

Adaptação marginal de coroas provisórias de implantes colocados imediatamente após exodontias

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Resumo

A literatura científica descreve bons resultados de osteointegração em implantes dentários colocados em carga imediata através da utilização de coroas provisórias. As diferenças verificadas entre as taxas de sucesso relativas a este tipo de procedimentos estão relacionadas com factores anatómicos (locais de colocação), tipo de soluções protéticas utilizadas, tipo de fixação das soluções protéticas e procedimentos complementares à colocação do implante, como regenerações ósseas ou de tecidos moles.

Com este trabalho pretendemos otimizar uma técnica de adaptação marginal de coroas provisórias imediatas após a colocação de implantes dentários unitários no sector anterior.

Descreve-se um método de adaptação marginal de coroas provisórias aparafusadas sobre implantes unitários, colocados após extracções dentárias, através da utilização de um pilar provisório em plástico, coroas em vinil, resina auto-polimerizável e um modelo em silicone *putty*, utilizado para a adaptação final com compósito *flow*.

Esta técnica possibilita uma boa adaptação dos tecidos moles peri-implantares, uma redução do tempo de tratamento e melhoria na satisfação dos pacientes em relação ao tratamento realizado.

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Nota

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Marginal adaptation in immediate single tooth implants provisional crowns

Background

Literature describes good osseointegration outcomes following provisionalization of single tooth immediate implants in extraction sites (1,2,3,4,5). Good aesthetics results on the same day of the surgical procedures and maintenance of the soft tissue contours are the main advantages of this protocol. Cemented retained, screw retained and friction retained crowns can be used for the provisional restorations (5). The marginal adaptation of the provisional crowns next to the soft tissues margin can be achieved by different ways, always conditioned by the type of chosen provisional restoration (3,4,5).



Fig. 1. Initial intra-oral view.



Fig. 2. Initial x-Ray With fractured tooth.



Fig. 3. Extraction Socket.



Fig. 4. Implant Placement.



Fig. 5. Adaptation of the temporary abutment.



Fig. 6. Plastic crown and plastic temporary abutment.



Fig. 7. Provisional crown before marginal adaptation.



Fig. 8. Silicone putty Model.

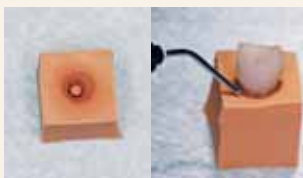


Fig. 9. Adaptation With flow composite.



Fig. 10. Marginal Adaptation of provisional crown.

Clinical Report

We describe a method for improving marginal adaptation of screw retained provisional crowns in immediate implants. It was used a temporary implant abutment, a polycarbonate crown (Fig. 6) and final adaptation with flow composite was achieved by an indirect placement using a silicon putty model, a copy of the zirconia abutment, used for the final restoration. (Fig. 8). The marginal adaptation of the provisional crowns next to the soft tissues margin was achieved by the curing of the flow composite (Fig. 9). Same day provisional crown stayed in mouth during 12 weeks (Fig. 12). The final restoration was achieved by the use of a ceramic crown and a zirconia abutment.



Fig. 11. Implant with provisional crown.



Fig. 12. Same day provisional crown.



Fig. 13. Soft tissue adaptation (12 weeks after placement).



Fig. 14 and 15. Implant with zirconia abutment.



Fig. 16. Final Restorations 1 year after placement.

Conclusions

This technique offers a good soft tissue adaptation, a reduction of treatment time and an improved degree of satisfaction for the patients.