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PRINT ISSN: 0040-8891

The Bulletin of Tokyo Dental College

Vol. 48 (2007), No. 2:87-91



Dental Implant Treatment with Different Techniques for Sinus Floor Elevation-A Case Report

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(Received October 27, 2006) (Accepted June 20, 2007)

Abstract: A 60-year-old man with missing maxillary molar teeth received dental implant therapy for reconstruction of occlusion. Sinus floor elevation with autogenous bone graft consisting of iliac bone block and particulate cancellous bone and marrow (PCBM) was performed in the bilateral maxillary sinuses for implant placement. On the right side, bone height in the molar region was less than 2mm. Therefore, a delayed protocol was applied, and 2 implants were placed 4 months after bone grafting. Bone graft resorption occurred during the healing period of 4 months. On the left side, 3 implants were placed simultaneously with sinus floor elevation, as bone height in the molar region was more than 4-5mm. The bone graft was carried out at the same time as implant placement. After implant placement, resorption of the bone graft stopped, and the superstructures were delivered on both sides. The tissues around the implants were clinically healthy at one year after examination. Sinus floor elevation with autogenous bone graft is an acceptable option for implant treatment in the maxillary molar region where there is adequate height of existing bone. In postoperative care, it is important to undertake adequate follow-up to ascertain occurrence of bone graft resorption.

Key words: Dental implant treatment, Sinus floor elevation, Implant placement timing,



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To cite this article:

Hideshi Sekine, Tatsuo Taguchi, Shuichi Seta, Masayuki Takano, Takayuki Takeda and Takashi Kakizawa: "Dental Implant Treatment with Different Techniques for Sinus Floor Elevation-A Case Report". The Bulletin of Tokyo Dental College, Vol. **48**: 87-91 (2007) .

doi: 10.2209/td c publication. 48.87

JOI JST.JSTAGE/tdcpublication/48.87

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