

POST-EXTRACTIVE IMPLANTS: OUTCOME OF 40 CASES

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In the last two decades, several investigators have reported immediate placement of dental implants into extraction sockets achieving excellent results with a two-stage surgical procedure. Recently immediate loading has become an emerging technique as it has been documented to be a successful and time saving procedure. As regard the possibility of immediate/early loading of implants placed in fresh extraction sockets few reports are available. In addition they are based on limited series with short follow-up. Thus we decided to perform a retrospective study on a series of post-extractive implants. A total of 40 two-piece implants (FMD srl, Rome, Italy) were inserted in post extractive sockets, 22 in females and 18 in males. The median age was 52 ± 11 (min-max 24-69 years). Twenty- one implants were inserted in upper jaw and 19 in mandible. Fixtures replaced 7 incisors, 3 cuspids, 12 premolars and 18 molars. Implant’length was $x \leq 10$ mm, $10,30 \leq x \leq 12.30$, equal to 13 mm and $x \geq 14$ mm in 6, 14, 9, and 11 cases, respectively. Implant’ diameter was narrower than 3.5 mm, equal to 3.8 mm and wider than 4.0 mm in 1, 7, and 32 cases, respectively. There were 28, 2 and 10 Elisir, I-fix, and Shiner implant types, respectively. No implant on single tooth rehabilitations, was lost, survival rate = 100%. Then peri-implant bone resorption (i.e. delta IAJ) was used to investigate SCR. Seven fixtures have a crestal bone resorption greater than 1.5 mm (SCR = 82.5%). Statistical analysis demonstrated that there was a difference between surgeons ($p= 0.005$). In conclusion FMD implants are reliable devices for oral rehabilitation with a very high SCR and SVR.

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