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Can alveolar ridge be completely preserved by socket shield technique? a case report

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Introduction: Tooth extraction is usually followed by partial resorption of the residual alveolar ridge. Different techniques such as ridge preservation procedure have been proposed to maintain the ridge dimension. However, applying these methods to extract sockets could not completely preserve the coronal parts of facial bone walls, which were comprised almost entirely of bundle bone.

Case report: A 45-year-old woman with non-contributory medical history presented to our clinic with non-restorable tooth #23, who doesn't have any periapical or periodontal pathology. After clinical and radiographical assessment, computed tomography (CBCT), indicated insufficient width of buccal bone plate. Therefore, socket shield technique (SST) was planned for simultaneous immediate implant placement (Straumann 4.1x12 RN) with immediate provisionalization crown. Initial follow up after 2 weeks, then after 2 months final restoration by screw-retained crown inserted. After 6 and 12 months of loading follow up by using CBCT, for evaluation bone remodeling and clinical evaluation of soft tissue changes around implants.

Results: Two weeks follow up revealed the healing was uneventful, and after 6 and 12 months the clinical and CBCT revealed, that retaining root fragment adjacent to the buccal crestal bone and placing an implant engaged to the palatal

socket wall immediately are able to maintain the contour of the ridge. And the implant can achieve osseointegration without any inflammation at peri-implant tissue and also soft tissue contour preserved.

Conclusion: After one year follow up, SST prevent soft and hard tissue changes which can happen during healing of alveolar socket after tooth extraction. However, the use SST as routine clinical practice still needs to higher level of evidence.

Biography

Hassan H Koshak is a Consultant in Periodontics and Implant Dentistry. He is the Head of the Dental Department and Dental Educator, Director of Academic and Education Affairs at Comprehensive Specialized Polyclinic, Ministry of Interior Security Forces Medical Services, Jeddah, Kingdom of Saudi Arabia, where he has been working since 2016. He received a Saudi Fellowship in Dental Implant from the Saudi Commission for Health Specialties from 2014-2016. He received a Saudi Board in Periodontics from the Saudi Commission for Health Specialties in 2012-2014. He has completed his Master of Science in Dentistry (MSD) and a Clinical Certificate in Periodontics at Riyadh Colleges of Dentistry and Pharmacy from 2009-2012, Riyadh, KSA; Advanced Education in General Dentistry (AEGD) at University of South California, School of Dentistry from 2006-2008 and; Bachelor of Dental Medicine and Surgery (BDS) in the Faculty of Dental Medicine and Surgery at King Abdul-Aziz University, Jeddah, KSA.

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