
Immediately and Early Restored and Loaded Single Dental Implants after Immediate and Early Implantations in Anterior and Posterior Regions - Case Reports

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A healing period of approximately 4 to 6 months without loading has been a traditionally accepted protocol for attaining osseointegration - introduced by Brånemark and coworkers in 1977. As a result of refined surgical protocols, an optimized implant design, and other surface characteristics, a shortened healing period is currently possible. The success rate of immediately loading of implants that are cross-arch stabilized with either rigid bar or fixed provisional prosthesis is comparable to that of conventionally loaded implants according to several authors. Today more and more studies and case reports are presenting immediate and early loading of single-tooth implants in anterior and posterior regions.

This case report presents immediate and early implantations and early and immediately prosthodontic restorations (immediate non-functional loading) on implants for a single tooth in anterior and posterior regions.

With early and immediately restored dental implants careful patient selection and treatment planning remain significant. Although the immediate and early loading technique allows maintenance of soft and hard tissue, provides patient comfort and aesthetics, and has demonstrated success so far, a longer evaluation period with larger patient populations is needed.

Prikaz trenutnog opterećenja usatka u protetičkoj opskrbi pacijenta

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Nadomjestiti izgubljeni prednji zub često je nezahvalna zadaća. Pitanje je da li rehabilitaciju obaviti fiksnim nadomjestkom, tj. brušenjem intaktnih susjednih zuba, ili pronaći drugo rješenje. Uz povoljne anatomske i opće zdravstvene okolnosti, sve više se postiže uspjeh ugradnjom usatka i izradom kovinokeramičke krunice ili cirkon-keramičke krunice. U ovome radu obrađena je pacijentica razmjerno mlađe dobi s gubitkom lijevoga gornjeg središnjeg sjekutića. U prikazanom slučaju uporabljen je usadak s pripadajućim elementima za supstrukturu.

Nakon ugradnje usatka pacijentica je u istome danu opskrbljena privremenom akrilatnom krunicom. Nosila ju je četiri mjeseca, a nakon toga razdoblja izradila se je trajna kovinokeramička krunica. Takva se je metoda pokazala zadovoljavajućim rješenjem za estetski, fonacijski i psiho-socijalni problem nedostatka dominantnoga prednjeg zuba.

Presentation of Immediate Loading of the Implant in Prosthetic Treatment of Patients

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Restoration of a lost frontal tooth is frequently a thankless task. The question is whether rehabilitation should be performed with a fixed restoration, i.e. by grinding intact adjacent teeth, or by another solution.

With satisfactory anatomical and general health circumstances, success is increasingly achieved by placement of implants and construction of metal-ceramic crowns or zircon-ceramic crowns. In this presentation a relatively young female patient was

treated for loss of the left upper middle incisor. In the case presented an implant was used with corresponding elements for a superstructure.

Following insertion of the implant the patient was supplied with a temporary acrylic crown on the same day, which she wore for four months, after which a permanent metal ceramic crown was fabricated. This method proved to be a satisfactory solution with regard to the aesthetic, phonetic and mental-social problem of the loss of a dominant frontal tooth.

Ortodontsko - implantoprotetička rehabilitacija hipodoncije

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Prikaz slučaja pacijentice u dobi od 30 godina s hipodoncijom zuba 12. U prvoj fazi liječenja fiksnim ortodontskim aparatom distaliziran je zub 13, u stvoreni prostor u regiji 12 postavljen je zubni usadak te je nakon 6 mjeseci provedena protetska sanacija.

Orthodontic - Implantoprosthetic Rehabilitation of Hypodontia

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A case is presented of a female patient aged 30 years with hypodontia of tooth 12. In the first phase of treatment tooth 13 was distalised by fixed orthodontic apparatus, and a dental implant placed in the area created in region 12 and after 6 months prosthetic treatment was carried out.

Rezultati petogodišnjega praćenja implantoprotetičke rehabilitacije ratnih ozljeda lica i čeljusti

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Udio ozljeda glave u ratnim ozljedama čini gotovo 15%. Strijelne i eksplozivne ozljede specifične su po mehanizmu nastanka i po rezultirajućim oštećenjima. Ratne ozljede maksilofacijalne regije po svojem su opsegu i po opsegu trajnih oštećenja u pravilu mnogo nepovoljnije od mirnodopskih te je tomu proporcionalna i težina rehabilitacije takvih ozljeda.

Implantoprotetička rehabilitacija danas je rutina, ali je u doba neposredno nakon Domovinskoga rata bila tek u začetcima. U Klinici za kirurgju lica, čeljusti i usta KB "Dubrava" rehabilitirano je više defekata zuba i čeljusti ratnih vojnih i civilnih invalida Domovinskoga rata metodom ugradnje titan-skih oseointegrirajućih usadaka, a zatim rehabilitacijom protetskim napravama. Prikazani su slučajevi implantoprotetske rehabilitacije ratnih ozljeda lica i čeljusti s praćenjem više od 5 godina.

Results of Five-Year Monitoring of Implantoprosthetic Rehabilitation of Combat Wounds to the Face and Jaws

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Of all combat wounds the share of head wounds amounts to almost 15%. Gunshot and explosive wounds are specific both with regard to the mechanism of occurrence and with regard to the resulting damage. Combat wounds in the maxillofacial region, because of their extent and the extent of the permanent damage, are as a rule far worse than those that occur during peacetime, and the difficulty of rehabilitation of such wounds is proportional.