Dvadesetsedmogodišnjoj pacijentici operacijom je izvađen prvi gornji sjekutić zbog upalnoga procesa i resorptivnih promjena na kosti kao posljedice uzdužne frakture korijena. Neposredno nakon ekstrakcije kohleacijom je odstranjeno granulacijsko tkivo, koštani defekt ispunjen je Bio-Oss spongioznim granulama, a operacijsko polje pokriveno je Bio-Gide resorptivnom membranom. Godinu dana nakon operacije nastala je koštana regeneracija i ugrađen je ITI Straumannov implantat duljine 12 mm i promjera 3,3 mm. Zbog djelomične bukalne dehiscencije upotrijebljen je Fiziograft. Nakon 6 mjeseci izrađen je fiksnoprotetski nadomjestak.

Guided Bone Regeneration in Dental Implant Treatment - a Case Report

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Loss of anterior teeth can be caused by pathological processes, tooth retention (mostly upper canine), result of trauma (avulsion or root fracture) or missing tooth germ.

Such defects can be solved by orthodontic treatment (orthodontic space closure), prosthetic treatment (different bridge constructions) or with surgery treatment (dental implants). Inadequancy of orthodontic therapy is long lasting rehabilitation ond mostly esthetical imperfection. At the bridge constructions, hard tissues of adjacent teeth must be removed. Another contraindication is the presence of diastemas. Dental implants enable making self-supporting mastication units, but require sufficient bone to adequately stabilise. When there are changes in alveolar bone height and width, we use guided bone regeneration (GBR). GBR has proved to be a suitable technique for promoting bone regeneration. GBR treatment with collagen membranes may significantly enhance bone regeneration.

The left first incisor of a 27 years old patient was extracted because of resorptive processes on alveolar bone as a result of longitudinal fracture of the root. Immediately after extraction, the bone defect was filled with Bio-Oss spongiosa granules and covered with Bio-Gide resorbable bilayer mambrane. After one year the defect was restored to nearly original condition and ITI Straumann implant was placed. Because of labial dehiscence Fisiograft was used. The definitive restoration was placed after 6 months.

Komplikacije stomatološkog tretmana u pacijenta s diabetes mellitusom - prikaz slučaja

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Prevalencija diabetes mellitusa (DM) povećava se u cijelome svijetu kao rezultat promjena u načinu života, dužem životnom vijeku i sl. Stomatolozi će imati sve više takvih pacijenata u svojoj svakodnevnoj praksi. Svaka stomatološka intervencija povezana je s većim rizikom nastanka komplikacija u pacijenata s DM-om nego u pacijenata bez te bolesti. Ovaj rad pokazuje slučaj pacijenta s IDDM-om u kojega je neadekvatan stomatološki tretman uzrokovao komplikacije, poremetio opće zdravstveno stanje i ugrozio mu život. Svrha ovoga rada je upozoriti na obaveznu primjenu suvremenoga protokola za stomatološki tretman pacijenata s DM-om.

Dental Treatment Complications of a Patient with Diabetes Mellitus - Case Report

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The prevalence of diabetes mellits (DM) is increasing worldwide as a result of lifestyle changes, longer life