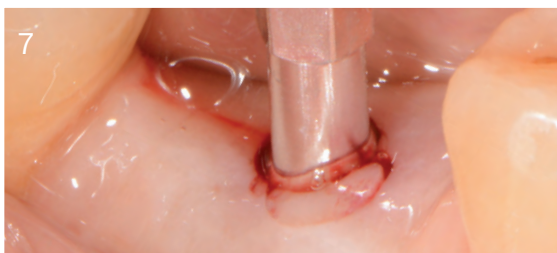
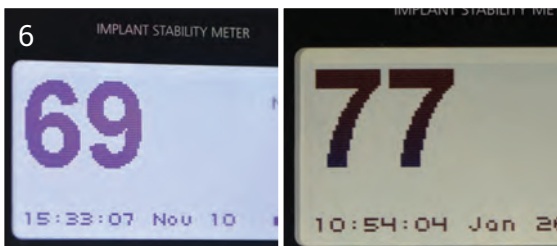
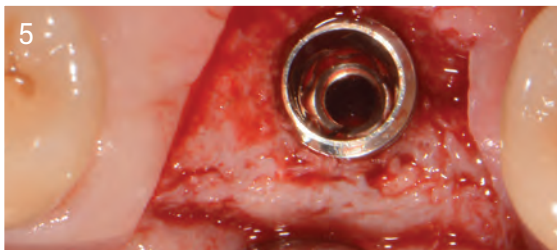
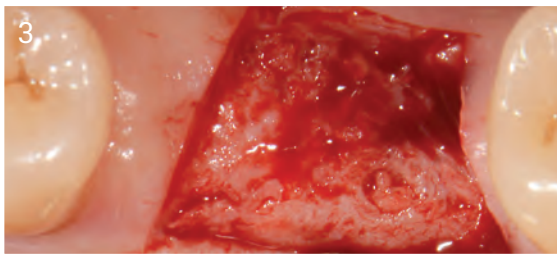
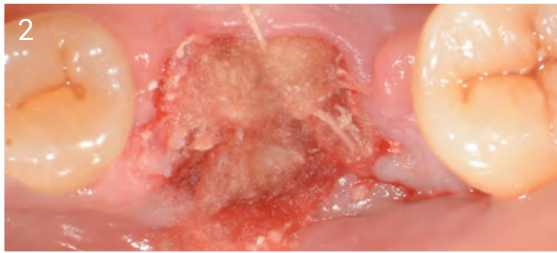
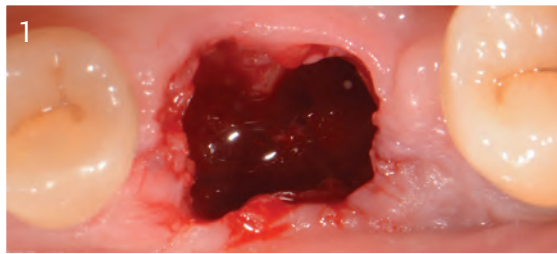


## Socket Graft Case with Biopsy

1. Extraction site infected and lost buccal plate.  
**N.B.** It is preferable to extract the tooth and leave the site for 3 weeks for soft tissue healing prior to grafting.
2. Grafted with ethoss®. Note buccal tissue shortage. Covered with fleece, cross-sutured with Vicryl 4.0.
3. 10 weeks later, restored hard and soft tissue, note no Bucco-lingual volume loss.
4. Core with new bone and residual graft.
5. Implant placed 4.5 mm note good bone at 10 weeks.
6. ISQ reading of 69 at 10 weeks, implant only in grafted site bone. ISQ reading of 77 at 3 months, a sign of strong osseointegration.
7. Osstell type 47 placed at 3 months.
8. Final result.

Radiographs on next page.



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

**Ethoss Regeneration Ltd**

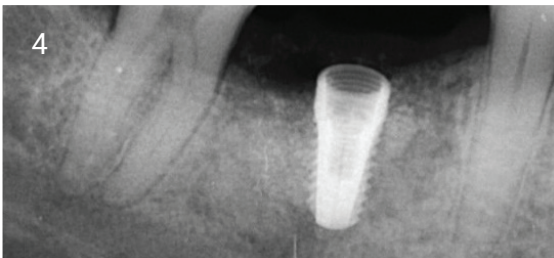
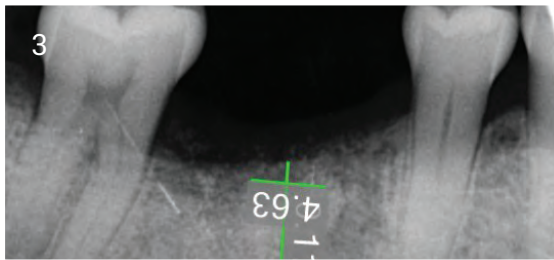
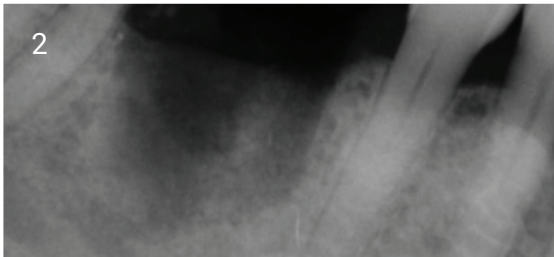
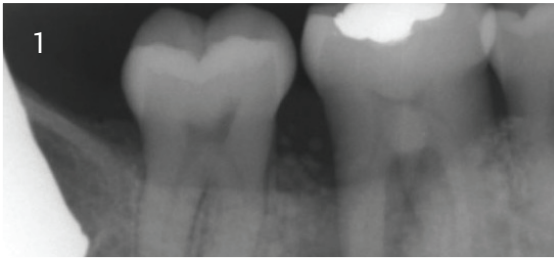
8 Ryefield Court, Silsden, BD20 0DL, UK

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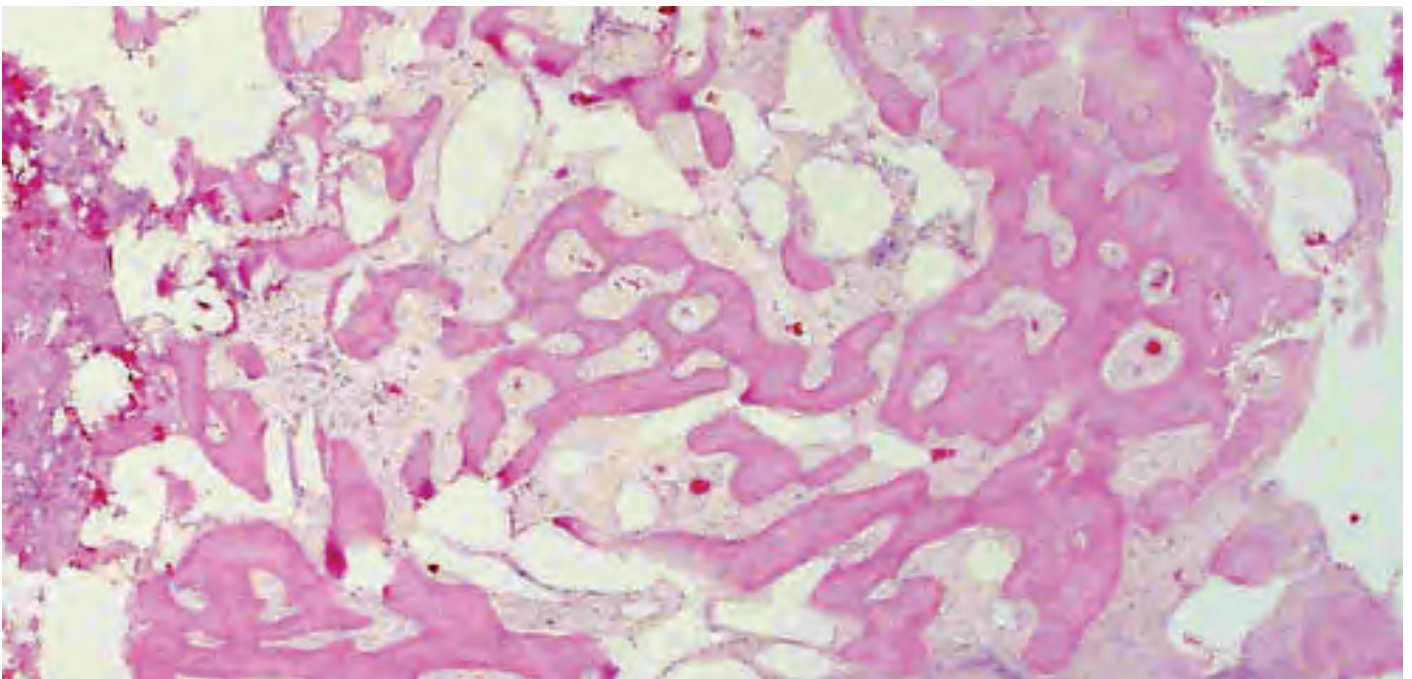
## Socket Graft Case with Biopsy

### Radiographs

1. Infected tooth.
2. Extraction site showing bone loss.
3. 10 weeks showing new bone level.
4. Implant placed into the site.



*Photomicrograph of Biopsy at 10 weeks showing significant amount of new bone growth surrounding ethoss particles.*



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