



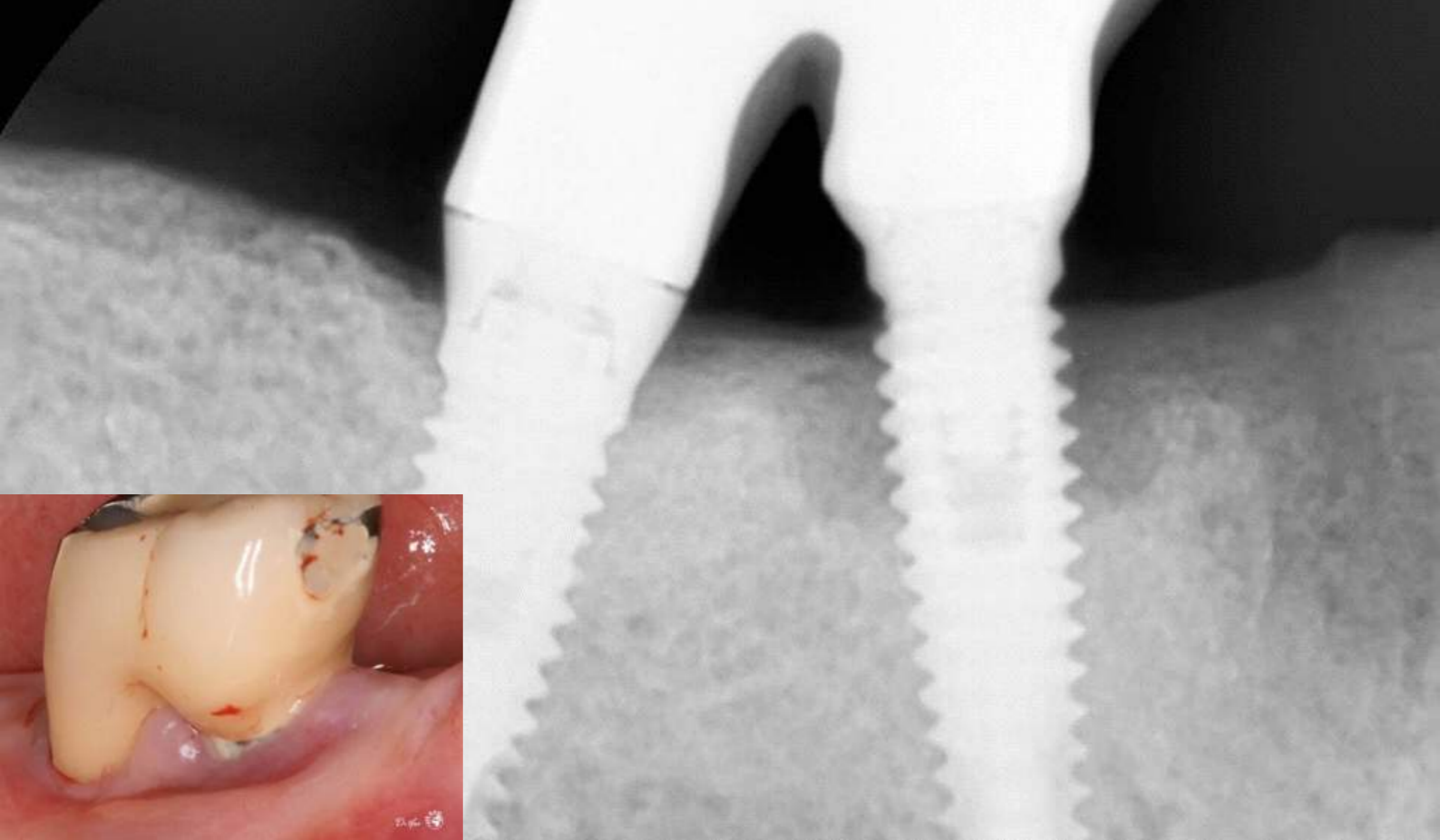
Management of an advanced peri-implantitis

Clinical case (Case presentation & Movie)

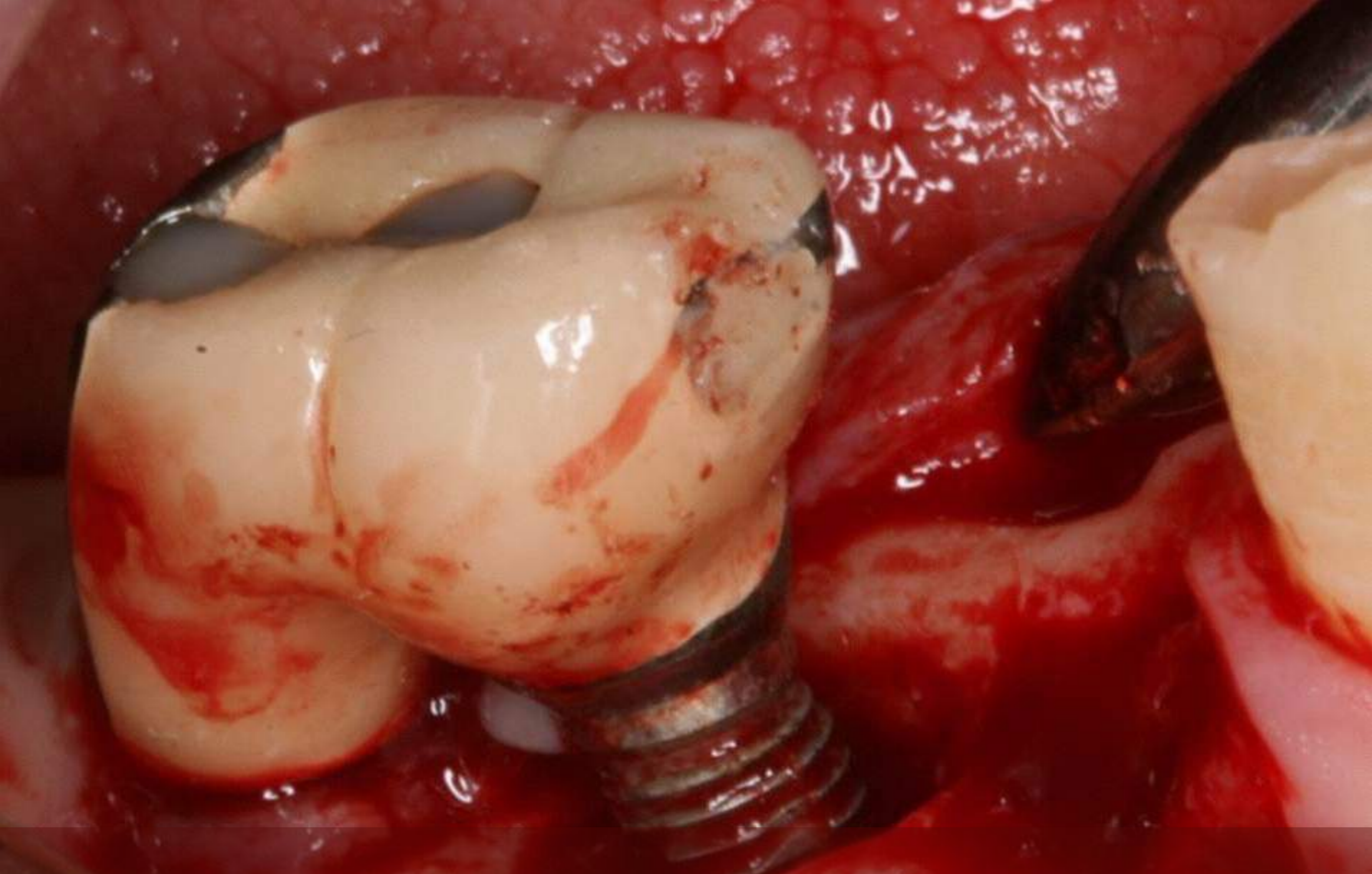
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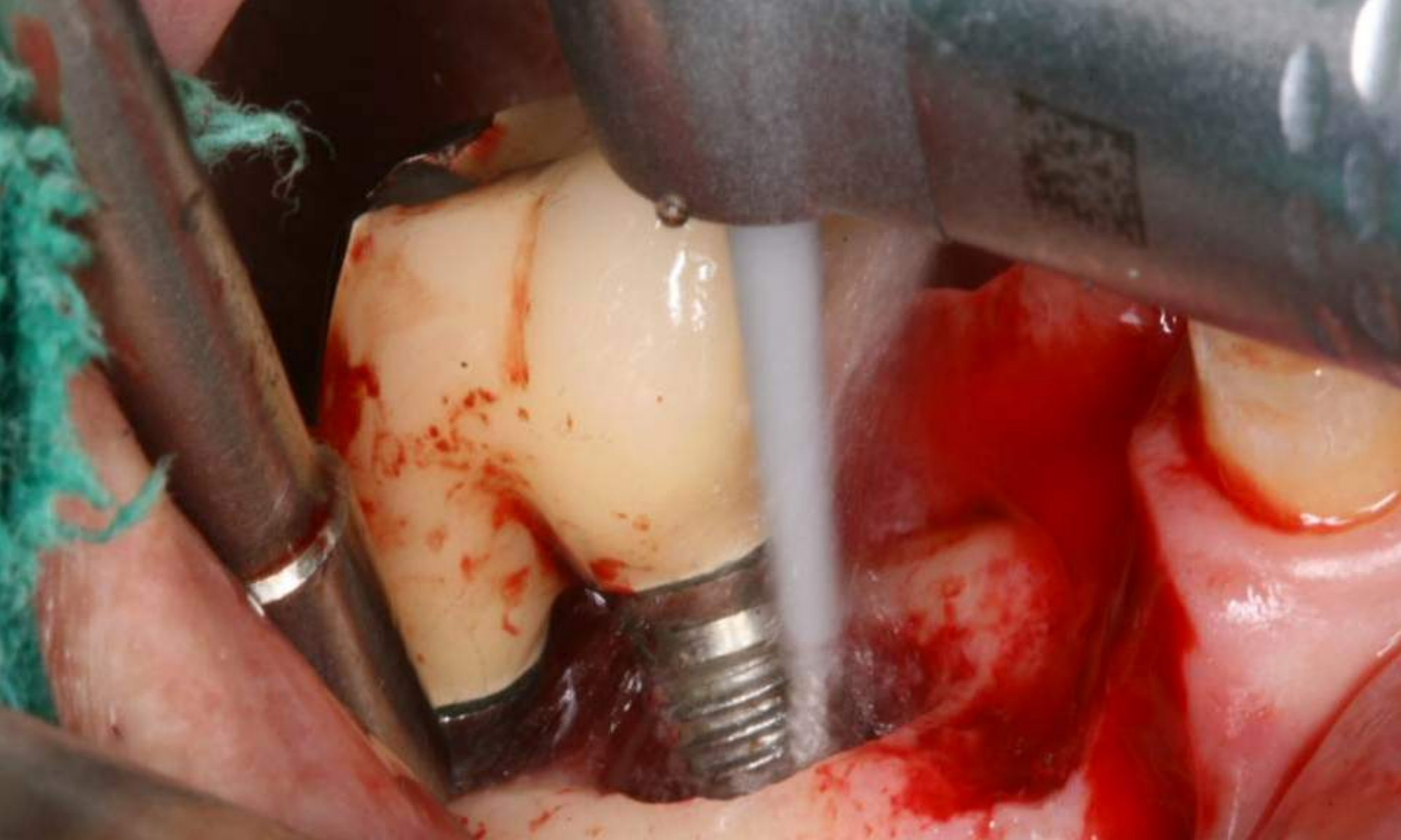
Severe bone resorption, gingival inflammation & recession around implant #46.



Flap was reflected to clean the contaminated implant surface. Large bone defects were found.



Each contaminated implant thread was cleaned by i Brushing with copious water for 3 minutes. (2000RPM)



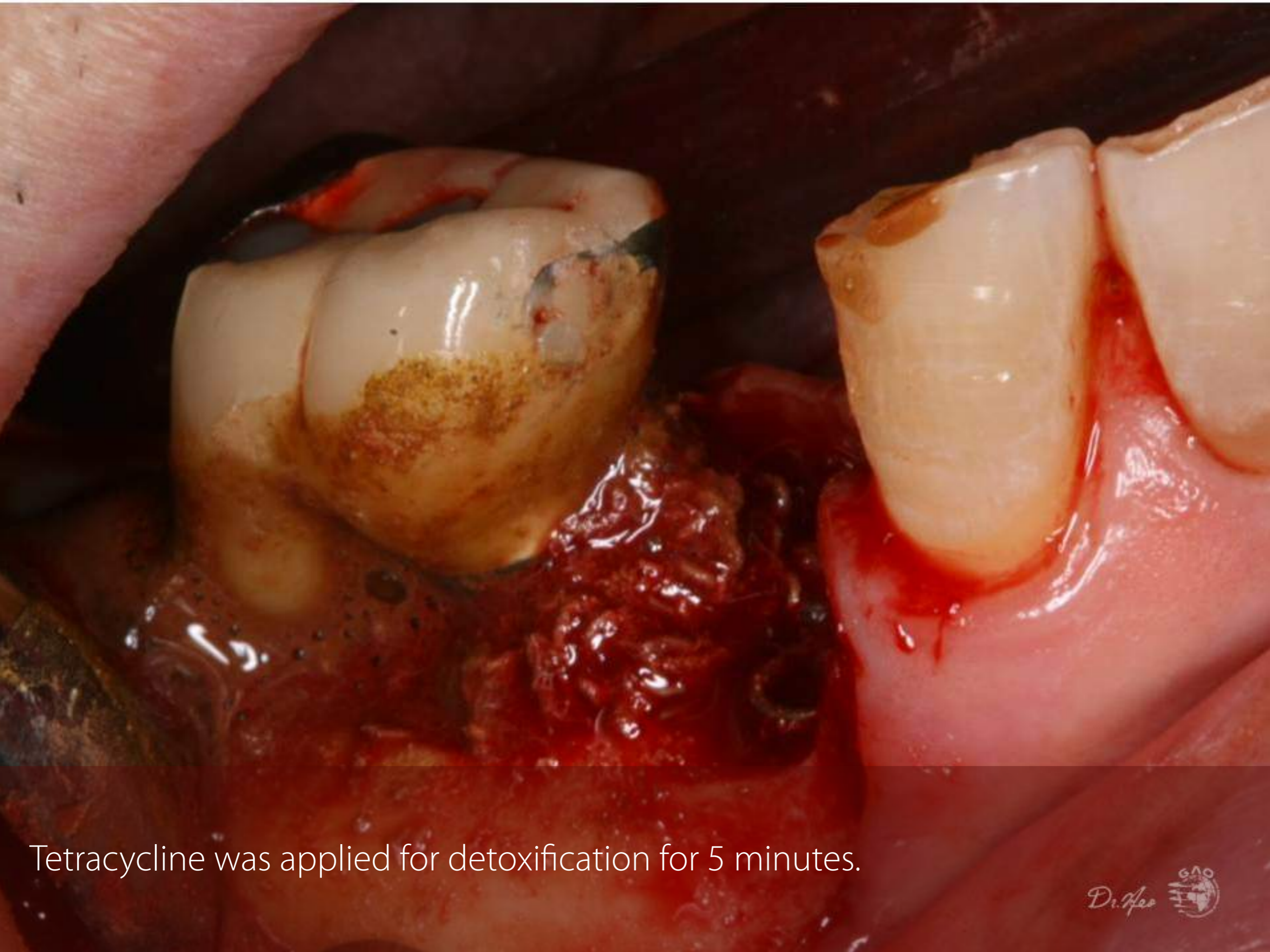
With i Brushing, deep below the crestal area may be cleaned.



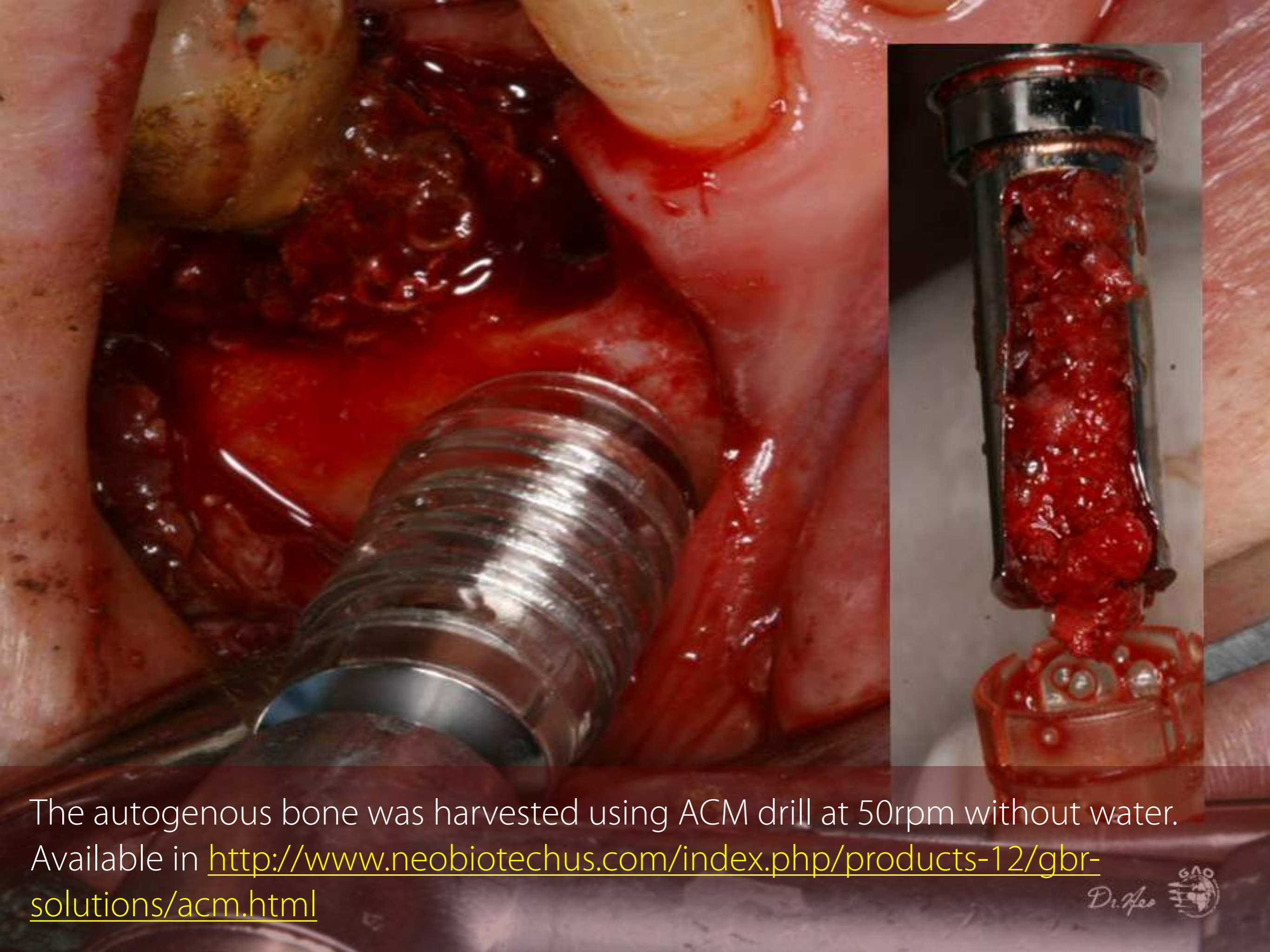
New rough surface has been created. i Brushing is only recommended for 1 to 3 exposed threads, as it takes 3 minutes for each thread.



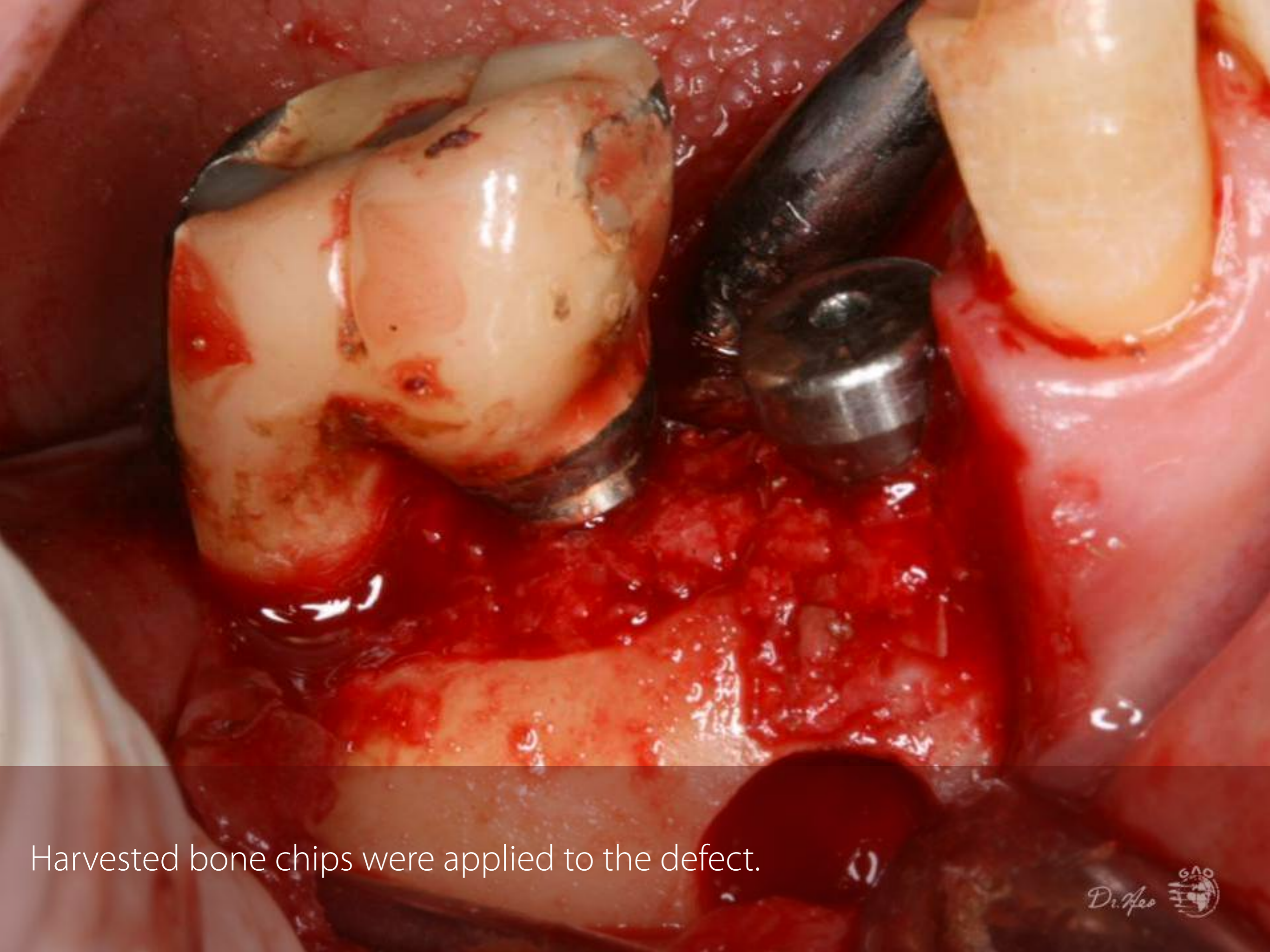
Laser treatment was additionally applied to the surface to eliminate remaining plaques or harmful toxins. (Optional)



Tetracycline was applied for detoxification for 5 minutes.



The autogenous bone was harvested using ACM drill at 50rpm without water.
Available in <http://www.neobiotechus.com/index.php/products-12/gbr-solutions/acm.html>



Harvested bone chips were applied to the defect.



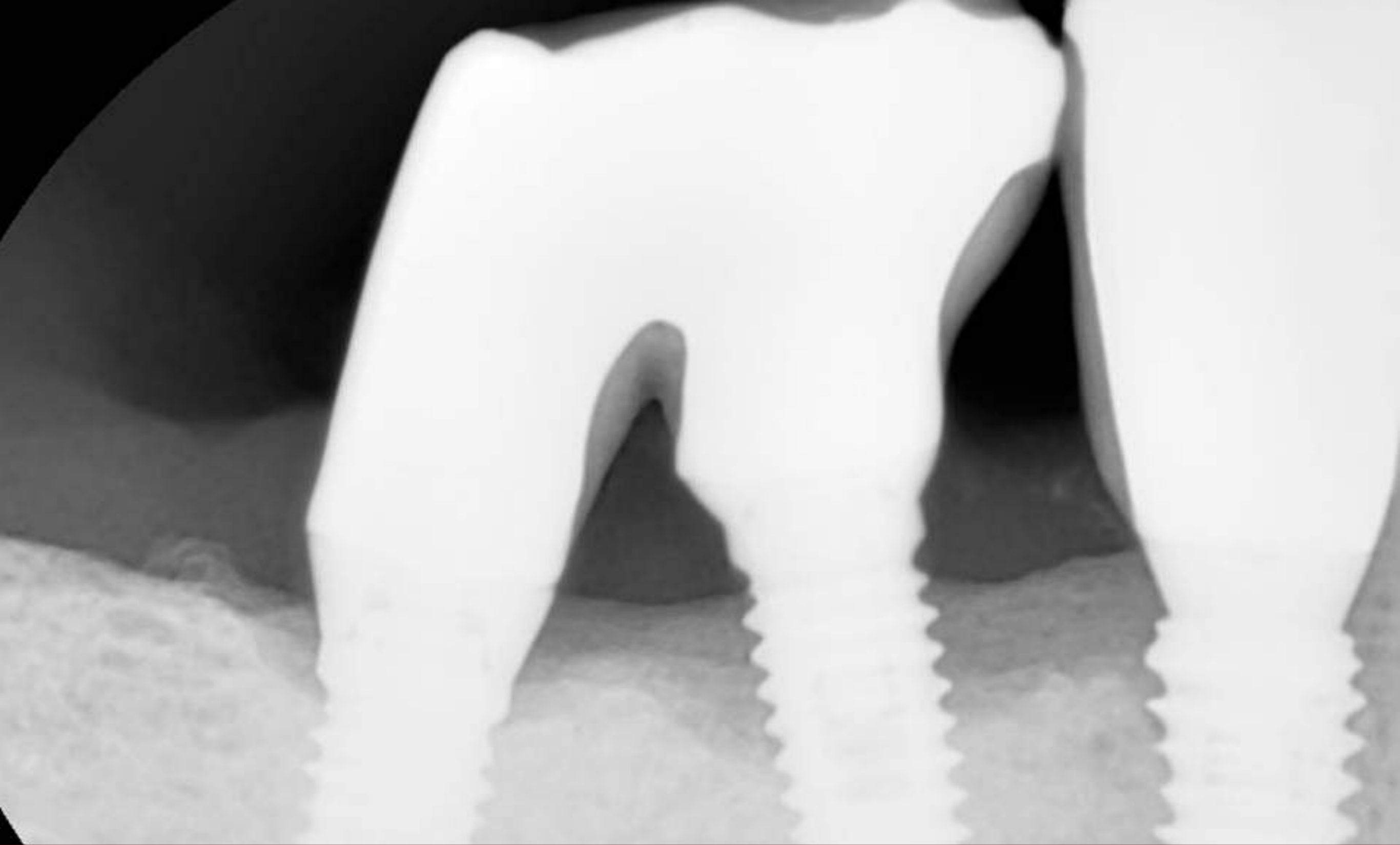
The wound closure was achieved with suture.



Postoperative radiographic view.



1 year postop. Soft tissue around implants has been maintained without any inflammation signs.



1 year follow of crestal bone level shows no further bone loss.