Case 3 - The implant in position 3.3 was lost because of residual infection and replaced by a 3mm l 13mm UNO implant after 2 months. During this period the other implants received a resin provisional restoration. 2X 4,2mm L6.

Fig. 12 Case 3 - Panoramic x-ray after insertion.
Fig. 13 Case 3 - Panoramic x-ray after insertion.
Fig. 14 Case 3 - Panoramic x-ray after insertion.
Fig. 15 Case 3 - Panoramic x-ray after insertion.

Intraoral x-ray at 6 months after bridge fixation. See the direction of the mandibular nerve.

The Use Of 6mm Long Implants In Cases With Limited Bone Height: A Preliminary 6-Month Clinical Study
Clinical case presentation: Case 1

Fig. 1 Case 1 - Intraoral view before implant placement.

Fig. 2 Case 1 - Intraoral view after implant placement.

Clinical case presentation: Case 2

Fig. 3 Case 2 - Intraoral view before implant placement.

Fig. 4 Case 2 - Intraoral view after implant placement.

Clinical case presentation: Case 3

Fig. 5 Case 3 - Intraoral view before implant placement.

Fig. 6 Case 3 - Intraoral view after implant placement.


table of contents

Clinical case presentation: Case 1

Fig. 1 Case 1 - Intraoral view before implant placement.

Fig. 2 Case 1 - Intraoral view after implant placement.

Clinical case presentation: Case 2

Fig. 3 Case 2 - Intraoral view before implant placement.

Fig. 4 Case 2 - Intraoral view after implant placement.

Clinical case presentation: Case 3

Fig. 5 Case 3 - Intraoral view before implant placement.

Fig. 6 Case 3 - Intraoral view after implant placement.


table of contents

Clinical case presentation: Case 1

Fig. 1 Case 1 - Intraoral view before implant placement.

Fig. 2 Case 1 - Intraoral view after implant placement.

Clinical case presentation: Case 2

Fig. 3 Case 2 - Intraoral view before implant placement.

Fig. 4 Case 2 - Intraoral view after implant placement.

Clinical case presentation: Case 3

Fig. 5 Case 3 - Intraoral view before implant placement.

Fig. 6 Case 3 - Intraoral view after implant placement.
The Use Of 6mm Long Implants In Cases With Limited Bone Height: A Preliminary 6-Month Clinical Study

Olimpiu Lăkarancic, Radu Sîla, Emanuel A. Bratu

Background
Limited bone height limits the use of standard length implants. Short implants may be used in such cases to avoid the need for bone grafting and bone augmentation procedures. The purpose of this study was to evaluate the clinical performance of short implants in reduced bone conditions. The hypothesis was: “Short implants in reduced bone conditions are a viable solution for the use of stand-alone implants.”

Methods

Subjects - Twenty-three implants were placed in 11 patients in different clinical situations. They were inserted in the maxilla and mandible, and all patients were treated according to the manufacturer instructions. The implants were followed-up for 6 months after insertion.

Surgical Procedure
The implants were inserted using the manufacturer’s instructions. All implants were used in combination with longer implants to avoid the need for bone grafting.

Results
All implants showed good primary stability at insertion. None of the implants were immediately loaded. None of the implants were lost during the follow-up period. All implants were loaded with fixed partial dentures. All 6 mm implants were splinted to neighboring implants. None of the implants were lost during the follow-up period. All implants were loaded with fixed partial dentures. All 6 mm implants were splinted to neighboring implants. None of the implants were lost during the follow-up period.

Conclusion
Within the limitations of this preliminary study, it can be concluded that short implants are a viable treatment option for the use of stand-alone implants.

References
2. Davarpanah Mithriadade, Jalbout Ziad Implant Dentistry: Follow-up of Osseotite(R) Implants Goené Ronnie, Bianchesi Maria Grazia, 2006 May; 14:3(1):15-21; Published Online: 16 Feb 2007

Clinical case presentation: Case 1

Clinical case presentation: Case 2

Clinical case presentation: Case 3

Clinical case presentation: Case 4

Clinical case presentation: Case 5
The Use Of 6mm Long Implants In Cases With Limited Bone Height: A Preliminary 6-Month Clinical Study

Olimpiu Lăkaranci, Radu Stăță, Emanuel A. Bratu

Background

Limited bone height limits the use of standard length implants. Short implants are used as an alternative for lengthening, and experience indicates that short implants may support prosthetic restorations adequately but still clinical documentation is sparse. The purpose of this study was to assess the clinical performance of short implants in reduced bone conditions. The hypothesis was: “Short implants are a viable solution for the use of limited bone height.”

Materials And Methods

Study was approved by the Research and Ethics Committee at the University of Medicine and Pharmacy Timisoara Romania.

Subjects - Twenty three implants were placed in 11 patients in different clinical situations. The patients were males and females with ages ranging from 25 to 72 years. All patients were healthy and with good oral hygiene, but smoking was not an exclusion criterion. Twenty three 6mm implants (Seven, MIS Implants, Bar-Lev, Israel) diameter 4,2mm, and cortical bone. In the maxilla, the final drill was performed using the drill provided with the implant. Final drilling diameter and depth of the 6 mm implant was left stand alone. None of the implants were immediately loaded. After 3 months of subgingival healing the implants were tested. The implants were followed for 6 months after loading. All the loaded implants were splinted with full partial dentures, either among themselves or in standard sized standard implants or to each other. None of the implants inserted were splinted to neighboring implants. None of the loaded implants were splinted to neighboring implants. All 6 mm implants were loaded with fixed partial dentures. All 6 mm implants were splinted to neighboring implants. The implants were followed for 6 months after loading. None of the implants were immediately loaded. All the loaded implants were splinted with full partial dentures, either among themselves or in standard sized

Results

All patients showed good primary stability at insertion. No implants were lost during the healing period. Prior to loading, all implanted implants presented slight mobility. None of the implants were placed in the mandible. In addition, bone loss was measured preoperatively and at the end of the study. In all patients, there was no bone loss measured postoperatively. Any space more than 5 mm, excluding peri-implantitis was noticed. However, patients with thick peri-implant tissue presented smaller probing depths compared to implants in a clinical state with this soft tissue.

Conclusion

Within the limitations of this preliminary study, it can be concluded that short implants are a viable treatment option when splinted, as stand-alone implants, there are sufficient arguments in favor of implant mechanical stability. Further investigations need to be considered in the areas of hypothesis testing and comparison of clinical results measured in the maxilla and for the mandible for type I and II bone classes.

References

Make it Simple

News No. 26 January 2011

The Use Of 6mm Long Implants In Cases With Limited Bone Height: A Preliminary 6-Month Clinical Study

Fig. 13  Case 3 - The implant in position 3.3 was lost because of residual infection and replaced by a 3mm L13mm UNO implant after 2 months. During this period the other implants received a resin provisional restoration. 2X 4,2mm L6.

Fig. 14  Case 3

Fig. 15  Case 3

Fig. 16  Case 3 - Intraoral x-ray at 6 months after bridge fixation. See the direction of the mandibular nerve.
The Use Of 6mm Long Implants In Cases With Limited Bone Height:
A Preliminary 6-Month Clinical Study

Fig. 12  Case 3 - Panoramic x-ray after insertion.

Fig. 13  Case 3 - The implant in position 3.3 was lost because of residual infection and replaced by a 3mm L13mm UNO implant after 2 months. During this period the other implants received a resin provisional restoration. 2X 4, 2mm L6.

Fig. 14  Case 3

Fig. 15 Case 3

Fig. 16  Case 3 - Intraoral x-ray at 6 months after bridge fixation. See the direction of the mandibular nerve.