

Cyst removal, buccal defect and immediate implant placement

PATIENT BACKGROUND

39 year old male
Non-smoker

This patient presented with a missing 14 and a failing 13 due to a failed endodontic treatment with a large periapical radiolucency (cyst). The cyst left a large apical defect alongside a huge buccal fenestration defect.

The upper right 3 was removed along with the cyst. The area was carefully cleaned and osteotomies were carried out using osseo-densification protocol. A wet mix was applied to allow the material to run into the defect completely, and the implants were placed. Following this, a drier mix of EthOss® Bone Graft was added buccally and crestally, stabilising the graft.

This case demonstrates the use of EthOss Bone Graft alongside immediate cyst management and implant placement.



 Dr Nicholas Busuttil-Dougall

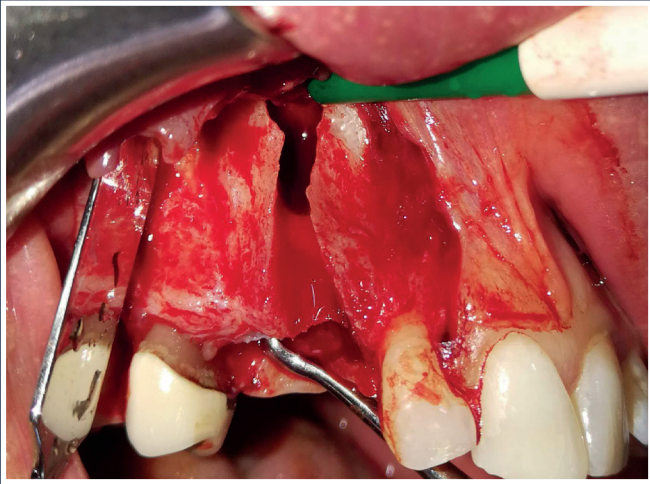


1. Initial CBCT

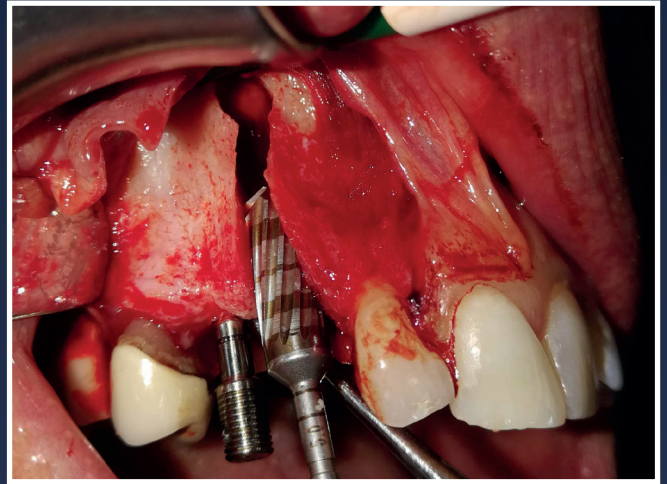


2. Cyst fragments

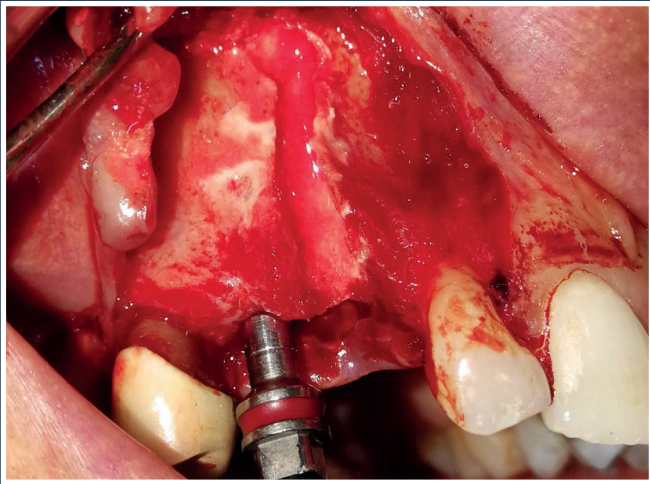
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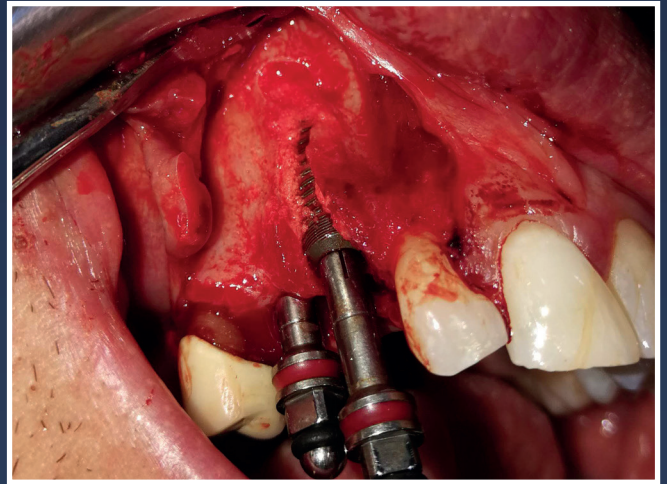
3. Defect after cyst removal



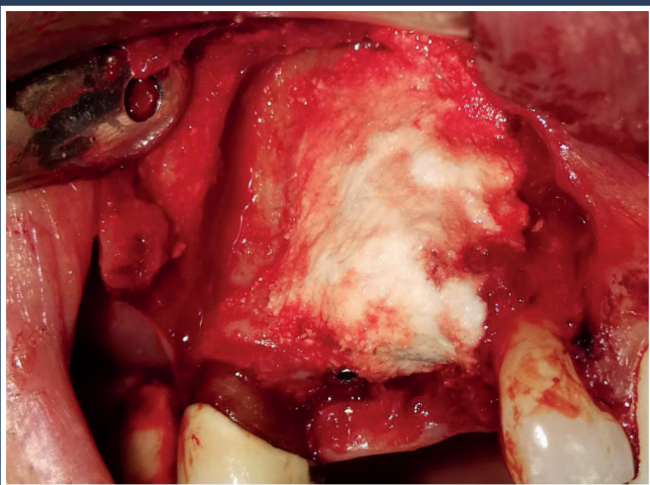
4. Osteotomies were carried out using osseodensification protocols



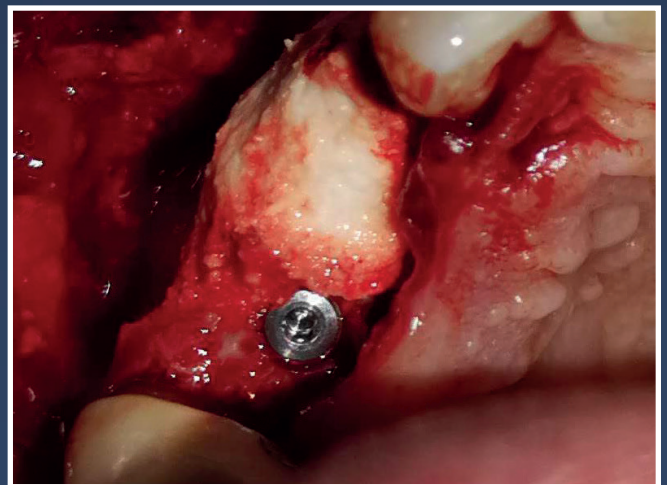
5. Wet layer palatally



6. Implant intersection in wet mix



7. Dry layer buccally



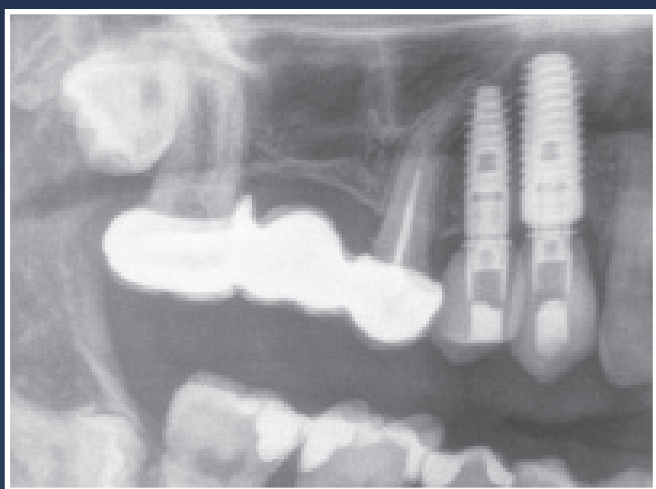
8. Dry layer crestally



9. Post-op radiograph



10. Radiograph 4 months post-op - fit final crown



11. Radiograph - 5 years post-op