

Implant solution for severe anterior atrophic ridge to avoid placement

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Until now, there have been many difficulties in placing an anterior implant with atrophied alveolar bone. Because the atrophic residual ridge in the anterior teeth is low and thin due to the loss of alveolar bone, it is not easy to place and maintain implants in the usual way, so it is often not possible to place implants in the incisors. It is common to make Even in cases where anterior teeth can be placed, esthetics must be considered through concurrent procedures that can restore bone volume, such as GBR or bone argumentation. Another problem with these cases is that they are more difficult than standard implant treatment and require a longer recovery period, which increases the financial and psychological burden on the patient. Due to the nature of implant treatment with a high proportion of elderly patients, the burden felt by patients is much greater and it is not easy to obtain consent. From the operator's point of view, the burden of maintenance problems after implantation increases.

AnyRidge incisor (hereinafter referred to as ARi), a new solution that overcomes this, is an alternative to atrophic ridge, while it can significantly lower the burden on patients and operators due to its simple surgical protocol and low cost. Unlike existing implants, ARi, which presents completely new attempts and solutions, obtains strong fixation from the basal bone below the alveolar bone without bone volume recovery, so there is no risk of bone loss and stable maintenance is possible. In addition, the rough surface of the fixture for fixation is located deep below, significantly lowering the possibility of being exposed to oral bacteria, thereby preventing common and chronic peri-implantitis.

In this lecture, we will introduce ARi's new system that provides a solution for severe anterior atrophic ridges that have avoided implant placement, and introduce the placement method and patient's dental improvement and satisfaction through several cases experienced by the surgeon.

Profile

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