



SPAZIO CLINICA – PREMIO “G. VOGEL”

Surgical treatment of gingival recession in patient with periodontal disease

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Localised periodontitis (9 sites out of 68 with PD greater than 4mm) Grade 3, Stage B (Bone loss/Age =1) in a 41 years old female patient, non-smoker, with local risk factors (tartar), in absence of predisposing systemic factors. FMBS 24% FMPS 33%; 5 sites with furcation involved (4 of 1st, and 1 of 2nd)Gingival recession without associated severe attachment loss at the inter proximal surfaces in a patient with a thin phenotype.Deep abrasion defects are associated with gingival recessions on teeth 1.4, 1.3, 2.3, 2.4.RT1/RT2 Class B + and Class A- recessions.(World Workshop on the Classification and Peri-implant Diseases and Conditions, 2017 Chicago, USA).

Instructions for oral hygiene to control gingival inflammation and avoid traumatic tooth brushing to prevent the progress of recessions.Eliminate local risk factors with casual related therapy for the control of periodontal disease. (Reduction of periodontal inflammation indices and elimination of periodontal pockets > 4mm BOP+). Treatment of the recessions-of 1.2, .1.3, 1.4 and 2.2, 2.3, 2.4, for patient’s aesthetic demands, with root coverage surgical procedure after conservative restorative treatment of the CEJ.

Four session of casual therapy by dental hygienist (Supragingival dental biofilm control and subgingival instrumentation) with periodontal reevaluation at 8 weeks, by the dentist.Handling of the abrasion area by means of an esthetic restoration, before surgical treatment, for restoration of CEJ. (1.3, 1.4, 2.2, 2.3, 2.4) (Zucchelli, G., Testori, T., De Sanctis, M., 2006).Thereafter surgical treatment of multiple recession by means of envelope-type of coronally advanced flap (Zucchelli & DeSanctis 2000) in combination with a CTG. Finally the patient was included in a tailored supportive periodontal care.

Reduction of inflammatory pockets and indices (FMBS) and (FMPS) after cause related therapy (Stable periodontitis patient with gingival healthy on a reduced periodontium). About root surgical coverage after 24 months of follow-up:in the first quadrant CRC on teeth 1.3, 1.4 and 50% RC on teeth 1.2; in the second quadrant CRC on, 23, 24, and 90 % RC on teeth 2.2