



Zucchelli & Sanctis technique with GTR membrane for covering multiple gingival recession

- Case report -

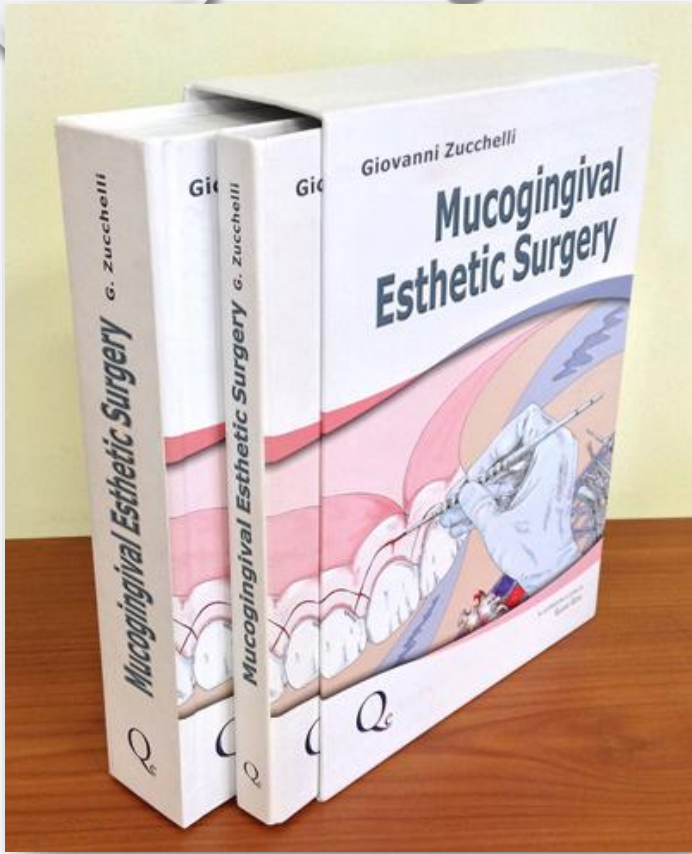


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Introduction

- **Gingival recession is defined as: the distance measured from the marginal gingiva apically to the cement-enamel junction coronal, that lead to exposure of root surface, in addition to being aesthetically unpleasant, and accompanied by hypersensitivity of the same.**





In the literature, there are a large number of etiological and predisposing factors for the occurrence of recession.

A recession can be caused by:

- traumatic injuries (incorrect tooth brushing technique) as well as from destructive periodontal disease**



Other predisposing factors include:

- **incorrect tooth positioning,**
- **dehiscence of the alveolar bone,**
- **thin gingival biotype,**
- **high muscle attachments and**
- **use of piercings in the oral cavity.**

Case report



- **A 68-year-old man presented to the Clinic of Oral Surgery complaining of tooth sensitivity in the left maxillary region for the past 3 months.**
- **Sensitivity is increased during tooth brushing as well as thermal stimuli: ingestion of hot and cold foods.**
- **Clinical examination revealed Miller Class I recession.**

- **The periodontium was healthy and without signs of inflammation on teeth: 21,22,23 to 27.**
- **The cause of the recession is attributed to improper forced tooth brushing combined with teeth with malocclusion due to inadequate size between the teeth and jaw and the existence of traumatic occlusion due to all of this.**



Fig- 1: Pre operative presentation

- **The surgically obtained papillae were rotated towards the ends of the flap and were moved to the prepared de-epithelialized anatomical papillae and sutured with non-absorbable Monamid suture also with 5-0 zeros.**
- **Then, stabilization sutures were placed and secured to the vestibular surface of the teeth with composite.**



Fig- 7: CAF sutured with nonabsorbable Monamid suture with 5-0 zeros.



Fig- 8: stabilization sutures secured to the vestibular surface of the teeth with composite.

Conclusion

- **The goal of periodontal surgery is to cover the exposed root surfaces completely or at least partially, but in our case it should be emphasized that the traumatic occlusion was not removed and therefore we have a recurrence of multiple recession.**
- **Therefore, it should be emphasized that interdisciplinary cooperation and the removal of all causes should be imperative before any surgical intervention.**