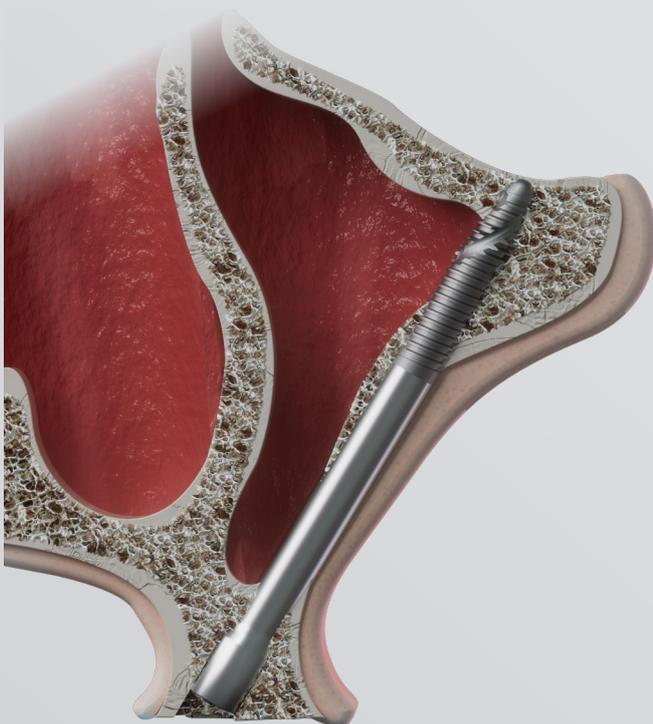


CLINICAL CASE

REACHING DISTANT AND STABLE
ANCHORAGE POINTS **WITH ZYGOMA-S**
IN NEOARCH REHABILITATION



GM Grand Morse®
Implant System

SFE Smile For Everyone
Solution

NS NeoArch®
Solution

CLINICAL CASE

REACHING DISTANT AND STABLE ANCHORAGE POINTS WITH ZYGOMA-S IN NEOARCH REHABILITATION

RESPONSIBLE SURGEONS



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BRAZIL

- Master and Doctor in Oral Rehabilitation from FORP - USP
- Post-Doctorate and Implantology at UnG
- Specialist in Implantology at ABO - Campinas
- Coordinator of Specialization Courses in Implantology at the ABOs of Campinas and Sorocaba
- Coordinator of the Advanced Course in Zygomatic Implants at Sculpere/ Campinas and Estudare/SP



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PATIENT MEDICAL HISTORY

The patient attended for evaluation with the maxilla in advanced occlusal, periodontal, functional, and biological deterioration, with few remaining teeth, bone loss, cavities, and fractured teeth. He used a removable partial denture with a metallic structure. The lower arch showed the absence of elements 36 and 46, and mesial migration of teeth 37 and 47, occupying the space of the first molars. The patient wanted to have a complete fixed prosthesis in the maxilla.

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PLANNING

O planejamento cirúrgico envolveu a realização de radiografia panorâmica e tomografia computadorizada, nas quais optou-se pela realização da exodontia dos elementos remanescentes, instalação de 4 implantes na maxila, sendo 2 implantes zigomáticos e 2 implantes convencionais.

DESCRIPTION OF THE PROCEDURE

The surgery was performed with conscious sedation performed by an anesthesiologist and local anesthesia. A total flap was raised, exposing the bone crest, maxillary sinuses, floor of the nasal fossa, and body of the zygomatic bone. Then, the remaining elements were extracted, and the ridge was regularized. Initially, the spots of the two anterior conventional implants Helix GM 3.75 x 13mm were instrumented using the drilling sequence recommended by the manufacturer, reaching installation torques of 60

N.cm. Then the two Zygoma-S 3.75 x 47.5mm implants were placed, also with 60 N.cm of torque. It was not necessary to use grafts to install any of the implants.

To carry out immediate loading, 45° Mini Conical Abutments Slim were installed in the zygomatic implants and straight in the conventional length implants. The abutments received the Mini Conical Abutment Protection Cylinders before simple sutures were performed.

PROSTHETIC DESCRIPTION

The prosthesis was made with a welded titanium bar and an acrylic base. After the impression, a wax plane was created and screwed onto the Mini Conical Abutments to help define and record the parameters for assembling

the teeth. The try-in of the teeth was performed on the same day and the final prosthesis was installed the following day.

NEODENT® MATERIALS



Helix GM®
3.75 x 13.0 mm



Zygoma-S
3.75 x 47.5mm



GM Mini
Conical Abutment



45° Mini Conical
Abutment Slim



Neo Mini Conical Abutment
Protection Cylinder

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1

Initial radiographic aspect.



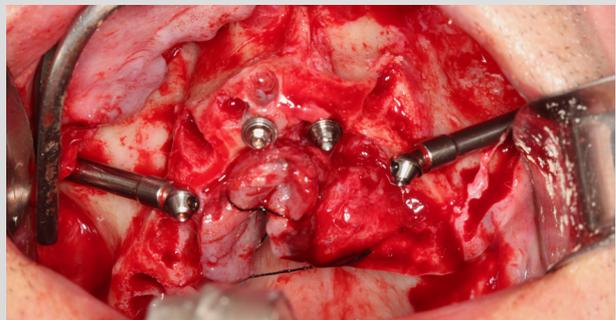
2

Initial clinical aspect, vestibular view.



3

Intraoral aspect after the total flap raise.



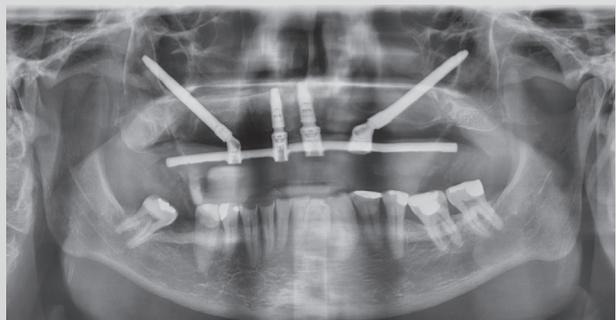
4

Intraoral aspect after the implant placement
with 60 N.cm of torque.



5

Intraoral aspect after installation of the
prosthesis.



6

Final radiographic aspect after the implants
and prosthesis installation 3 days after the
surgery.

PROFESSIONAL OPINION ABOUT THE PRODUCT AND PROCEDURE, FOCUSING ON YOUR LEARNING WITH THE CASE

The entire case was concluded in a protocol manner, completed in 4 appointments: Surgery and Impression; Wax Plans; Teeth try-in; Prosthesis Installation, and Adjustments.

WHAT WERE THE OTHER TREATMENT OPTIONS? WHY CHOOSE THIS SOLUTION?

The treatment alternative would be the total reconstruction of the maxilla with bone grafts, for following installation of the implants. In this case, instead of 3 days, it would be a treatment period of 12 to 18 months.

TIPS

Respecting the learning curve for performing zygomatic implants in cases of atrophic maxilla is essential.

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It is the clinician's exclusive responsibility to evaluate the patient's health conditions and viability of the procedure. The reproduction of this clinical case does not imply the success of similar procedures, as it will depend on the clinician's technique and ability, on patient's conditions on the previous and post procedure.

毎日、とびっきりの笑顔を

NUOVI SORRISI OGNI GIORNO

CHAQUE JOUR DE NOUVEAUX SOURIRES

НОВЫЕ УЛЫБКИ КАЖДЫЙ ДЕНЬ

JEDEN TAG EIN NEUES LÄCHELN

NUEVAS SONRISAS TODOS LOS DÍAS

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NEW SMILES EVERY DAY

NOVOS SORRISOS TODOS OS DIAS

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