

Upper Pre-Molar Case Study

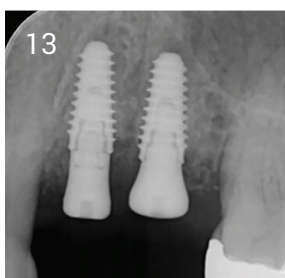
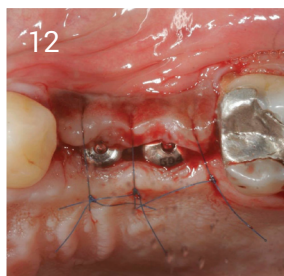
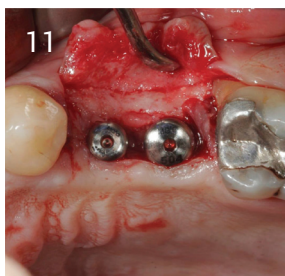
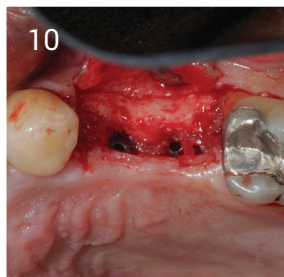
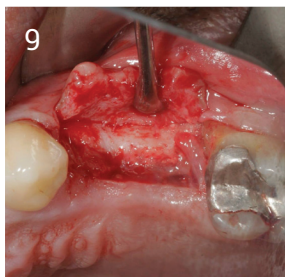
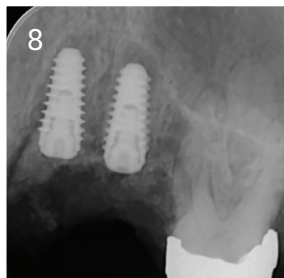
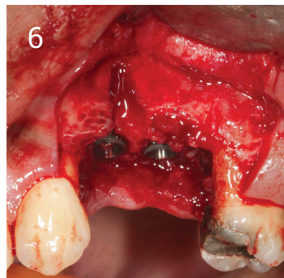
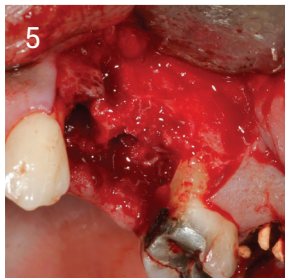
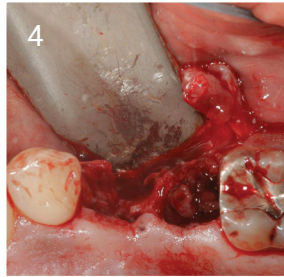
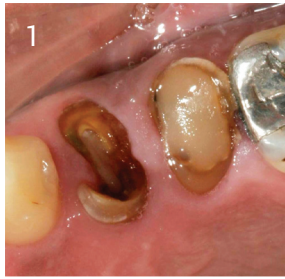
1. Failing 24 & 25 with chronic apical granulomas
2. Buccal profile view.
3. Pre-op radiograph.
4. Upon removal of teeth, buccal plate non existent at UL4. Type II (ITI) approach with re-entry after 4 weeks. Note the granulation tissue and lack of buccal plate. Granulation tissue removed down to sound bone.
5. Oblique profile.
6. Implants placed slightly deeper than ideal. Concerned about vertical bone loss after remodelling.
7. ethoss® after setting. Being cautious I over contoured buccally and added a little vertically.
8. Immediate post-op radiograph.
9. Upon exposure. Lots of bleeding bone. Cover screws no where to be found.
10. Bone removal (note to self: have faith and place implants more coronal).
11. 4mm height healing abutments. Note approx 4 mm bone buccal to cover screws so much more in relation to fixtures.
12. Displaced tissue buccally to increase volume of keratinised tissue
13. Significant changes to bone density evident post-operatively.

Case by Dr. Monder Zbaeda,

BDS(Hons) PgCert MSc MFDS RCSEd

DiplImpDent RCSEd

Barrington Dental Care



A biphasic matrix for true bone regeneration.
Built in membrane function, high graft stability.

Regenamed Ltd

8 Ryefield Court, Silsden, BD20 0DL
www.ethoss.co • info@ethoss.co