Horizontal & Vertical Augmentation, Sinus Augmentation (Maxillary Left Posterior Area) - Part I



Patient

Gender: FemaleAge: 74 years old

Doctor

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The situation & approach

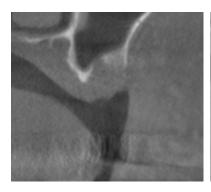
The presurgical CT scans, including panoramic and crosscut views, indicated that the alveolar ridge height under the sinus was minimal. This suggested insufficient bone structure for the planned dental procedures. To address this issue, sinus and vertical ridge augmentation were necessary. These procedures aimed to create the required bone support for successful dental implants and ensure a stable foundation for future restorations.

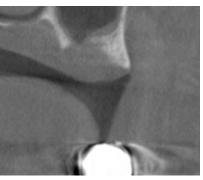


Presurgical Panoramic View

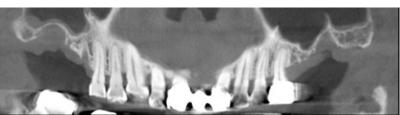


Presurgical CT: Panoramic and Cross-Sectional Views.



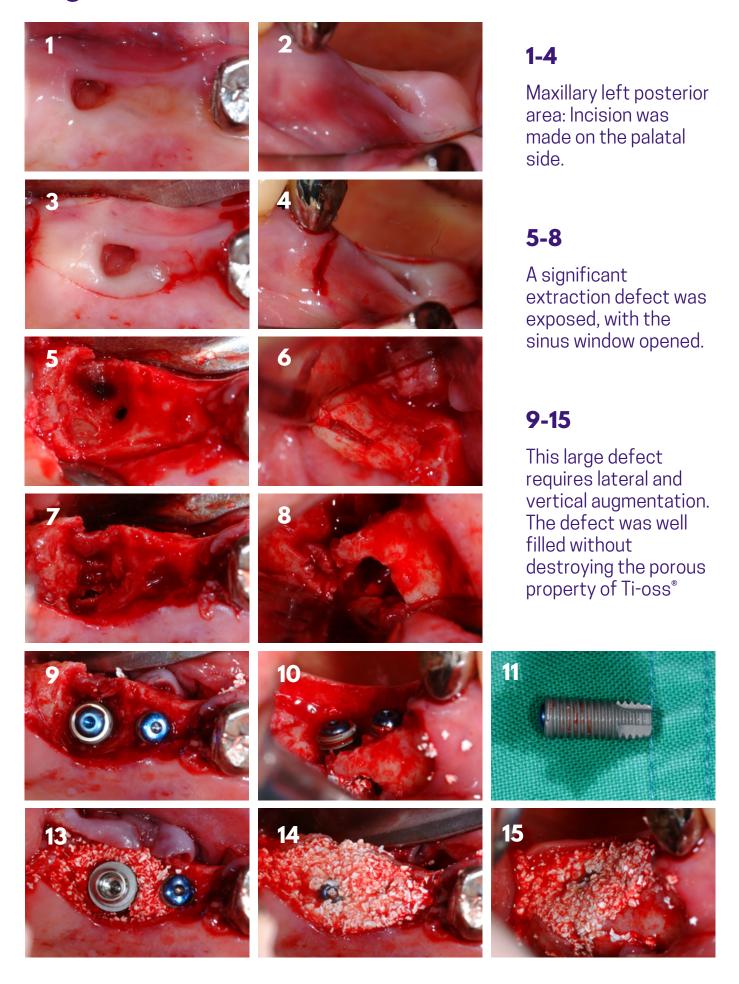


The alveolar ridge height beneath the sinus was minimal.



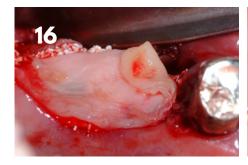
Sinus and vertical ridge augmentation were required.

Surgical Process



16-18

PRF was covered for protective purposes, and both interrupted and mattress sutures were placed.









Right after the Surgery



1 Month After Surgery

The radio-opacity in the sinus area has increased significantly.



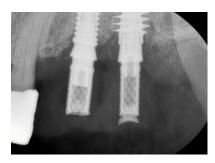
2 ½ Months After Surgery

The opacity of the sinus graft on the left shows a notable increase. This finding highlights the well-proven biocompatibility and osteoconductivity of Ti-oss*.



5 Months After Surgery

The graft procedure for the sinus and coronal defect was performed successfully





8 Months After Surgery



10 Months After Surgery



11 Months After Surgery



49 Months After Surgery

The image shows a well-densified area of Ti-oss®, demonstrating its excellent healing performance.



