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Evaluation of maxillary sinus floor elevation using the balloon technique

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Aim of this study: Evaluation of maxillary sinus floor elevation using the balloon technique.

Patient & Methods: Eight maxillary sinuses in seven patients were elevated using the balloon technique through lateral approach using piezoelectric surgical tips. All sinuses augmented with silica tri-calcium phosphate granules. After 6 months implants were placed and followed up for another 6 months. Clinical and radiographic assessments were done preoperatively, 6 months post-grafting and 6 months post-implant placement.

Results: Patients were 4 females and 3 males. Mean age was 44.3 year. Significant increase in mean bone height at 6 months post-grafting reached 12.37 mm as compared to preoperative mean bone height that was 2.92 mm. Non-significant increase in Schneiderian membrane thickness did occur before implant insertion. None of the studied cases did show any sign or symptom of maxillary sinusitis. Two of the eight studied cases showed small tear in the membrane lining that repaired using resorbable collagen membrane.

Conclusions: Lateral approach offered good accessibility and visibility of the sinus cavity, balloon lifting technique proved to be safe with minimal complications and provide sufficient bone height gain adequate for implant placement.

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Soft tissue grafting techniques for root coverage

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The purpose of this presentation is to give the clinician an overview of the various soft tissue grafting techniques that one would use to achieve root overage. Root coverage has become a very predictable procedure in recent times. Not only that, but there are different types of donor tissue available as well. One has a choice now between an autogenous graft versus an allograft. Even the allograft has more than one source. That is why it is imperative not only to understand the different indications for treatment, but also which donor tissue would achieve the better outcome. It is no longer a 'one size fits all situation'. Not only should the clinician be aware of the differences, but the patient must also be made aware of the differences. Some patients have very definite feelings about which tissue should be used for their treatment.

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