Bone augmentation in preprosthetic surgery

Dr. Sándor Bogdán

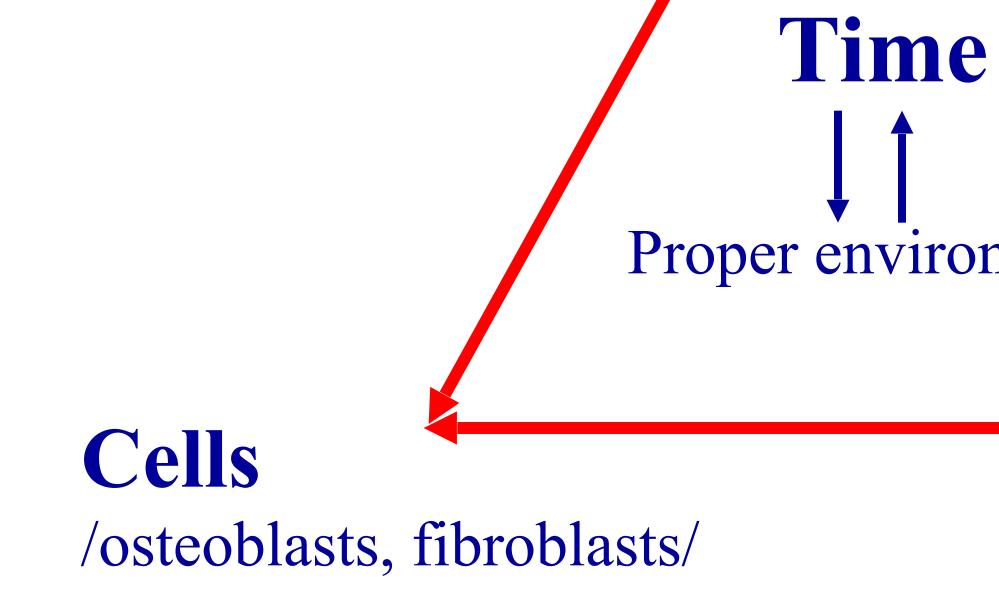
Implant therapy

- In the past
 - Only in case of ideal anatomical circumstances
 - <u>contraindication: bone-</u>
 - defect

- Present concept
 - The extention of bone defect do not contraindicate the setting of implans
 (in 40%- of the cases previous bone
 - augmentation)

Important factors of bone formation

Matrix /collagene, trabecular pattern, bone substitutes/



Proper environment

Growth factors /BMP, PDGF, TGF- β , IGF/

Factors influencing bone formation

• Osteoinduction: All processes involving the activation of bone formation

• Osteoconduction: Proper framework, wich determins and ensures the 3D guiding of bone

• Osteogenesis: osteogenetic potention

Autogenous bone

-Osteogenetic, osteoinductive, osteoconductive properities

-Gold Standard- of the bone substitute materials

Healing procedurde of transplanted bone

- Local hyperaemia
- A number of osteoblast survives on the surface of the transplant with diffusion
- Angiogenesis- cappillary invasion into the matrix (providing necessary factors and cells for osteogenesis)
- Osteoclasts- they results from the beginning the resorption of the transplant from the periphery
- Continuous competition between the bone formation and the invasion of connective tissue



Autogenous graft types

- Spongious-, cortical bone or booth
- Bone formation by enchondral ossification (tibia, hip bone)

Bone formation by desmoid ossification (skull, jaws)

Autogenous graft types

Bone formation by desmoid ossification

Bone formation by enchondral ossification (tibia, hip bone)

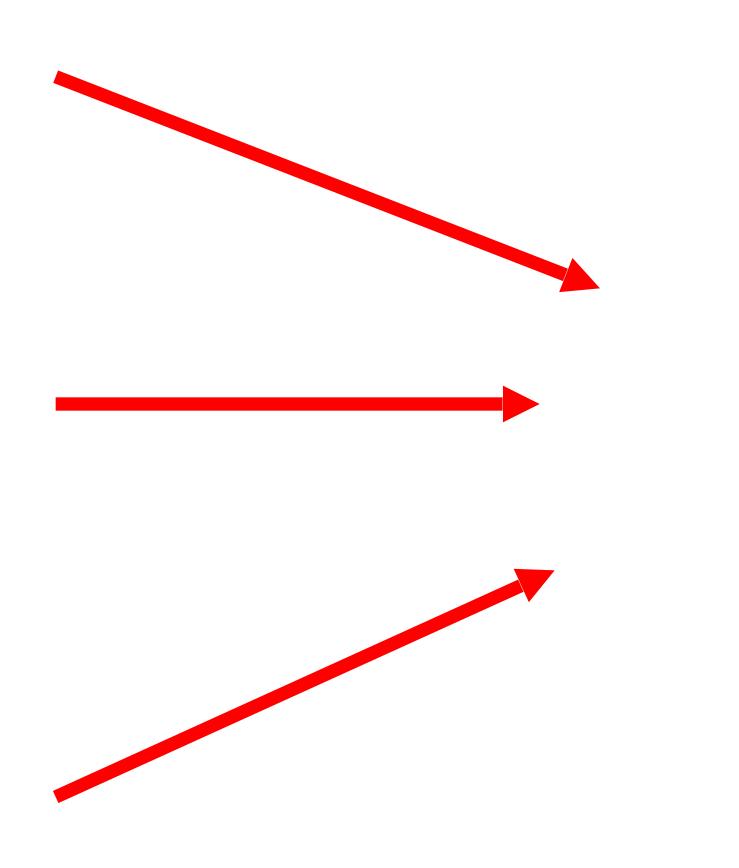


• Spongious bone

• Cortical bone

• Spongious and cortical bone

Autogenous graft types



Grafting of the jaws

lateral augmentation

vertical augmentation

sinus floor grafting

- mentum (symphysis mandibulae)
- retromolar area
- maxillary tuber
- zygomatic bone

Intraoral donor sites

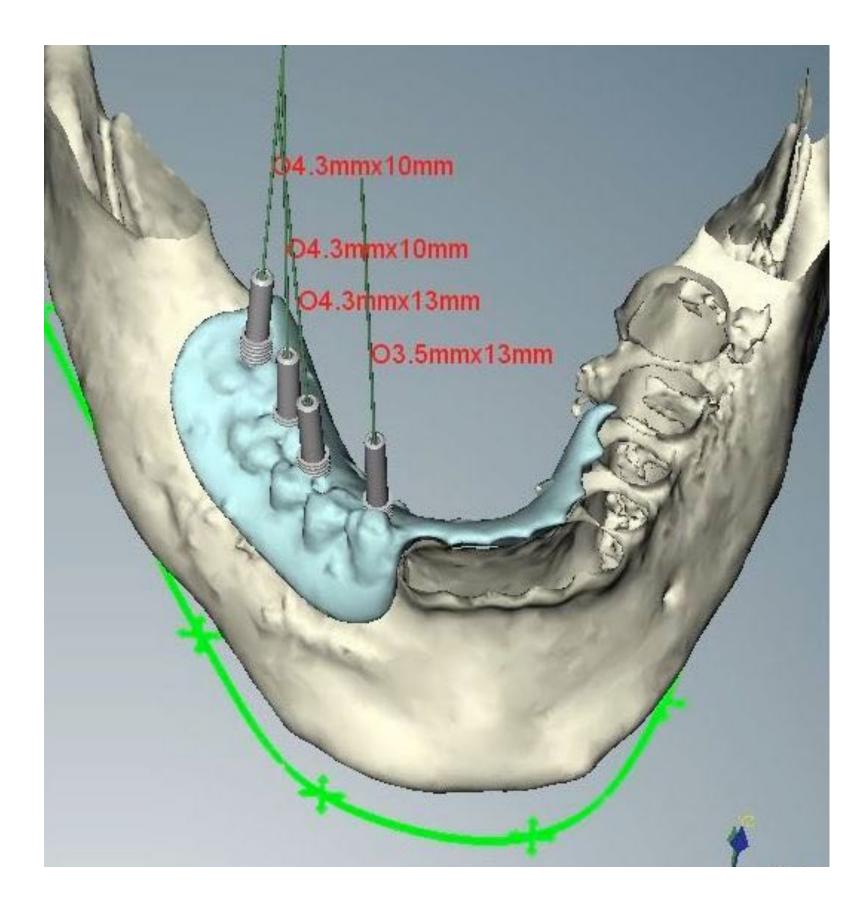
Mentum (symphysis mandibulae)

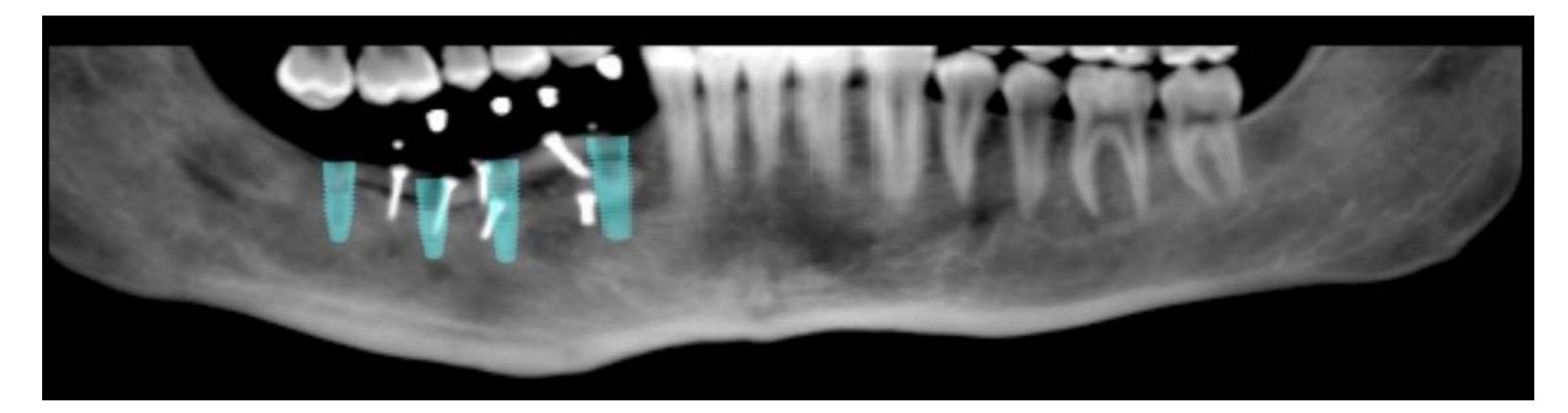
exploration of the chin

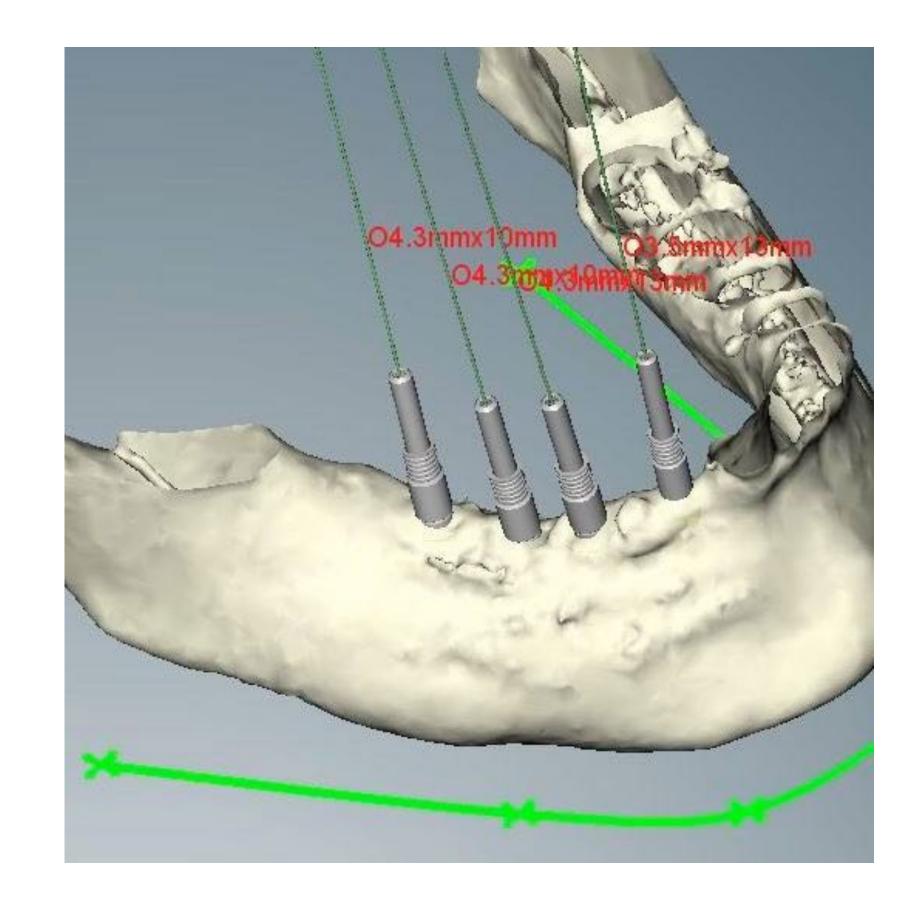
Retromolar area

Retromolar area

Bone harvesting from the retromolar area







Extraoral donor sites

• iliac crest (anterior, posterior)

• calvaria

• proximal epyphysis of the tibia

Iliac crest

- The most common (reference) donor site
 - Advantage: ,,unlimited" graft volume
 - spongious and cortical bone
- **Disadvantage**: second operation site
 - the most frequent donor site morbidity
 - enchondral ossification
 - high rate of resorption (even 40-60 %)
 - intratracheal narcosis
 - maxillofacial surgical background

The proximal epyphys of Tibia

- Advantages: minimal invasive exploration
 - 20- 25 cm³ spongious bone
 - minimal postoperative complain
- Disadvantages: second operation site
 - only spongious bone
 - maxillofacial surgical backround

Calvaria

- -favourable cosmetic result Advantages:
 - dense desmal bone
 - low resorption rate
 - minimal postoperative complaint
 - second operation site
 - donor site morbidity at "unfavorauble" spot
 - only cortical bone
 - intratracheal narcosis
 - maxillofacial surgical backround

Disadvantages: