



JUNE 2018

CLINICAL CASES REPORT

SURGEON - Dott. Antonio Mingione

BEFORE SURGERY

ABSTRACT

A 50-year-old male patient requires fixed implant-prosthetic rehabilitation of the upper and lower arches. Carrier of upper total mobile prosthesis, poorly retentive, presents severe atrophy of the maxilla which makes rehabilitation impossible through conventional dental implants. In the inferior arch it has partial edentulia with strong periodontal compromise and mobility of degree 2 of the residual dental elements. Then, after having acquired all the documentation of the case (clinical photos, opt, cbtc, study models), the following treatment plan is implemented:

Positioning of 4 zygomatic implants (ZIGOPLUS diameter 3.75) to immediate load with Toronto resin prosthesis in the upper arch:

Positioning 4 standard dental implants with immediate loading with Toronto resin implants in the lower arch.

DIAGNOSIS

SERIOUS ATROPHY OF THE UPPER MASCELLAR

RX O TAC before surgery

Attached

PRE-OPERATIVE CONSIDERATIONS (describe the situation and the problems and actions to be carried out)

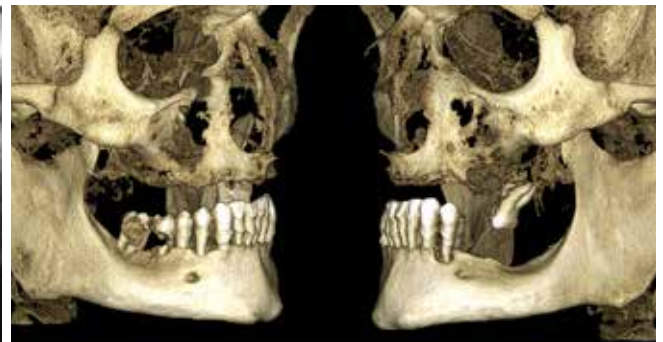
MAXILLARY -Dental element 27 with grade 3 mobility, severe bone atrophy of the entire maxilla

JAW - Residual dental elements with severe periodontal lesions and grade 2 mobility

Periapical lesions 34-46-47

Distinguishing Caries 46

PICTURES





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SURGERY

DURATION OF SURGERY

3 Hours

TOTAL TREATMENT TIME

(describe the steps that will lead the patient to the solution of the case)

- 1 session (3 hours) - Insertion of 4 zygomatic ZIGOPLUS implants (quad technique) + 4 M.U.A. with angles of 45 ° (front implants) and 55 ° (rear implants)
 - 2 Session (1 hour) - The day after - Positioning and finishing of the occlusal fixed temporary prosthesis (Toronto bridge) upper arch (IMMEDIATE LOADING).
 - 3 Sitting (30 minutes) after 10 days - Control, suture removal
 - 4 Sitting (15 minutes) - after 30 days - Check
 - 5 Sitting (15 minutes) - after 60 days - Check
 - 6 Sitting (1 hour) - after 60 days - Control and definitive prosthetic phase beginning
- After 6 months from the first session the final ceramic zirconia prosthesis will be made

PROJECT NAME INDICATE TYPE OF INTERVENTION

insertion of 4 bilateral zygomatic implants

INTERNAL LOCATION INSIDE THE MOUTH

maxilla, bilateral zygomatic bone

OPERATIONS PERFORMED

(describe the situation and the problems and actions performed)

MASCELLARE - Extraction 27. Fixed implant-prosthetic rehabilitation of the upper arch through 4 zygomatic implants (ZIGOPLUS) with immediate loading on temporary resin prosthesis and subsequent definitive rehabilitation with ceramic prosthesis, after 6 months.
MANDIBULA - Complete remediation of dental residual elements, fixed implant-prosthetic rehabilitation with all on four technique on conventional implants. Immediate loading with fixed resin fixed prosthesis and intraoral welding. After 6 months rehabilitation with fixed ceramic prosthesis. Jaw surgery was performed simultaneously.

PICTURES





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POST-SURGERY AND FINAL CONSIDERATIONS

CONSIDERATIONS AFTER SURGERY

(describe the stay and the results by briefly describing the various aspects and problems)

The patient has the common postoperative outcomes: edema, subpopular and bruising in the zygomatic region, transient paraesthesia, complete absence of pain. No type of complication occurred and there was a complete functional recovery after about 10 days.

LAB

LABORATORY DENTAL TECHNICIAN

Rodolfo Luzietti

OPERATIONS PERFORMED

(describe the situation and the problems and actions performed)

Endoral welding of titanium bar at the end of the intervention and realization of temporary Toronto in resin delivered the following day (Immediate Load)

CONSIDERATIONS ON WORK DONE AND / OR PROSTHETIC

(describe the type of work and briefly describe the various aspects and problems)

Toronto in upper and lower resin with electrically welded metal bar.

PICTURES

