

Horizontal and vertical ridge augmentation using a bovine hydroxyapatite and ePTFE membrane with simultaneous implant placement

Dr. Lanka Mahesh New Delhi, India



CLINICIAN BIOSKETCH



Dr Lanka Mahesh has a bachelor's in dental surgery, and master's certificates in implant dentistry from UCLA, US and CUFD, Thailand. He has also undergone extensive surgical training in France, England, Spain and the USA. He is a visiting professor at the University of Murcia in Spain and is on the Faculty of the Stony Brook University (US)/Dental XP masters course in oral implantology. He is also an Honorary Consultant to the Armed Forces of India. Dr Lanka Mahesh is Fellow and Diplomate of ICOI, US, and a board member of ICOI Advance Credentialing Committee WAUPS, Korea.

He is Editor-in-Chief of the International Journal of Oral Implantology and Clinical Research. In addition, Dr Lanka is on the editorial boards of the Journal of Implants and Clinical Dentistry, JIACD-USA, Journal of Interdisciplinary Dentistry, E Journal of Dentistry and Journal of the Academy of Oral Implantology. Dr Lanka Mahesh is the author of the textbook, Practical Guide to Implant Dentistry, published by Quintessence.

He is an author of Colour Atlas of Oral Implantology which is co-authored by Craig Misch David Schward and Praful Bali. Currently Dr Lanka Mahesh is in private practice at The Specialist Clinic, South Delhi, Saket, New Delhi.





Dr. Lanka Mahesh



28-year-old male, splint performed several years prior, no other relevant medical history

Clinical situation/Diagnosis

21 and 22 mobile, atraumatic bite and healthy gingiva

Surgical solution

Anesthesia with 2% Xylocaine®, full thickness flap, one tooth mesial and distal to the operative site, removal of 21 along with splint wire and 22 extraction, cleansing with saline, implants placed at 21 and 22 and defect grafted with creosTM xenoform and covered with a Titanium-Reinforced CytoplastTM membrane.

5-months healing, control CBCT, healing collar placement. 3-weeks follow-up for impressions and PFM crowns delivery

Surgery date

Implant placement and GBR: December 12, 2016

Total treatment time:

6 months

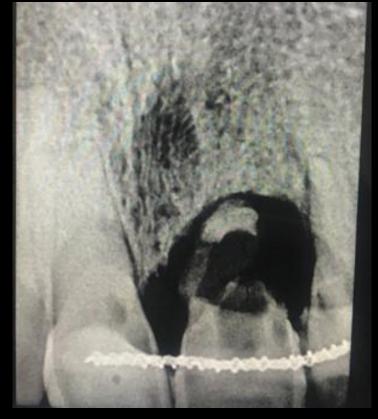




Initial clinical and radiographic examination

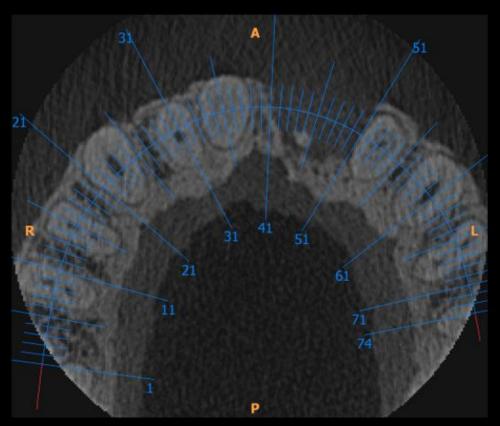


First clinical view of the teeth

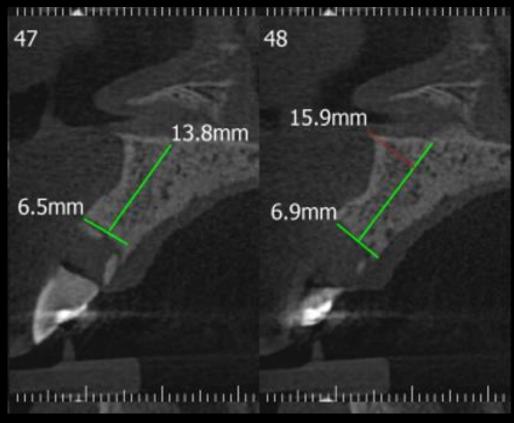


Initial X-ray provides a first assessment of the defect

Pre-operative CBCT



Assessment of horizontal bone loss



Measurement of vertical bone loss

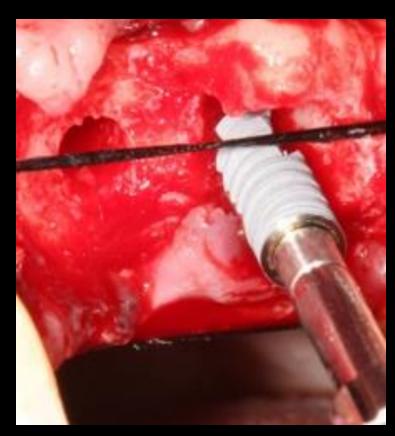
Extraction of 22

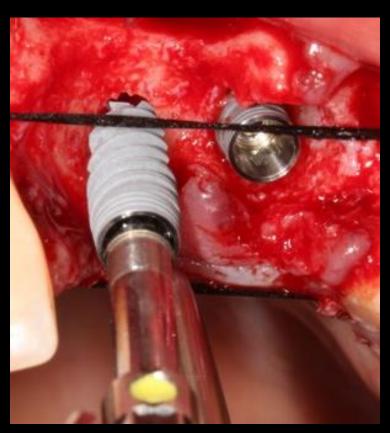




The root resorption is clearly visible at extraction

Implant positioning and cover screws







3.5/11.5 mm and 4.3/11.5 mm NobelActive® implants inserted at 40 Ncm torque

Cover screws in place

GBR and post-operative X-Ray



The defect was filled with creos™ xenoform 0.5-1.2mm granules size, 0.5g



The grafting material was covered with a Titanium-Reinforced Cytoplast™ membrane (Osteogenics Biomedical)



Post-operative X-Ray



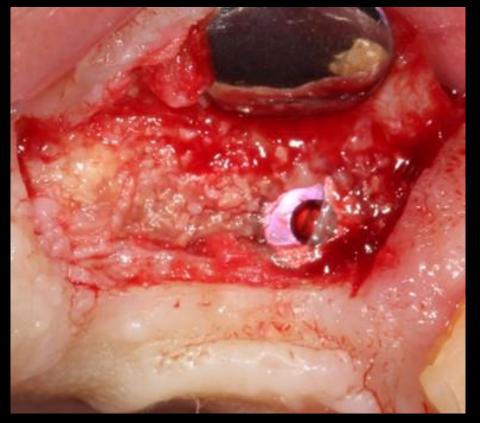
5 months post operative CBCT sections show an evident horizontal and vertical bone volume gain



5-months re-entry



Clinical situation at 5-months re-entry



Complete integration of bone graft after membrane removal is evident. The bone growth over the implants was gently removed with a wheel bur on a high-speed handpiece.

1-year follow-up



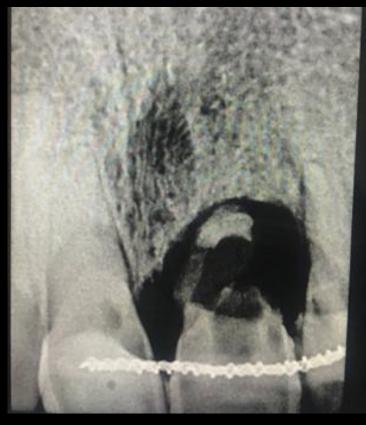
1-year X-Ray: Bone growth in vertical and horizontal dimension is clearly evident





Clinical situation at 1-year Follow-up

Before and after



Pre-surgical x-ray



1-year follow-up X-Ray

Before and after



Pre-surgical clinical assessment



1-year follow-up X-Ray

Case courtesy of Dr. Lanka Mahesh



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