





CURRENT TRENDS AND ADVANCES IN DENTIST

ABSTRACT BOOK

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*The second edition with correction of all unintentional, technical errors and deficiencies will be available by 09.09.2023



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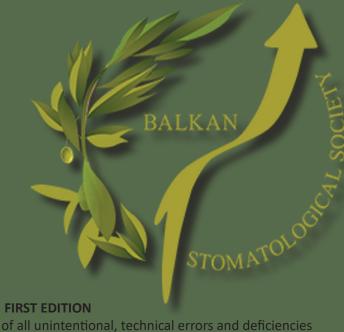
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and silanization. All of the experimental posts were cemented into adequate glass cylinders, using cement Varolink. Afterwards these cemented experimental posts in the composite cement are pulled out from the glass cylinders and are cut out perpendicularly to the post axis in 1,5mm depth using diamond separating disc. By application of static force the breaking force was measured of the experimental post specimens. **RESULTS:** The average value of the breaking force at the control group varies 10, 96 ± 10, 10 MPa; ± 95%Cl: 4,

53-17,36MPa; the minimal value is 1, 54 MPa and the maximal value is 35,95Mpa. The average value of the breaking force at the examined group varies 17, 27±8,27Mpa; ±95, 00%Cl: 12, 01-22, 53; the minimal value is 5,16Mpa and the maximal value is 23,05Mpa.

CONCLUSION: The pretreatment of the composite posts improves their adhesion to the composite cement. **Key words:** acid treatment, bond strength, breaking force, composite esthetic posts.

PP-9

TREATING OF FULLY EDENTULOUS MANDIBLE USING FOUR COMPRESSIVE IMPLANTS IMMEDIATELY LOADED WITH OVERDENTURE

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INTRODUCTION: Implant-retained dentures have become a successful, popular treatment option to enhance the stability and retention. The aim of this case report is to highlight the benefits of usage compressive implants immediately loaded with overdenture.

CASE DESCRIPTION: We are presenting a female patient at the age of 62 without any medical issues. Intraorally, we diagnosed fully edentulous mandible, treated with conventional acrylic denture. All clinical and paraclinical examinations such as 3D CBCT and anatomical studio models were made. We insert four compressive implants with multi-unit platform in the anterior part of the mandible between the mental foramens. Inserted implants are immediately loaded with overdenture. Implants were inserted using full thickness flap with mid-crestal incision. We achieved implant torque between 35N/cm and 45N/cm. The final impression was taken after 72 hours. On the final cast with implant analogs, dental technician used burnout abutments for producing milled bar. The bar and the implant platform are connected by the screw-retention method. After 48 hours throughout the principle of occlusal rims, vertical dimension was registered. In the next phase the wax try-in of the denture was performed.

CONCLUSION: This treatment option prevent bone resorption in the anterior part of the mandible. Denture achieves better retention and stability. Patients are getting better oral health related quality of life as a result of improvements in mastication, speech and swallowing.

Key words: anodontia, compressive implant, immediate, overdenture.

PP-10 IMMEDIATE IMPLANT PLACEMENT IN EXTRACTION SOCKET WITH PREVIOUS PERIAPICAL INFECTION

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INTRODUCTION: Immediate post-extraction implant placement is a well-accepted protocol due to the preservation of aesthetics, shorter total treatment time, maintenance of socket walls and reduced surgical time. Despite all these advantages, there is a risk of microbial intervention in cases with a periapical lesion which can delay the process of osseointegration.

AIM: To evaluate the successes of the immediate implant placement in areas exhibiting periapical lesions,



gaining aesthetics and function by establishing a successful protocol for safe implant embedding.

CASE REPORT: Surgical intervention and bone grafting were performed before tooth extraction to resolve the infection and develop the site for immediate implantation, helping ensure the bone volume needed for high primary stability. The reported case has clinically demonstrated that interim endodontic and periapical site preparation, when performed correctly can eliminate the hopeless tooth infection, regenerate bone and facilitate satisfactory immediate implant placement.

CONCLUSION: This study is proof of the principle that sockets can heal naturally with immediately placed implants in infected sites and tissue shrinkage can be reduced by utilizing the least invasive surgical and prosthetic protocol.

Keywords: Alveolar ridge preservation, Bone graft, Immediate implant placement.

PP-11 MANAGEMENT OF CONGENITALLY MISSING MAXILLARY LATERAL INCISORS: ORTHODONTICS-IMPLANTO-PROSTHETICS

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INTRODUCTION: Missing maxillary lateral incisors is a common developmental anomaly and often creates a major esthetic problem due to their position in the dental arch. Treatment in such cases depends on either creation of space followed by prosthetic replacement or closing the space and replacing the missing lateral incisors by canines. In this report we highlight some of the key factors which should be considered for replacement of missing lateral incisors using single tooth implant.

AIMS: This clinical report describes the treatment of a patient with bilateral missing maxillary lateral incisors. An interdisciplinary approach involving Orthodontist, implant surgeon and prosthodontist was used in the treatment.

METHODS AND MATERIALS: This clinical report describes the treatment of a patient with bilateral missing maxillary lateral incisors. An interdisciplinary approach involving Orthodontist, implant surgeon and prosthodontist was used in the treatment.

RESULTS: At the end treatment, the patient presented with class I canine, normal overbite and overjet, and good facial esthetics with canine protected occlusion.

CONCLUSION: When indicated, space opening and replacement of missing lateral incisors with implant supported tooth substitution may provide excellent esthetics and functional results.

Key words: lateral incisor, implant

PP-12 PLATELET RICH FIBRIN IN PREPOSTHETIC ORAL SURGERY

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INTRODUCTION: The application of platelet-rich fibrin (PRF) is a completely new approach to tissue regeneration and is gradually becoming a valuable tool in promoting tissue healing in a lot of oral surgical interventions.

AIM: The aim of this clinical study was to confirm the effect of PRF on bone and soft tissue defects, during oral surgical interventions.