RIDGE AUGMENTATION

(Power and Potential of Reconstruction)

ABSTRACT

Background: Alveolar ridge resorption after tooth loss is a common phenomenon. After a tooth is extracted the alveolar ridge decreases in width and height respectively with as much as 50% loss in width during first year, two thirds of which occur in initial three months. To provide for adequate anatomic dimensions for the construction of an aesthetic ponticor for the placement of dental implants, alveolar ridge reconstruction is undertaken. In the case of aesthetic pontic construction, small defects may be treated with soft tissue ridge augmentation and for larger defects and in those sites receiving dental implants, hard tissue modalities are used.

Aim:To evaluate outcome of localised lateral alveolar ridge augmentation with autogenous block bone grafts from symphysis region.

Material and Methods: A single systematically healthy individual whose age is 25 having edentulous area with single tooth deformity in Maxillary anterior region, adequate bone support and patient requiring aesthetic replacement was surgically treated with a block graft taken from the symphysis region using Piezoelectric unit.

Results: Clinical improvement in the width of the edentulous site was noticed.

Conclusion: The autogenous block graft from mandibular symphysis is a convenient source and provides a dense quality ridge reconstruction.

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HOD SIGNATURE