

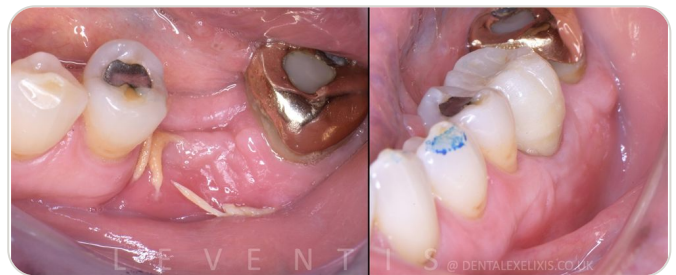
Early placement at four weeks, and the soft tissue redesigned without a graft

Dr. Minas Leventis

Lower left first molar, four weeks after extraction. A 5.0 × 8.0 implant placed 1 mm subcrestal, a customised Cervico healing abutment from the Essential Mold over a b-TCP / calcium sulfate graft, and a simplified approach to redesign the peri-implant soft tissue with no soft-tissue grafting.



Initial situation, four weeks after extraction of the lower left first molar.



Initial situation and final result.

SITE

Lower left first molar, 4 weeks post-extraction

IMPLANT

5.0 × 8.0 mm, placed 1 mm subcrestal, high initial stability

PLANNING

9 mm cylindrical tab: space measured, then used as the stent

ABUTMENT

Customised Cervico healing abutment, Essential Mold

GRAFT

Synthetic b-TCP / calcium sulfate, no soft-tissue graft

CLOSURE

5-0 monofilament SKD sutures; Bluem gel; SilverPlug in the canal

WHAT IT SHOWS

Early placement into a four-week socket, one surgery, no soft-tissue graft. The custom healing abutment sealed the graft and shaped the tissue at the same time, and the lab received the profile the tissue had actually healed into.

MATERIALS AND CREDITS

5.0 × 8.0 implant · Cervico Guide, pin and caliper · Cervico Essential Mold · b-TCP / calcium sulfate · SKD monofilament 5-0 · Bluem gel · SilverPlug

Case and images: Dr. Minas Leventis · Laboratory: Phill Reddington, Beever Dental Laboratory · Full case at vpicervico.com/cases

The protocol

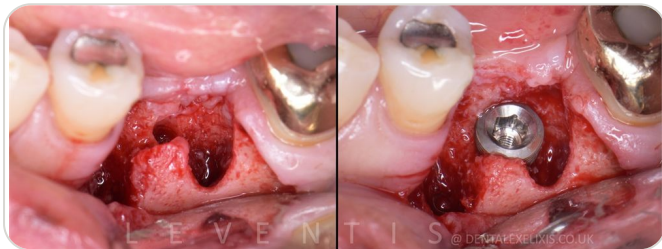
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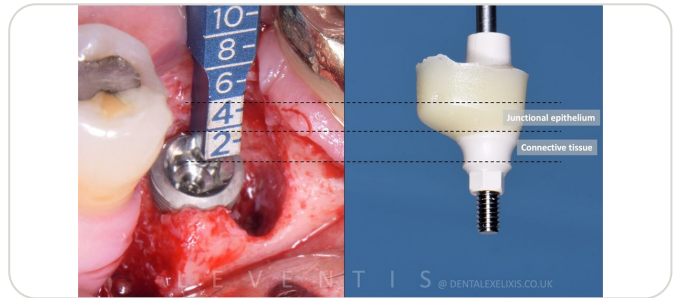
01 A 9 mm cylindrical tab evaluates the site intraorally and measures the prosthetic space. The same tab then guides the initial trephination as a surgical stent.



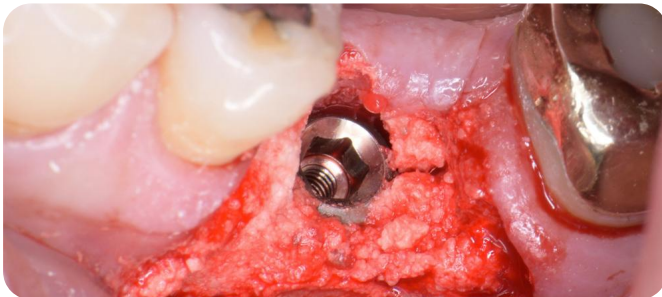
02 Initial pilot trephination completed; a pin checks position and direction.



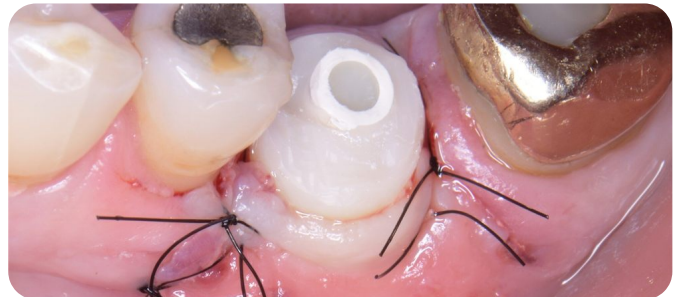
03 Full-thickness flap. A 5.0 x 8.0 implant placed with high initial stability.



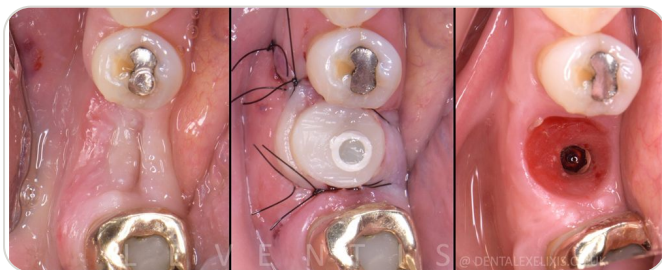
04 The Cervico caliper reads placement depth and the thickness of the overlying soft tissue. The implant sits 1 mm subcrestal to leave room for every component of the future transmucosal complex. The custom abutment is made in the Essential Mold.



05 Grafting with synthetic b-TCP / calcium sulfate before the customised healing abutment is fitted.



06 Abutment fitted and sutured with 5-0 monofilament SKD. From this moment the transmucosal complex forms in parallel with osseointegration and hard-tissue regeneration.



07 A simplified contemporary approach to redesign the peri-implant soft tissue, without soft-tissue grafting.



08 With the correct emergence profile created, all the information transfers to the lab for a restoration that meets the functional, biological and aesthetic requirements.