The Use Of Allogenous Bone Block Graft Combined With PRP In Reconstruction Of A Bone Defect In The Anterior Maxilla. A Case Report.

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1. Before treatment



3 After crown camentation



2. Healing abutment.



Nine months after crown cementation

Background

Insufficient bone volume is one of the main problems preventing implant treatment. One of the most common causes of bone loss is chronic periapical inflammation which leads to the formation of a cyst. In such cases bone grafting procedures before implant placement are required.

The aim of the study

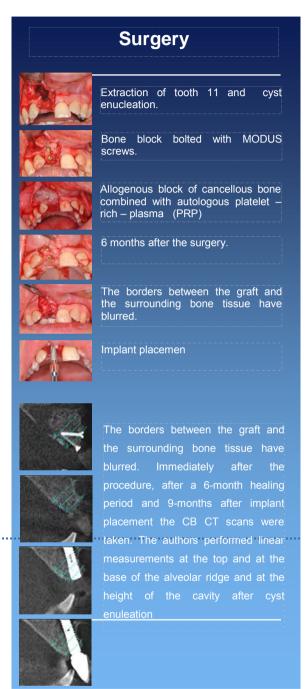
The aim of the study was to evaluate the effectiveness of the use of cancellous bone block allograft in reconstruction of bone defect in the anterior maxilla after extraction and cyst enucleation.

Material and methods

This paper describes the use of allogenous block of cancellous bone combined with autologous platelet-rich plasma - PRP. Immediately after the procedure, after a 6-month healing period and 9-months after implant placement the CB CT scans were taken. The authors performed linear measurements at the top and at the base of the alveolar ridge and at the height of the cavity after cyst enuleation. The allogenous bone block was measured too. All measurements were performed in the sagittal plane.

Results

There was no significant graft resorption after 6 months of the surgery. The resorption does not exceed 1 mm in each measurement, which is consistent with the data available in the literature. There was even a slight increase of the width on top of the alveolar ridge. The borders between the graft and the surrounding bone tissue have blurred.



Conclusions and clinical implications.

A cancellous bone allograft can be used successfully as graft material for the treatment of maxillary ridge defects. This type of bone graft can be used safely in the areas of implant placement as a suitable alternative to autogenous grafts. This procedure appears to be safe and effective for the treatment of localized alveolar ridge defects.