CLINICAL CASE

Grand Morse
Neodent Grand Morse

Total Inferior Rehabilitation with Grand Morse Implants.

**Patient’s Medical History**
Patient has had full upper and lower prosthesis for over 50 years, came to the clinic due to lack of stability of full lower prosthesis and she was feeling twinges in the posterior region of the mandible on both sides when chewing and had great difficulty chewing.

**Planning**
- Full Arch.
- Immediate Loading Protocol.
- With Flap Access Technique.

**Description of the Procedure**
Infiltrative anesthesia administered in the region of the mental foramen and lingual infiltration supplement on both sides L and R, marking in the proximity of the mental foramen on both sides with a copying pencil to limit the extension of the incision.
Total flap and detachment to locate the mental foramen on both sides L and R. Conventional bone drilling sequence, without sub-instrumentation. First, placement of inclined implants in the region of 34 and 44 and then implant placement in the region of 32 and 42.
All implants surgically placed with 45 N.cm
- 32 and 42 - GM Helix Acqua implants of 11.5 mm
- 34 and 44 - GM Helix Acqua implants of 13 mm

**Prosthetic Description**
Placement of GM Mini Conical Abutments of 3.5 mm and fitting with multifunctional guide joined to the impression components with pattern acrylic resin and added silicone.

**Result description and/or conclusion**
After 6 months of clinical and radiographic monitoring, the patient is satisfied and has recovered her masticatory function.
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1. Initial photo with Prostheses
2. Initial photo without Prostheses
3. Initial scan of mandible showing emergence of the mental foramen on the ridge side L and R
4. Reverse plan
5. Multifunctional Guide
6. GM Acqua implant
7. GM Mini Conical Abutment
8. Transfer impression
9. Immediate post-surgery
10. Final clinical view
11. Final X-ray