

EP-215 Guided tissue regeneration for periodontal intrabony defects

Ivana Nedelkowska¹, Ivona Kovacevska², Spiro Spasovski³, Katerina Zlatanovska², Natasa Longurova², Aneta Atanasovska Stojanovska⁴, Mirjana Popovska⁴, Edis Grbovik⁵, Risto Panajotu⁶, Maxhide Isa⁷, Biljana Rusevska⁸, Marija Ivanovska Stojanovska⁹

¹Department of Oral pathology and Periodontology USKC "Sv.Pantelejmon" Skopje; Faculty of Medical Science - University "Goce Delcev" Stip

²Faculty of Medical Science - University "Goce Delcev" Stip

³Faculty of Dentistry- University "St. Kiril and Metodi" Skopje, Department of oral surgery and implantology, PhD student

⁴Faculty of Dentistry- University "St.Kiril and Metodi" Skopje, Department of Oral pathology and Periodontology

⁵Department of Endodontics USKC "Sv.Pantelejmon" Skopje Resident- Faculty of dentistry-University "St.Kiril and Metodi" Skopje

⁶Faculty of Medical Science - University "Goce Delcev" Stip, Private Dental Clinic EDG

⁷Department of Oral pathology and Periodontology USKC "Sv.Pantelejmon" Skopje; Resident-Faculty of dentistry-University "St.Kiril and Metodi" Skopje

⁸Department of Oral pathology and Periodontology USKC "Sv.Pantelejmon" Skopje; Faculty of Dentistry-University "St.Kiril and Metodi" Skopje

⁹Department of Oral pathology and Periodontology USKC "Sv.Pantelejmon" Skopje

OBJECTIVES

The use of modern biomaterials for guided tissue regeneration (GTR) proves to be a much better and effective method in stimulating the regenerative potential of the bone tissue, compared to open curettage and periodontal pocket debridement.

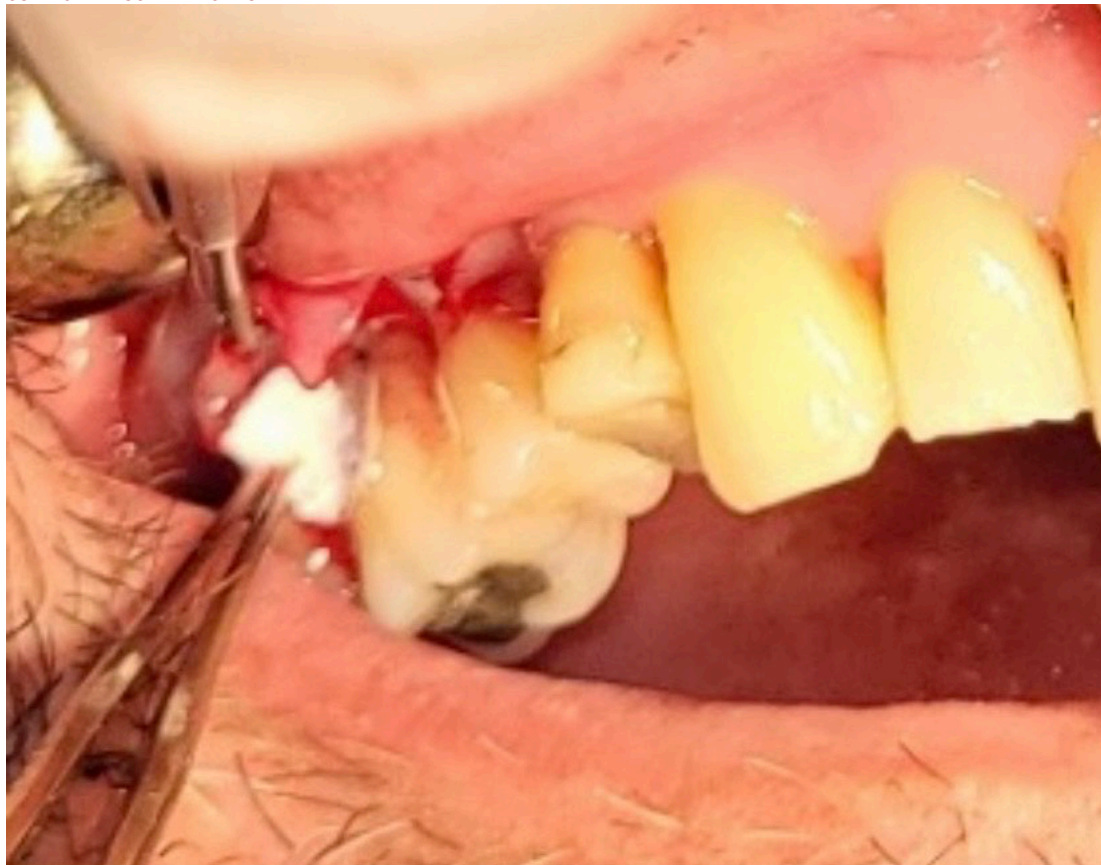
CASE

The aim of present case report was to evaluate the effect of Emdogain (enamel matrix derivate) with Collagen Block (Geistlich) in treatment of a Muller class II furcation defect.

MATERIALS-METHODS

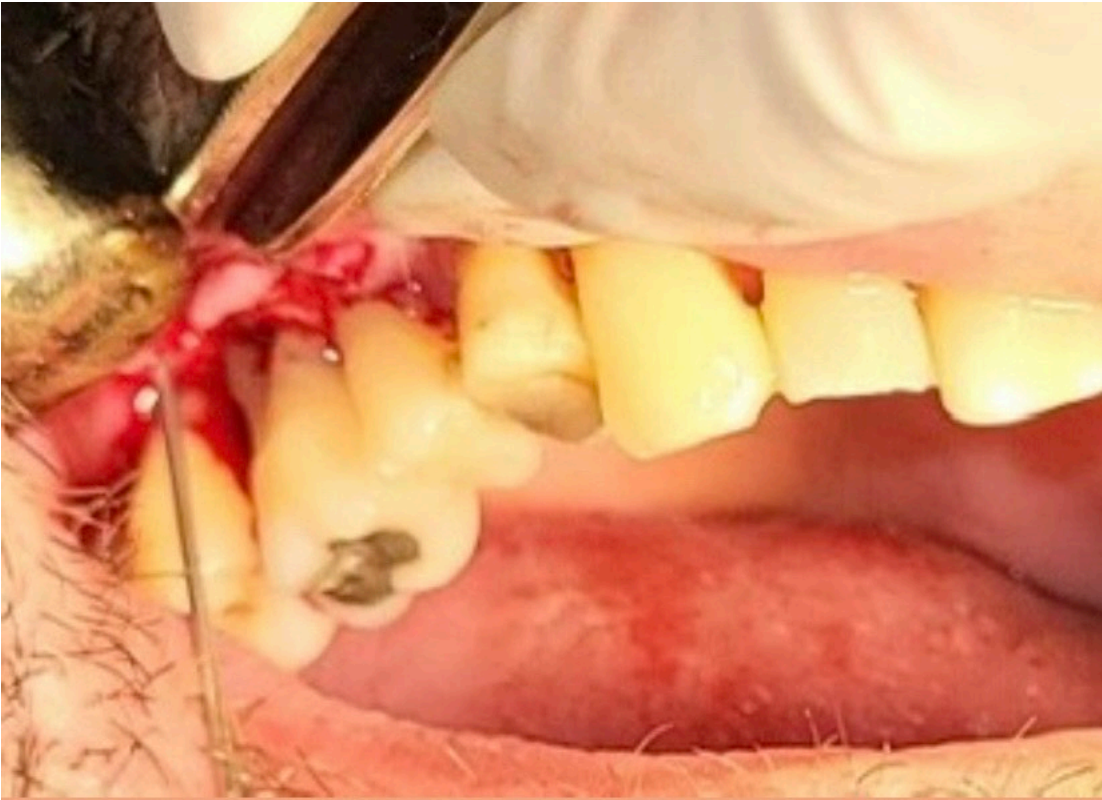
A 51 year old male patient came to the Department of Periodontology and Oral pathology with the chief complaint of bleeding gums. A generalized form of periodontitis has been clinically noted. Intrabony vertical defects in teeth #17, #16 #15 were present. Phase 1 therapy was initiated and the patient was advised to rinse with 0.12% chlorhexidin twice daily for 14 days. Patient was treated with 500mg, Flayyl 400mg) thrice daily with probiotic capsules. After the administration of local anesthesia, mucoperiosteal flap was reflected and thorough debridement of the furcation defect was performed. (Bio-Oss Geistlich) was condensed into the furcation and intrabony defects. Flap was approximated and sutured with 5/0 silk sutures.

COLLAGEN BLOCK APPLICATION



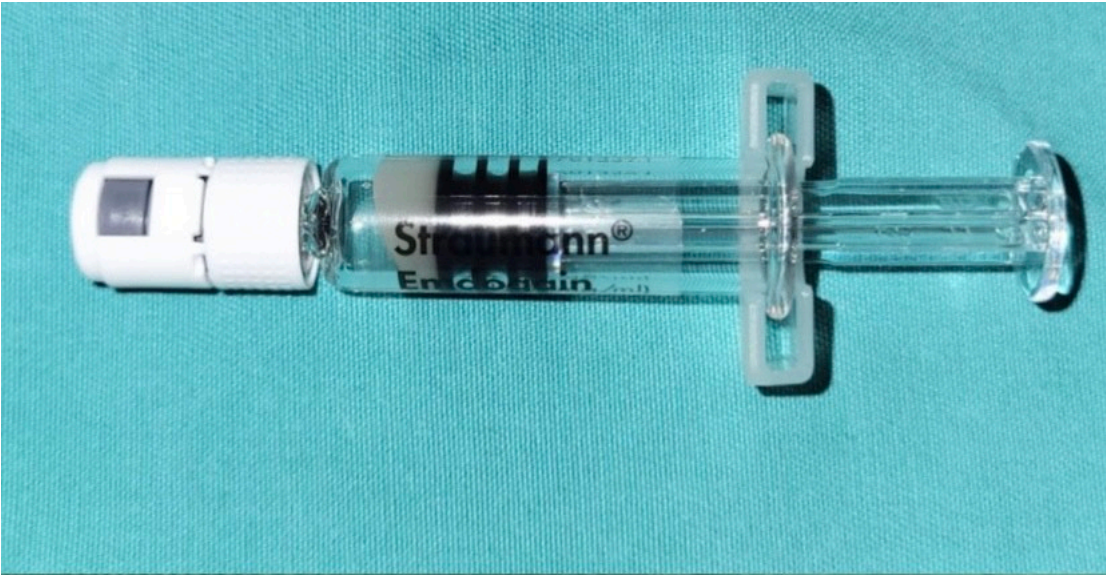
Collagen Block

EMD APPLICATION



EMD application

PERIO SURGERY KIT



PREF GEL APPLICATION



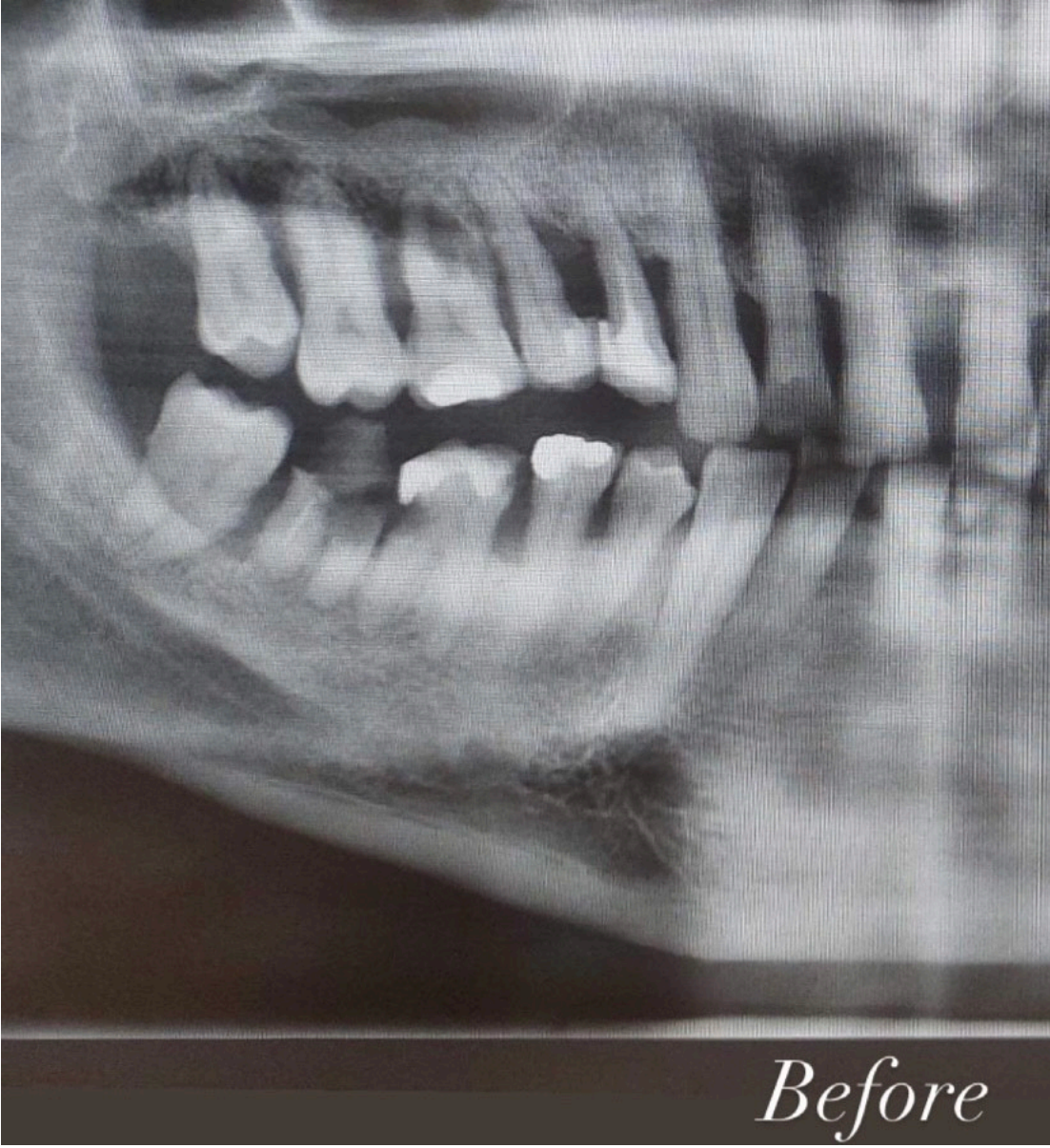
RESULTS

After the surgical treatment patient was instructed to rinse with 10% betadine solution and not to brush and chew from the operated side for 14 days. The patient was recalled after 14 days for depth (PPD), horizontal furcation defect (HFD), and BOP were recorded after 6 months. Healing at the surgical site occurred uneventfully without any complications. There was reduction in all evidence of radiographic bone fill at the end of 6 months.

AFTER 4 MONTHS



BEFORE



CONCLUSIONS

The use of biomaterials as an adjunct in periodontal surgery represents a new and promising potential in the facilitated and effective periodontal treatment. Stimulation and regeneration of the junctional epithelium, demonstration of reduction of infrabony defects and restoration of the anatomical appearance and shape of the supporting alveolar bone attacked during the stages of the disease.

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