

From failing dentition to a confident smile, in just one day



Dr. Roberto Sleiter
Switzerland

In real-world practice, surgical protocols and restorations should be tailored to the patient's needs, and thoroughly communicated. The time we dedicate to patient communication makes a big difference in satisfaction and compliance in the long run.

Clinical situation

In November 2022, a 71-year-old male patient came to our practice. He was looking for help with his oral health issues and hoped to improve his esthetics, as well as to have fixed functional dentures. He had been experiencing difficulty with his upper and lower removable dentures, which had negatively impacted his quality of life.

Treatment planning

We examined the condition of the patient's jaw. He had residual dentition in both jaws with a severely compromised and esthetically unpleasing periodontal condition.

We chose the All-on-4[®] treatment concept for both jaws based on the anatomy of the remaining bone.



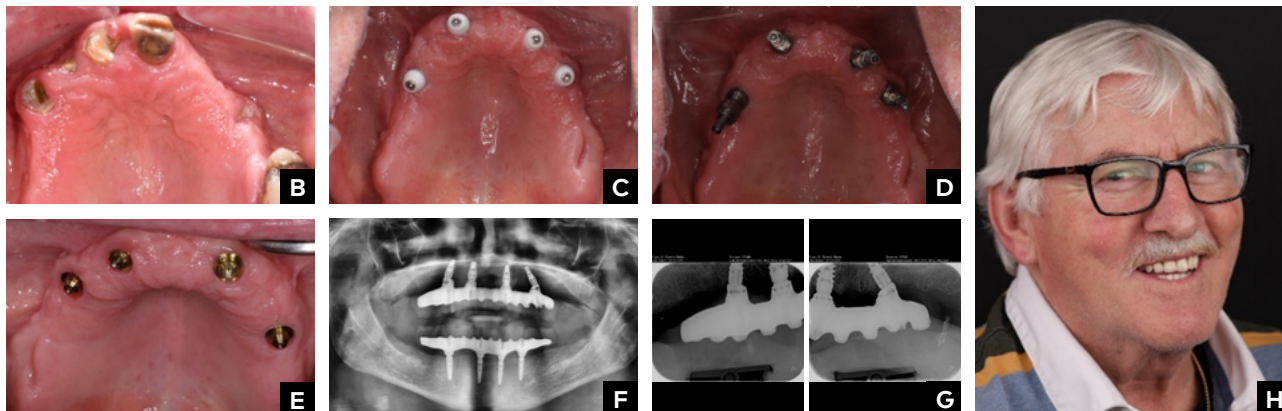
A Orthopantomogram (OPG) before treatment shows moderate-to-severe ridge resorption in both jaws.

Surgical solution

Surgery was performed a few days later. We extracted the hopeless teeth and placed the implants and Multi-unit Abutments according to the standard protocol of the All-on-4[®] treatment concept.

Choosing implants based on bone quality

We used NobelActive® TiUltra in the maxilla in order to achieve high primary stability in the soft bone and Immediate Function. Also, we chose NobelReplace® TiUltra in denser mandibular bone, as its tapered body prevents the generation of excessive stress during insertion. Both NobelActive and NobelReplace implants are suitable for demanding situations that require immediate implant placement and function.¹⁻³



B Intraoral view of the upper jaw before treatment. **C** Occlusal view of healing caps to save space in the maxilla. **D** Occlusal view of the impression copings in situ. **E** Multi-unit Abutments Xeal 6 months after surgery. Note the healthy soft tissue before delivery of the final prosthesis. **F** OPG showing the stable peri-implant bone level at the time of final prosthetic delivery. **G** Periapical radiography showing the fully seated definitive prosthesis and stable bone level 6 months post-op. **H** Patient's smile after receiving the provisional prosthesis.

Patient-centric care

Complex dental problems and corresponding solutions are as individual as the patients themselves. We communicated every step of the process to the patient and used 3D images and digital tools to explain the final results, to ensure that treatment acceptance was a well-informed decision, truly based on his expectations and desired outcomes.

Patients always appreciate the opportunity to discuss their concerns and questions with the team. I have also experienced that informing the patient that we are an All-on-4® Center of Excellence using only premium solutions, backed by extensive clinical science, wins their complete trust. It helps keeping them engaged and compliant, including their commitment to a dental hygiene program and regular check-ups, to ensure excellent long-lasting clinical outcomes.²



Digital and visual communication tools make patient-clinician communication simpler than ever.

Reference

1. Kolinski ML, et al. J Periodontol 2014;85(3):386-394.
2. Todisco M, et al. Oral Implantol 2018;11(3):169-76.
3. Pozzi A, et al. Eur J Oral Implantol 2015;8(1):51-63.