

# Augmentation at immediate implant placement



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**Patient information:**

51-years-old male

**Indication:**

7mm buccal probing and mild root resorption at upper central incisor (tooth #21)

**Solution:**

Removal of hopeless tooth with immediate placement of NobelActive implant, bone grafting with a mix of autogenous bone and particulate xenograft, covered by a creos xeno.protect collagen membrane

*“The main biological advantage of this membrane is the resorption time, which is indeed longer than other collagen membranes, allowing optimizing GBR results. It also has some very interesting mechanical properties, which makes it extremely tear resistant and easy to manipulate during surgery.”*

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An otherwise healthy patient presents at the clinic complaining of mild discomfort and mobility of the upper central incisor. 7 mm of buccal probing and mild root resorption is revealed at tooth #21. The tooth is diagnosed as hopeless and removed.



A NobelActive implant is immediately placed in the extraction socket with good initial stability

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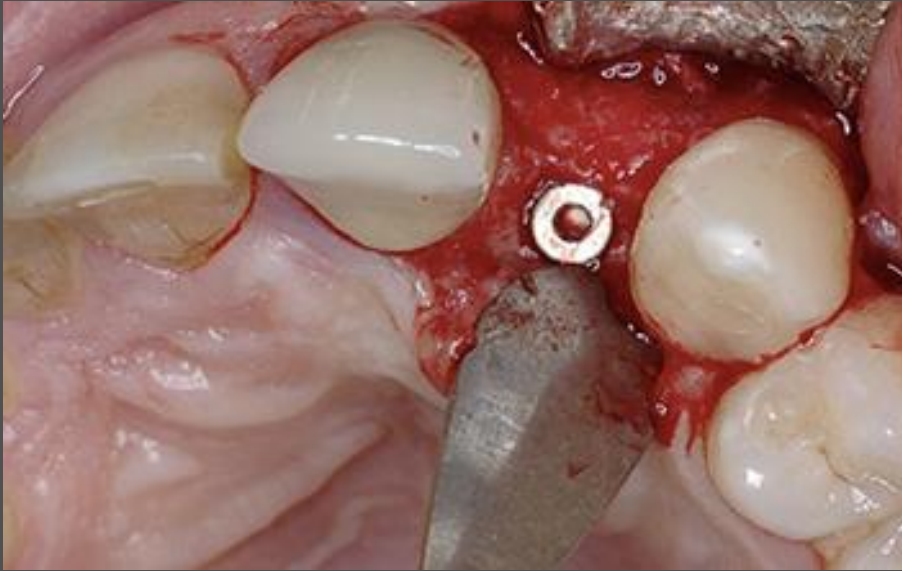


The buccal defect is grafted in sandwich technique using a layer of autogenous bone, overlaid with particulate xenograft.

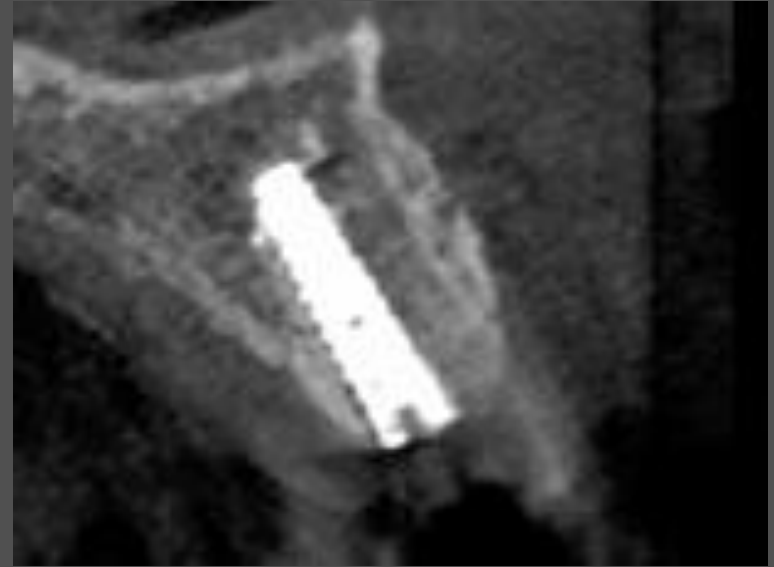


The creos xeno.protect collagen membrane is placed on top, using titanium pins to fix it.

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After 5 months of healing, bone formation is observed and the implant is ready to be restored.



Bone formation visible on the CB(CT) at 5 months follow-up.