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Simple Surgical Techniques to Maximize Prosthetic Results

Timothy Kosinski, DDS, MAGD

Replacement of missing teeth with the use of dental implants is predictable and has become common place. Patients now present to our practices with information gathered from many sources including the internet. They are educated about the benefits of implant dentistry and some of the surgical procedures. However, some cases are more difficult for the practicing dentist than others. The reluctance to consider dental implant surgical and prosthetic procedures by the general dentist may be more a matter of not feeling confident or competent in the procedure in a particular area of the mouth.

Bone contour and vital anatomy need to be considered and evaluated carefully to insure a high quality functional and esthetic result. Risks need to be addressed with the patient prior to any surgical intervention. A technique will be discussed here which will help minimize surgical risk and help the dentist in understanding anatomy and proper placement.

There needs to be a safe and effective mechanism in the placement of dental implants in the proper position. The step by step process of radiographic documentation insures an accurate surgical placement.

Design

There has been significant design improvements of dental implants over the past few years, each creating better initial stability, less crestal bone loss over time, and improved retention, function and esthetics of the final restoration. Preservation of soft tissue contours

is achieved by preserving crestal bone levels. The type and size of abutment placed within the implant has changed recently with the advent of the concept of implant platform switching. This proposed method of abutment placement has apparently shown a propensity to reduce circumferential bone loss around the dental implants.^{1,4} The horizontal microgap is changed to be on the inside of the external diameter of the implant neck, and this process may result in decreased bone loss.



Figures 1-2: Retracted facial and occlusal view of the tooth #14 area. It appears that there is adequate width of bone.

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