

More than pure esthetics.

The natural and strong solution.

Case Report: Straumann® PURE Ceramic Implant

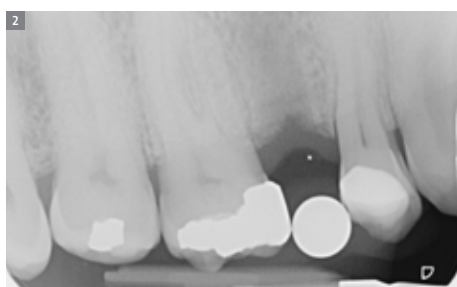
Ross Cutts

With the launch of the Straumann® PURE Ceramic Implant, we now have an all-ceramic implant solution, engineered and manufactured to Straumann's exacting standards. It enables patients to choose a metal-free solution that is now compatible to industry standard solutions. This one-piece ceramic implant features the combined design of a tissue level implant with the bone level thread which allows existing users of the Straumann® Dental Implant System peace of mind in regard to the surgical placement technique. The presence of the abutment in the one-piece design allows for ease of fabrication of the prosthetic solution, too. The harmony between the biocompatible ceramic implant and the hard and soft tissues allows for a very natural esthetic solution.

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INITIAL SITUATION

This 48 year old female patient was referred to replace the previously root treated and now coronally fractured tooth 15 (Fig. 1). Radiographic examination revealed a chronic area of pathology (Fig. 2). The tooth was extracted and extensive curettage of the socket was completed (Fig. 3).



SURGICAL PROCEDURE

4 months post-extraction, a crestal full thickness mucoperiosteal flap incision was raised to reveal the healed site (Fig. 4). The drill protocol was followed and with the use of the alignment pin (Fig. 5) and position indicator (Fig. 6), the Straumann® PURE Ceramic Implant was inserted (Fig. 7). The fixture was countersunk slightly to ensure that the buccal and palatal walls of the

implant remained within the autogenous bony envelope. The PEEK healing cap was then placed (Fig. 8) and the flap sutured closed mesial and distally. The fixture had excellent primary stability and angulation. The white PEEK protective cap was placed to allow simultaneous soft and hard tissue healing during the osseointegration phase (Fig. 9).

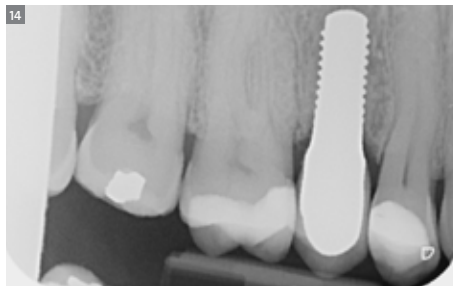




PROSTHETIC RESTORATION

Approximately 10 weeks after implant placement, the impression post was placed and a conventional closed tray impression technique was used to capture the emergence profile with a polyvinyl silicate impression material (Fig. 10). Standard crown and bridge

fabrication techniques were employed to make an all-ceramic restoration (Figs. 11–13). The post-operative radiograph shows a perfect solution (Fig. 14).



CONCLUSION

The use of a one-piece Straumann ceramic implant provides an ideal functional and esthetic outcome. At last patients can choose a metal free solution that is comparable to the well proven conventional titanium implants.

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