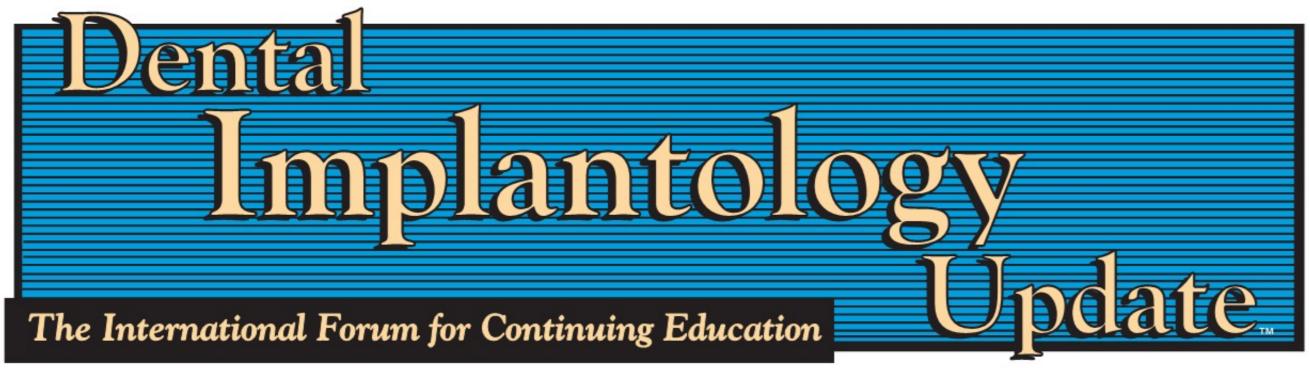


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Principles of Flap Design in Dental Implantology

By Mohammed JA, BDS, MSc, SHAIFULIZAN ABR, DDS, MD, Hasan FD, BDS, MSc

THERE IS NO SINGLE FLAP DESIGN THAT SERVES AS THE OPTIMAL APPROACH FOR EVERY ▲ implant surgery,¹ and as the need for cosmetic procedures with minimally invasive techniques increases, so, too, does the variability in flap design. In other words, there is no single technique that is suited to every surgical situation, and the skilled surgeon must be thoughtful and creative in selecting every incision since the manner in which that incision is designed, executed, and sutured will have an enormous impact on implant success rates and overall aesthetic outcome. The site of implant placement, whether it is in the aesthetic zone or hidden posteriorly, also has an impact on the flap design. Another factor to consider is the width of the ridge in which the implant is placed. Some ridges are wide enough to place an implant with minimal tissue reflection, while other ridges are narrow and require wide flap reflection for better visualization and ridge width determination. Further, narrow ridges sometimes need bone augmentation and guided bone regeneration membranes, which necessitate planning for wide flap design to cover the bone graft and the membrane. This article discusses the principles of flap design in dental implantology in an effort to summarize techniques to aid practitioners with optimal procedure selection.

Principles

<u>Principle 1</u>: New scalpel blades and sharp peri-osteal elevators are essential for making incisions and elevating flaps to protect the viability of the mucosa. The incision should be made clearly in order to avoid retracting, and elevation requires flawless use of a dedicated peri-osteal elevator.²

Principle 2: Full visibility of the operative site is essential. It has been sug-

gested that the incision be made longer than the amount required to expose the operative site. This offers greater visibility of the bone. It should be pointed out that long incisions heal as rapidly as short ones.² (See Figures 1,2.)

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Class 2 English Merigold Books in PDF. Silverstein playfully captures that sentiment in the classic poem, "Sick. Hey friends this poem is an inspirational PDF | For optimal postsurgical wound healing, non-tension primary wound closure of various soft tissue flaps must be established. Surgical procedures.

автор: S Akifuddin · 2014 · Цитируется: 3 — Kurtzman GM, Silverstein LH, Shartz. PC, Kurtzman D. Suturing for surgical success. Dentistry 2010;2(3):1-3. 2. Kim JS, Shin S, Herr Y 1 нояб. 2016 г. — Lee H. Silverstein, D.D.S., M.S., F.A.C.D., F.I.C.D. ... Suturing Course, Alabama Implant Conference, April 1992.. A1. Page 6. Introduction. Depending on the tissue, the healing process, and the surgical technique and objective, the surgeon will have to choose a suture whose braided sutures are best for knot security, although variations are based on ... http:// www.jnjgateway.com/public/USENG/Ethicon_WCM_Feb2004. pdf Harrison Dr Silverstein is the author of the highly acclaimed textbook entitled "Principles of Dental Suturing: A Complete Guide to Surgical Closure" and has just ... He найдено: Pdf | Запрос должен включать: Pdf

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