PREPROSTHODONTIC MOLAR INTRSION BY MINI-IMPLANTS IN ADULT PATINET-case report

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INTRODUCTION

Early loss of mandibular permanent molars with supraeruption of maxillary permanent molars is a common clinical finding that routinely occurs.



Figure 1. Mini-implant (Bio Materials Korea, Inc.-ACR Series).







Figure 3. Panoramic radiograph (OPG).

RESULTS



and no change of the pulp flow was detected.



Figure 5. a) Prosthodontic rehabilitation over osseointegrated implants for reestablishing a functional posterior occlusion.

CONCLUSION

Supraerupted maxillary molars were intruded 3mm in 6 months, (approximately 0.5mm per month). The intrusive tooth movement maintained the vitality of the intruded teeth and was not aggressive to the periodontal structures, did not cause root resorption and no change of the pulp flow was detected.

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mini-implants as a form of temporary anchorage devices (TADs) in the biomechanics of molar intrusion attempted to create interocclusal space for adequate prosthodontic restoration with osseointegrated implants and prosthesis.

AIM





Figure 2. Extraoral and intraoral view of patient before treatment.

Figure 4. a) Molar intrusion with segmented technique and mini-implants on the right side, b) lingual braces and c) segmented technique on the left side.

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Through this case report, we emphasize the versatility of orthodontic A 65-year-old woman presented insufficient occlusal clearance due to the maxillary right first and second molar supraeruption of 3 mm, encroaching upon the mandibular edentulous space. For their intrusion and verticalization, two mini-implants (BioMaterials Korea, Inc.-ACR Series) diameter=1,5mm and length=8mm were inserted, in the vestibular and palatine region between the upper first and second molar. With the aid of chain elastics, the force of intrusion applied was 150-200gr, always passing through the center of resistance of the molars.







MATERIAL AND METHOD



The authors declare no conflict of interest.

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