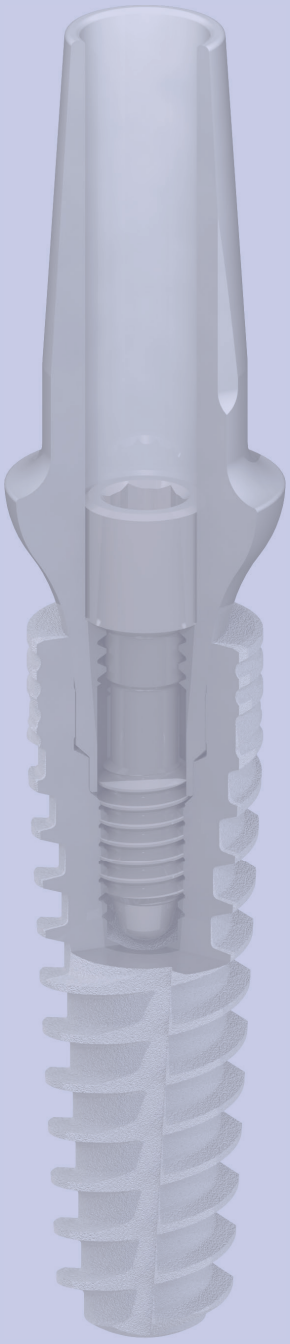
HumanTech Dental

Prof. Dr. Dr. Rupprecht
Erlangen/Germany



ConeCept

RatioPlant®Implants
case study

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Curriculum vitae

30.11.12	appointment as prof. of FAU Erlangen-Nürnberg
since 2006	established own practice
2004	2004-12-28 — acuirement of postdoctoral habilitation (venia legendi)
2004	2004-12-14 — habilitation in „oral and maxillofacial surgery“
2004	additional title „plastic surgeries“
2000	specialist medical qualification „oral and maxillofacial surgeon“
Since 1996	scientific assistant at clinic and polyclinic for oral and maxillofacial surgery of Friedrich-Alexander-University Erlangen, Nuremberg
1993 - 1993	doctor in internship for radioligy at Friedrich-Alexander-University Erlangen, Nuremberg
1997	dental promotion
1992 - 1995	studies of dentistry at Friedrich-Alexander-University Erlangen, Nuremberg
1994 - 1996	scientific assistent at clinic and polyclinic for oral and maxillofacial surgery of Friedrich-Alexander-University Erlangen, Nuremberg
1993 - 1994	doctor in internship at clinic and polyclinic for oral and maxillo facial surgery of Friedrich-Alexander-University Erlangen, Nuremberg
1993	medical promotion
1986 - 1992	studies of medicine at Friedrich-Alexander-University Erlangen, Nuremberg

Patient

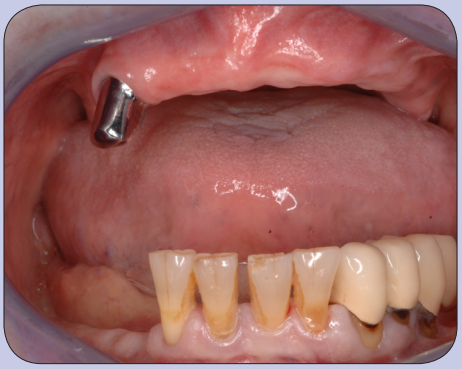
female, 78 years, non-smoker
amlodipine patient
regio 32, 34, 42, 44
bone quality (Misch) D2
planned Implants: 4x 42-100

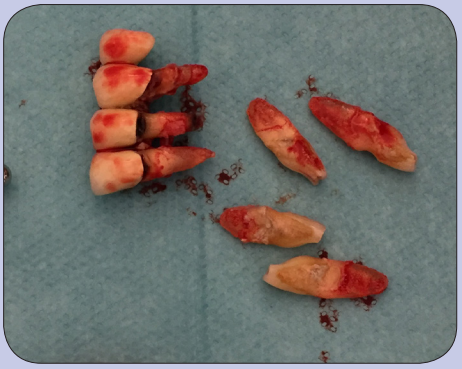
Diagnosys

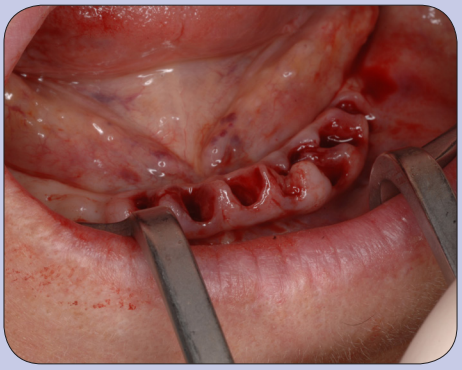
Remaining non-preservable teeth in region 42, 41, 31, 32, 33, 34, 35 due to periodontitis UK

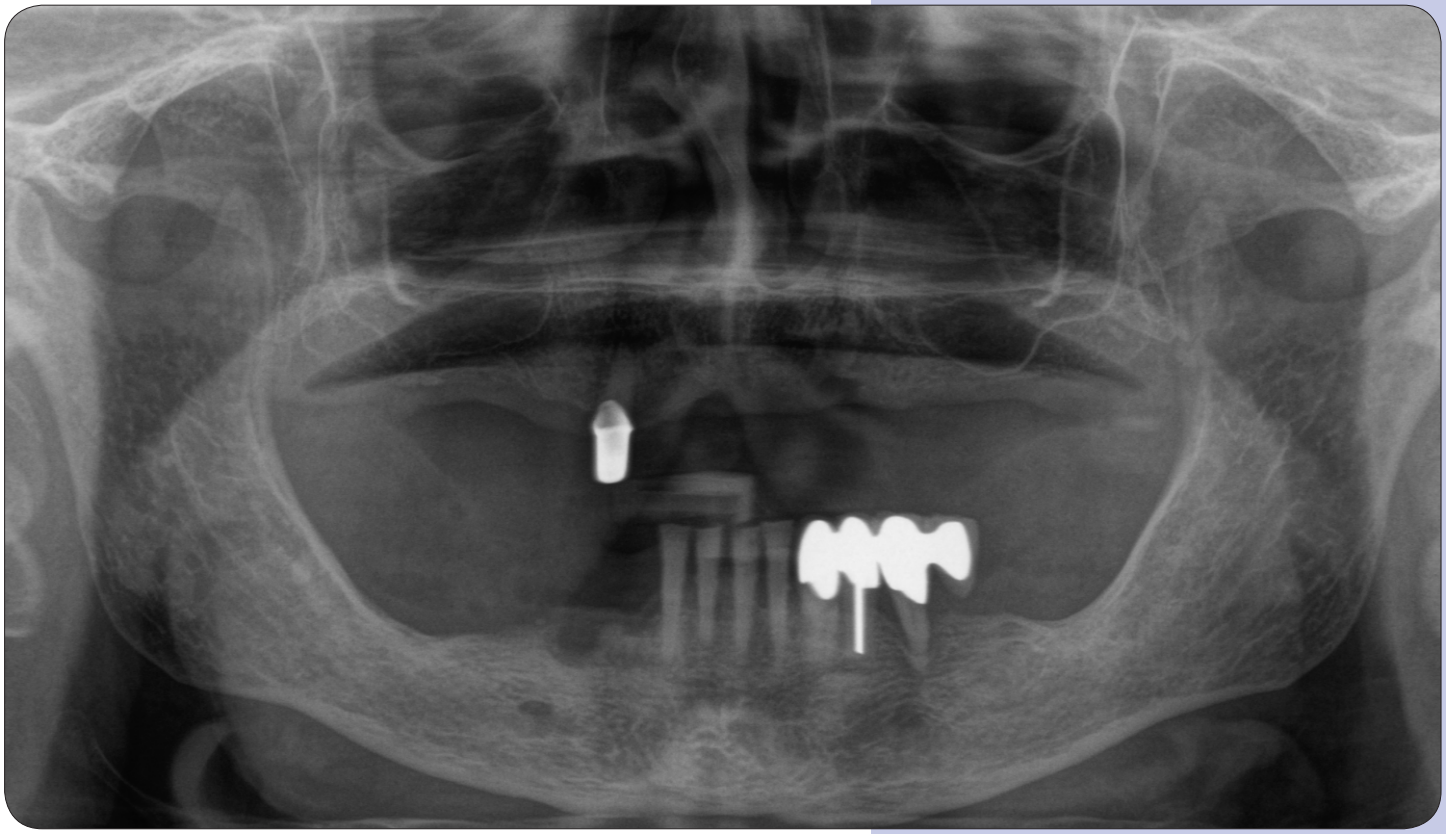
Planned treatment

Extraction of 42, 41, 31, 32, 33, 34, 35 and subsequent direct implantation of 44, 43, 33, 34 with ConeCept-Implants and simultaneous buccal augmentation with endogenous bone. After healing time of the implants the prosthetic restoration was realized by medical referrer Dr. Nitschmann, Erlangen. An implant supported hybrid prosthesis, carried by titanabutments with „Equator“ snap connection.









Appraoch / Method

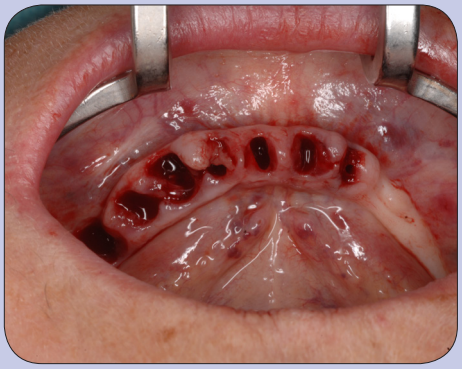
The presentation of the patient case given aims at displaying the usage and suitability of a new enossal dental implant systems under clinical conditions. The approach was documented and evaluated in three phases, preoperative - intraoperative - postoperative. In the preoperative phase the initial situation was measured by a radiology report and a treatment plan was created.

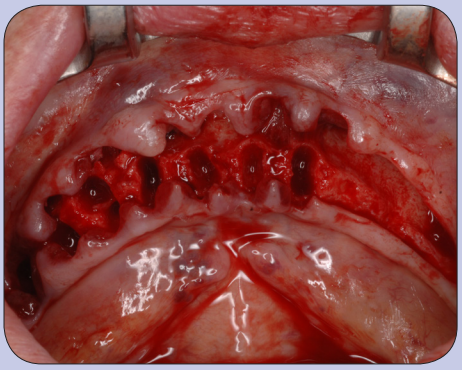
Beginning of the treatment with the extraction of 42, 41, 31, 32, 33 and preperation of the alveolus.

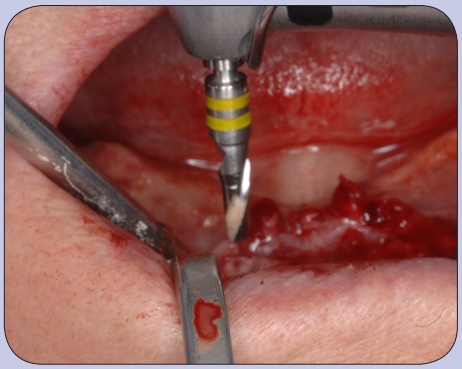
Subsequent incision and exposure of the bone in the planned area. Correction of the lower jaw bone by Luer bone cutting foreceps

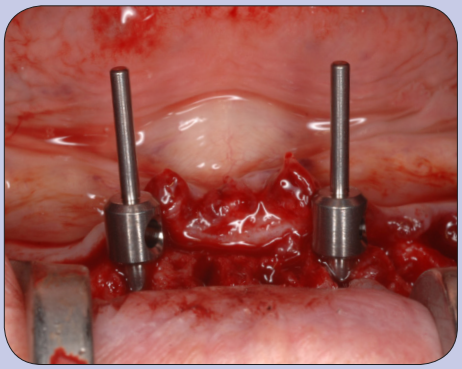
Preperation of the socket with a drill guide and as directed by drill protocol with pilot drill and radial expansion with the relevant final drills.

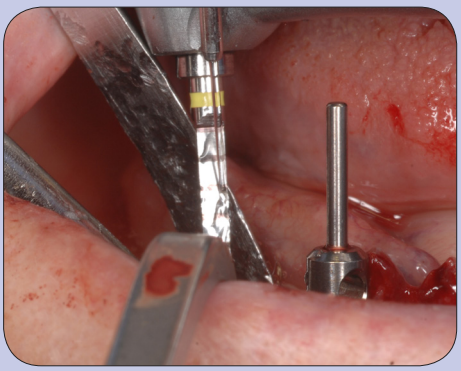
As no drill guide is used, the adjustment of the implants is done with the help of parallel posts.









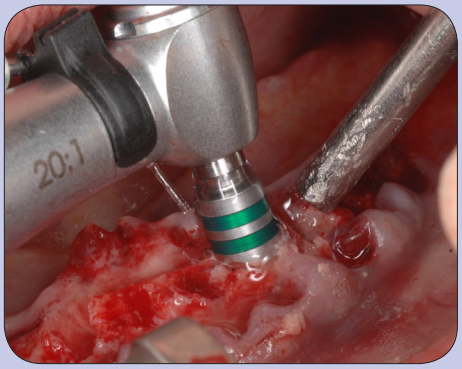


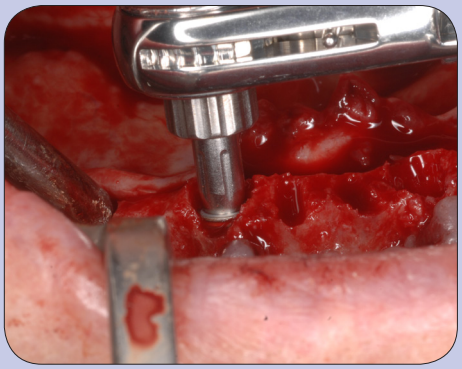
Approach / Method

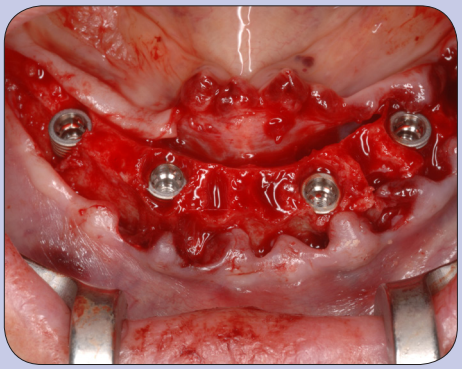
In the case shown, while the intraoperative phase, four ConeCept implants were inserted in the lower jaw in regio 44, 43, 33 and 34. The bone quality was rated D32 (acc. to Misch).

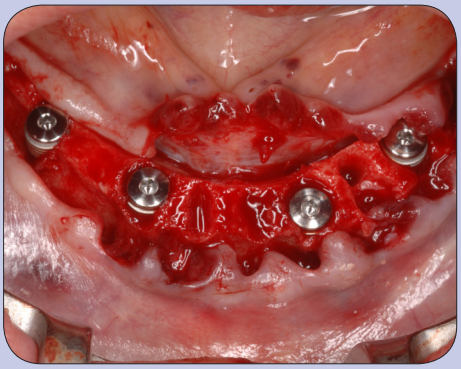
Immediately after the extraction of the remaining teeth and restoration of the implant sockets for the direct implantation in regio 44, 43, 33, 34 the ConeCept implants were set properly with the for this intended implant inserter. For a better control these are screwed in with a torque wrench with about 40Ncm slightly subcrestal to its final position.

Subsequent closure of the implants with cover screws and accumulation of endogenous bone graft in the buccal and occlusal area of the implants around the cover screws. To finallize the implantation the closure of the wound for a submerged healing and an orthopantomogram was made.









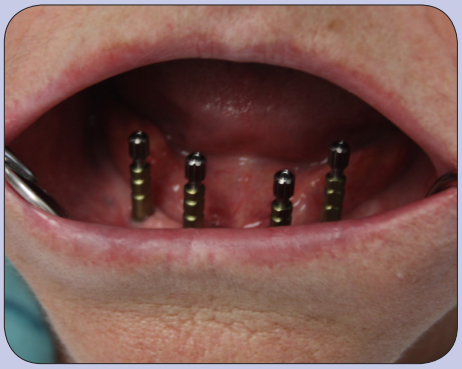
Approach / Method

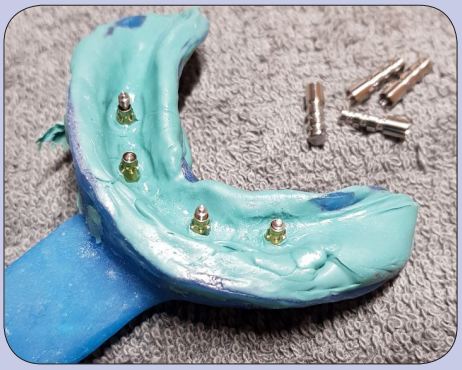
In the second phase after a healing period of nine months the exposure and screwing in the healing caps to shape the soft tissue to the desired emergence profile is performed.

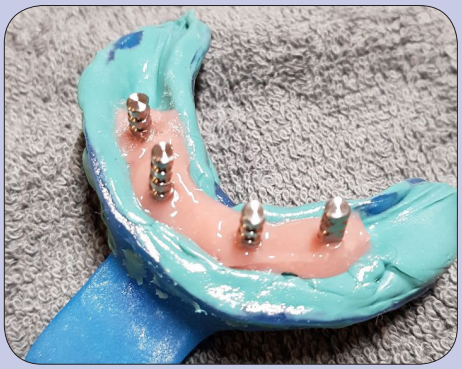
In a timely manner the impression was taken by the treating dentist, practice Dr. Nitschmann, Erlangen.

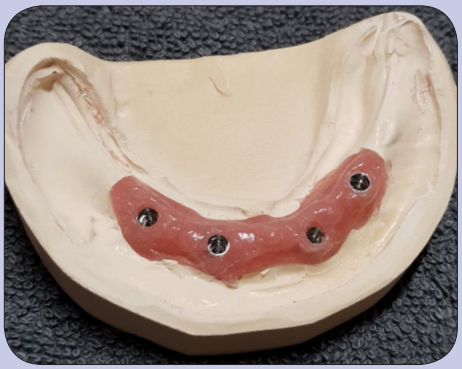
After completion of the master model a new lower jaw denutre with the planned snap connection was manufactured and was incorporated without any complication.

The result schows a succsessful, functional recovey of the masticatory, the phonetics and an appealing, asethetic solution. Furthermore from an oral hygiene point of view it is easier for the patient to handle.



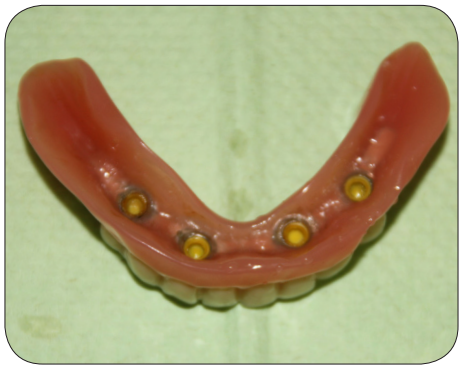


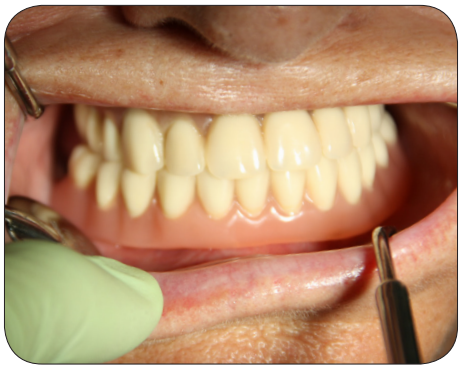


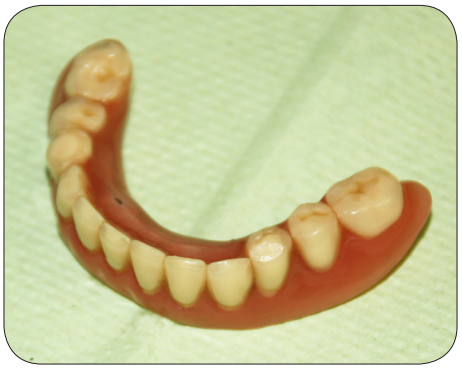


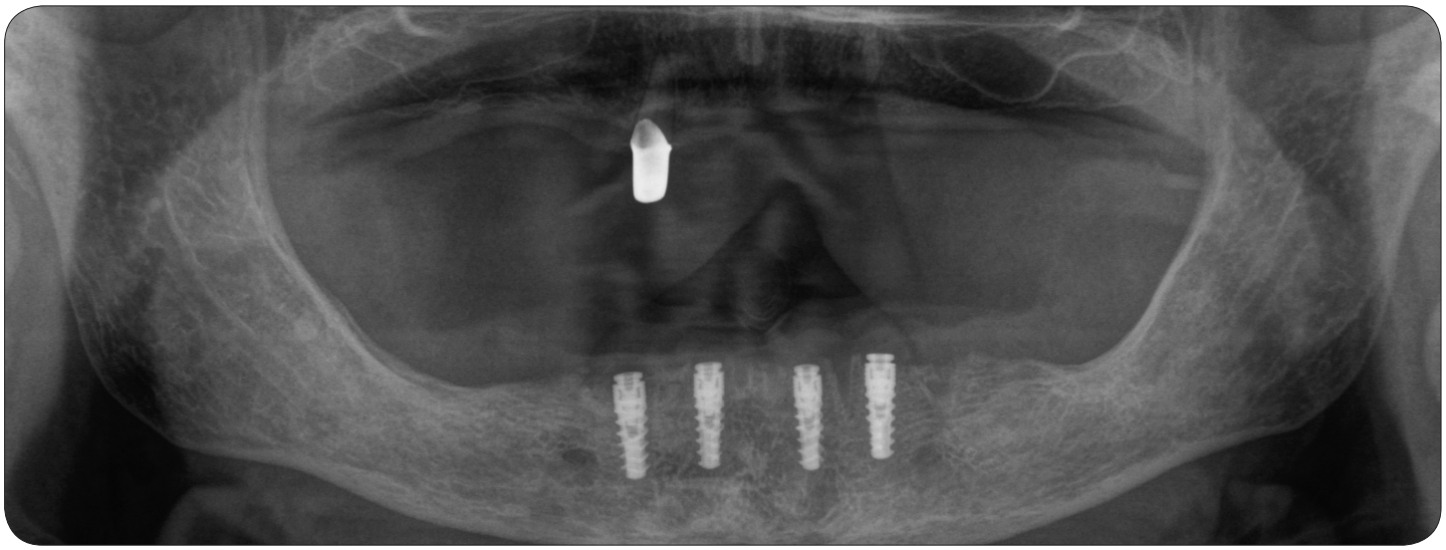
Conclusion

The ConeCept implant system was developed to comply with the rising demand of, on the one hand cost-efficient treatment plans for price sensitive patients and on the other hand for simplified and standardized workflows in the daily practice. To achieve this, the amount of components was reduced to an effective minimum, thus optimized for a maximum of practicability. In doing so the highest quality standard is unconditionally guaranteed. The ConeCept implant system is based on the platform-switch-concept and aims at an improved medical appraoch to preserve the crestal bonelevel and to avoid peri-implantitis. The implant shoulder is not covered by the ConeCept abutment or other superstructures of the ConeCept system. Multiple studies have proven, that this optimal shaping of the soft tissue yield to an improved emergence profile, which finally leads to a long-term preservation of the dentures. Furthermore the pinnacle connection (tube-in-tube) ensures maximum sealing of the interface between implant and abutment. The ConeCept Implant is, with its conical geometry as an self-cutting screw implant with a sandblasted and etched surface, manufactured in standardized processes according to the highest technological standards. The internal connection of the ConeCept implant is designed with three grooves, ensuring high flexibility of the abutment direction (with six positions). Beyond that the universal platform size promises a diverse choice of all prosthetic components, regardless the implant size. Through this a simple, time-saving and precise treatment is given, which optimizes the time and error management of the practitioner. The follow-up documentations of numerous ConeCept case studies proove the satisfactory application and emphasise the succes of this well-elaborated implant system.









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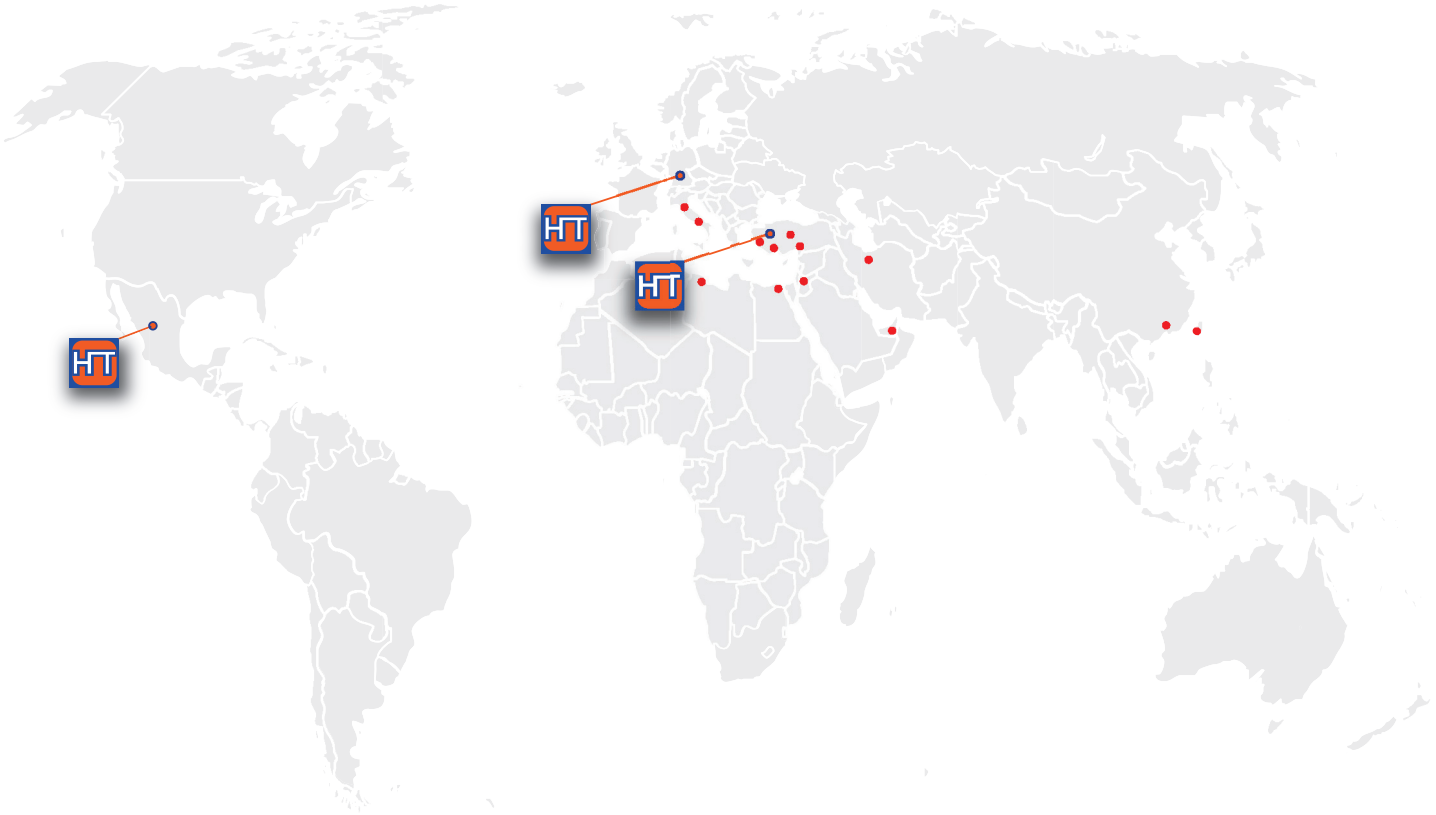

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