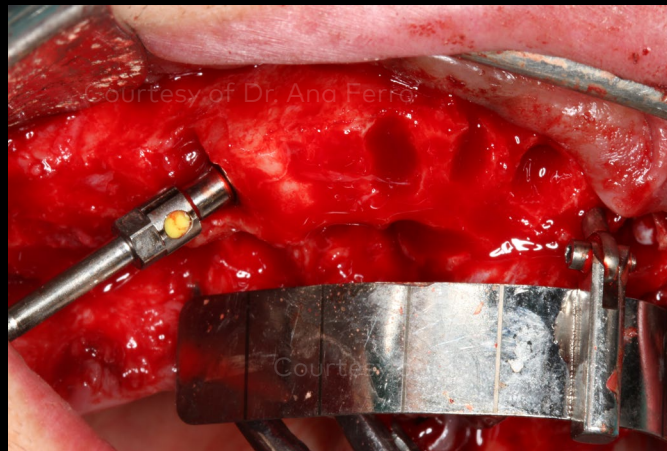
Bite evaluation.

Initial clinical situation



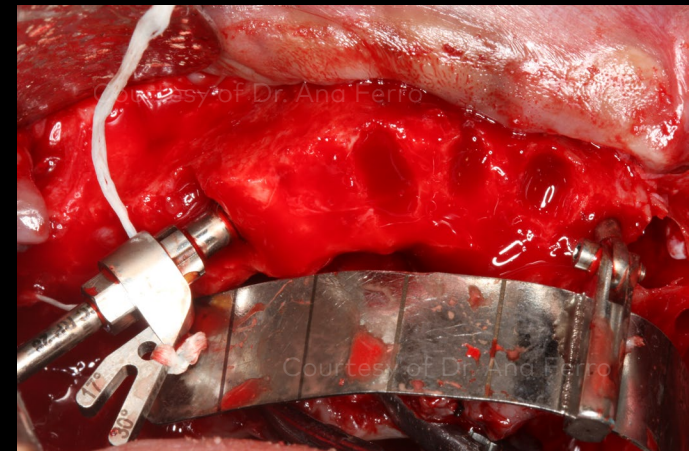
Bone reduction was necessary to make prosthetic space for the NobelProcera bar and the bridge with false gingiva to ultimately enhance the functional and esthetic results.

Surgical procedure



The flap was elevated so the anatomical references, nasal fossa and sinus external wall, were visible. The All-on-4 Guide was used to insert the distal implants in the arch with an accurate angle.

Restorative procedure



The Multi-unit Aligning Instrument used to identify the angulation of the Multi-unit Abutment and simplifies the identification of screw hole trajectory avoiding facially protruding screws.

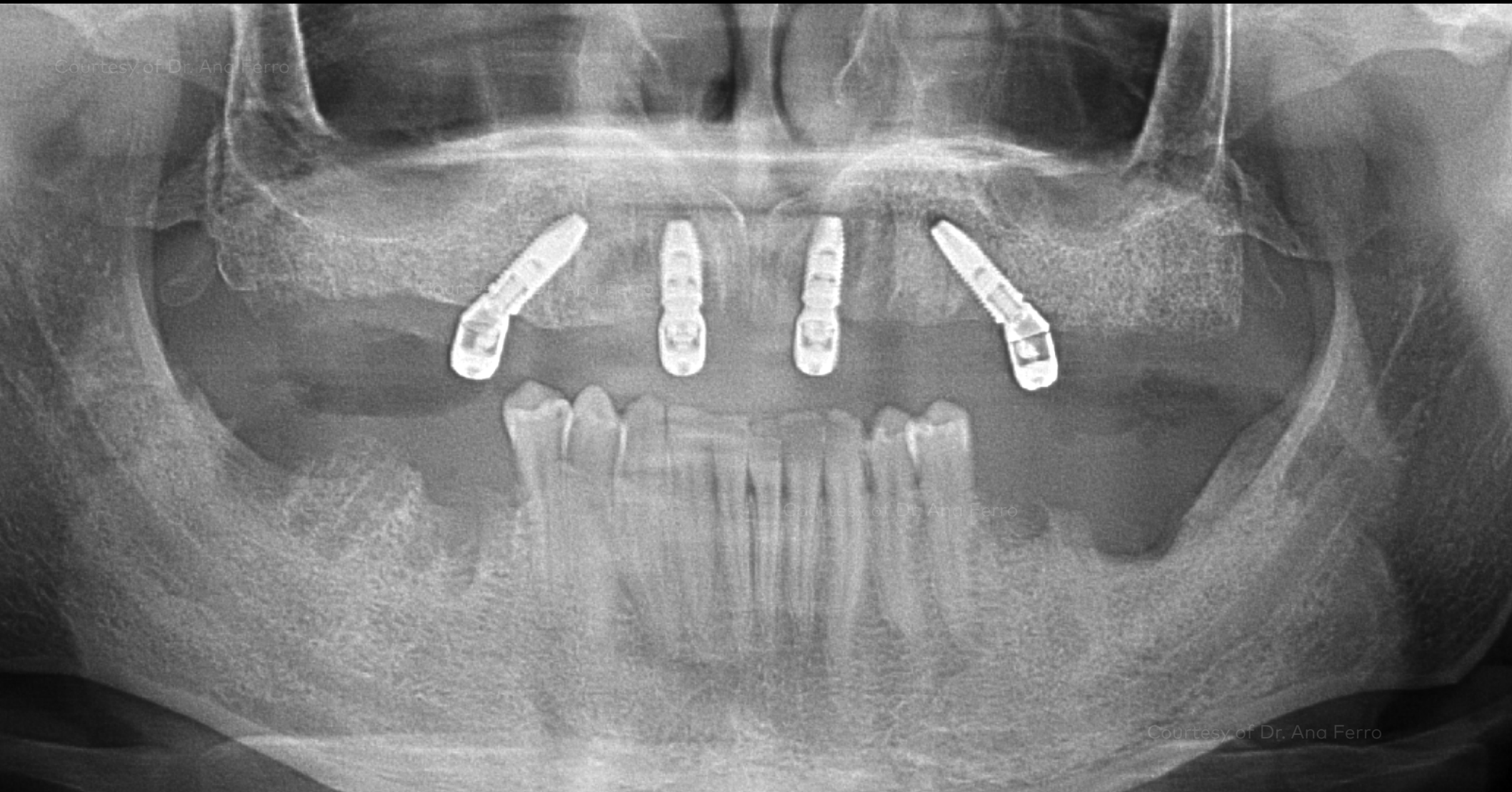
Outcome

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



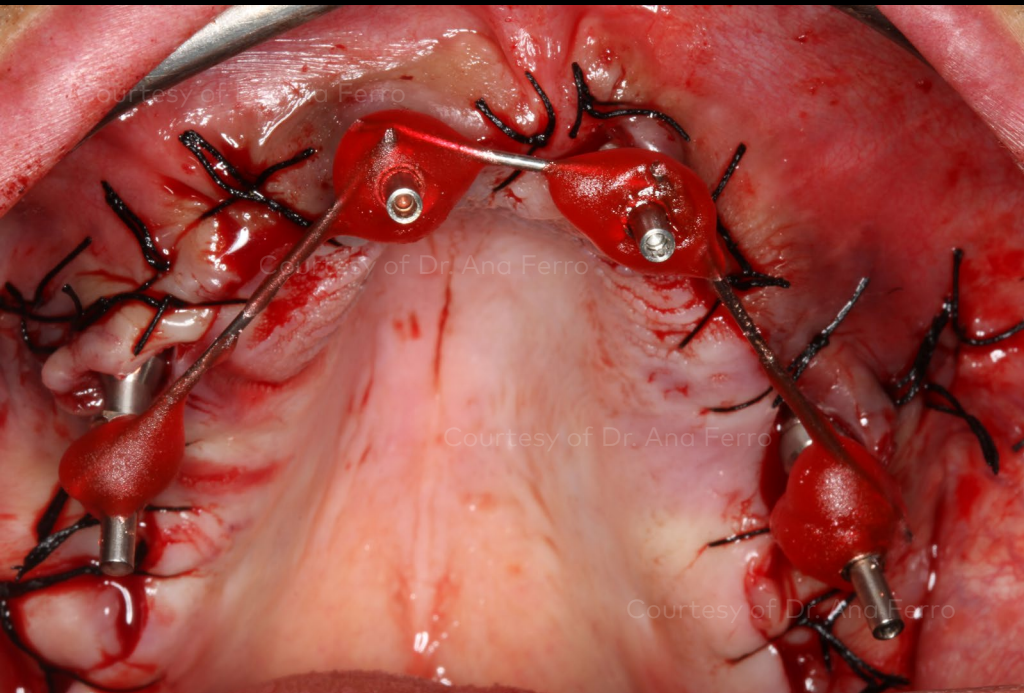
OPG showing an optimized implant distribution, with all abutments and Healing Caps in position. Due to the medium density of bone, bicortical anchorage was not necessary.

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



Titanium Healing Caps in position over the abutments to shape the soft-tissue. The 5 mm high Healing Caps were used because of the patient's high soft-tissue volume.

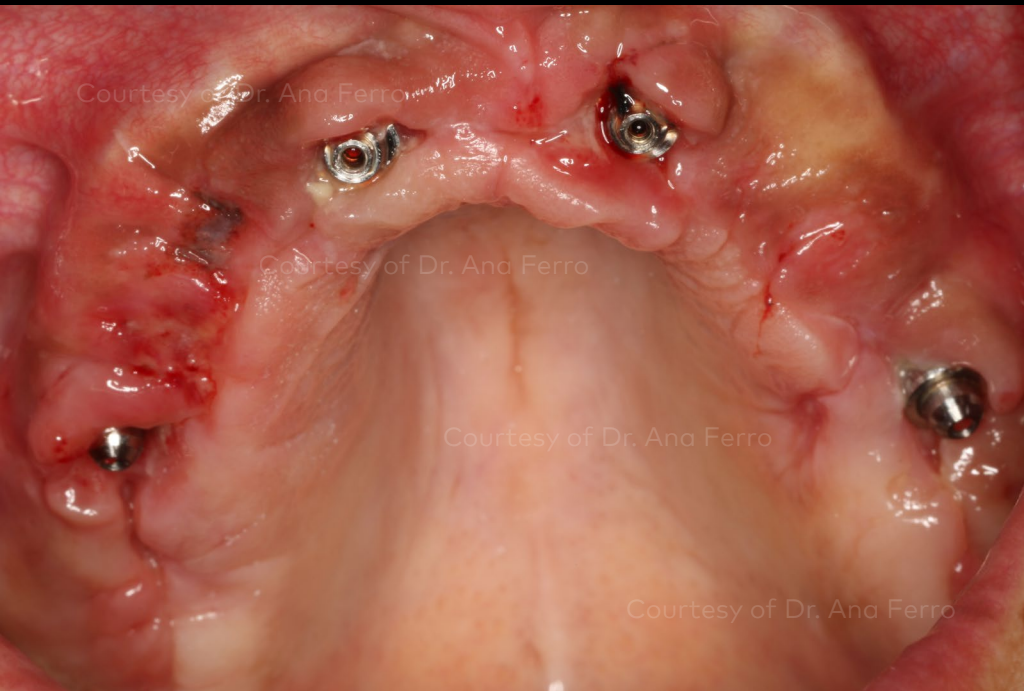
Frontal view of the all-acrylic provisional bridge.

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



Maxilla healing 10-day post-operative.
Abutments are cleaned and checked for loosening.

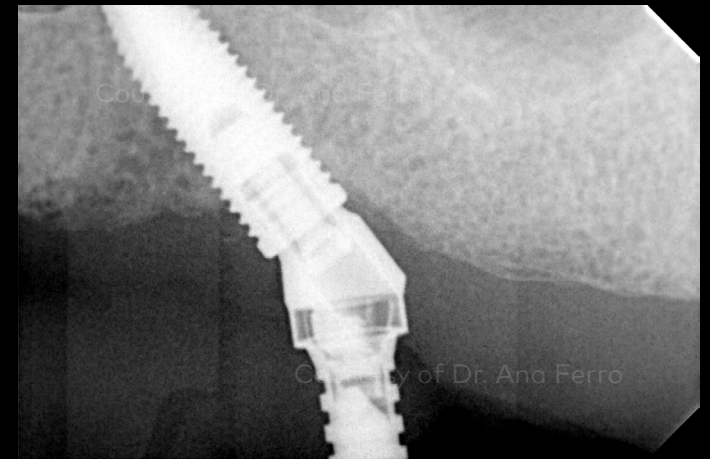
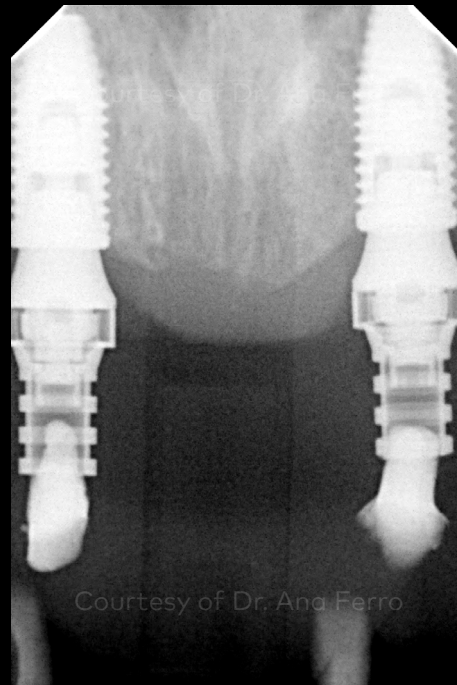
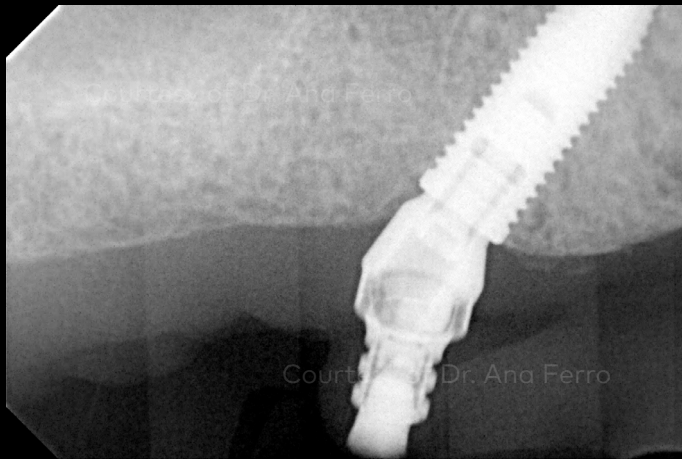
Intra-oral view 10-day post-operative.

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



X-ray after 4 months

Initial clinical situation

Surgical procedure

Restorative procedure

Outcome



Before and after 30 days

Case courtesy of Dr. Ana Ferro

"The All-on-4® treatment concept is a team approach. I would like to thank my MALO CLINIC colleagues involved in treating our patient: Ana Abadia from Oral Hygiene Department, Dr. João Botto from Oral Surgery Department, Dr. Raquel Lucas and Dr. Rodrigo Gonzalez from Prosthodontic Department and Helena Alexandre from MALO CLINIC Ceramics Laboratory."

