DENTAL IMPLANTS,

SINUS AUGMENTATION & BONE GRAFTING

Case Studies Volume 1



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www.drforlano.com



Thank you for considering us for your dental implant needs.

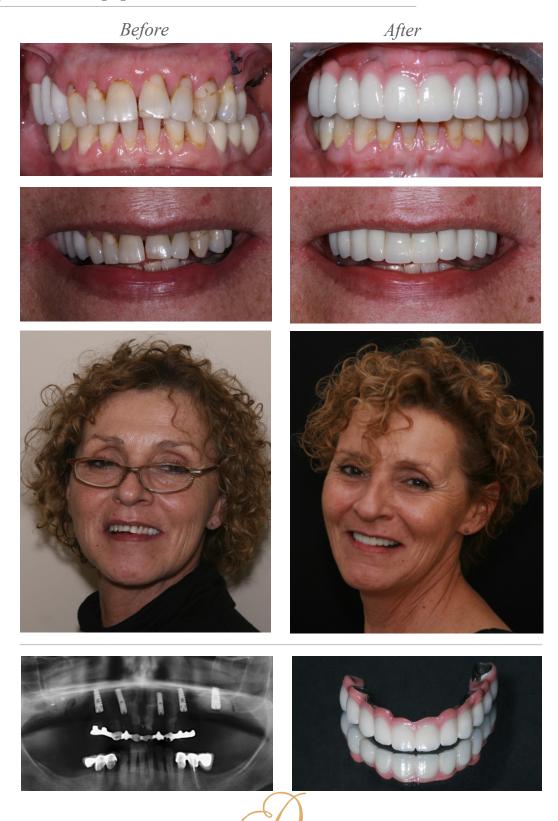
With success rates exceeding 95%, dental implants are a predictable means to:

- Replace a single missing tooth
- Stabilize a loose, clumsy denture
- Eliminate the palate from a bulky denture
- · Rehabilitate an entire dental arch

I have been placing and restoring dental implants for over 20 years. I have achieved Diplomate status, the highest award attainable in the International Congress of Oral Implantologists and currently teach dental implantology to dentists at New York University College of Dentistry.

Above and beyond my involvement in Implant Dentistry, my experience and training in treating the entire masticatory system, ... from the implant placement to the final prosthesis, which involves the intricate neuromuscular system, the bite, the lower face height and the envelope of function, ... gives my patients the **advantage** of a self-contained, **one-doctor**, **multi-disciplinary approach**.

Dr. David Forlano



Dr. David Fortano
Elevating Your Expectations

Before





















Before

The state of the state



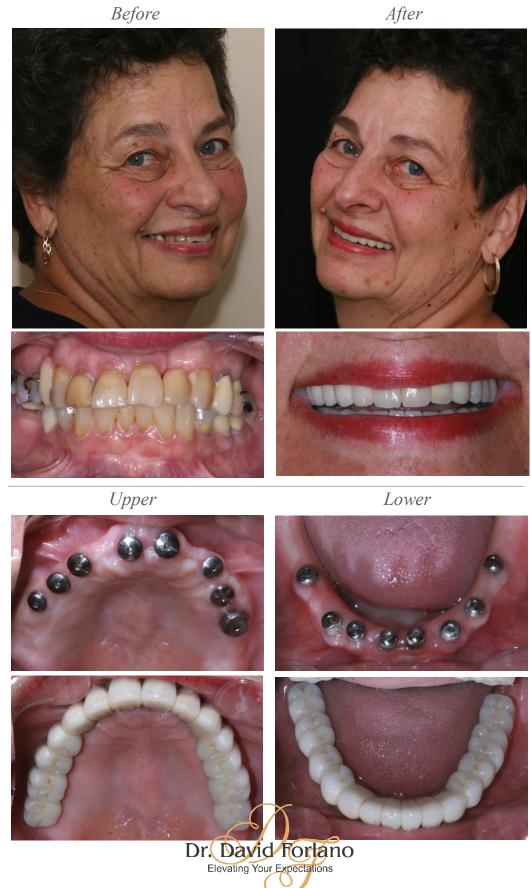








Computer Guided Full Mouth Rehabilitation

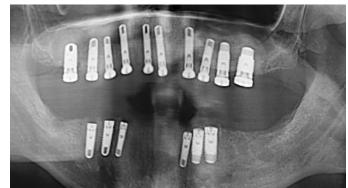


Full Mouth Rehabilitation

Before







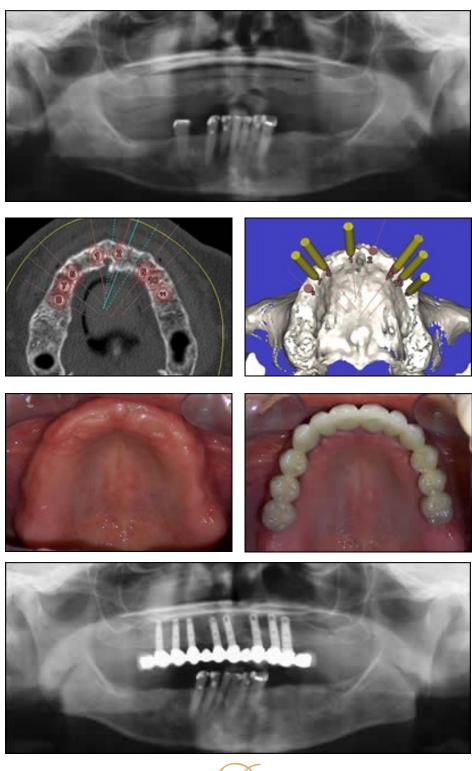














Upper Arch Prosthesis/Immediate Placement

Before



After



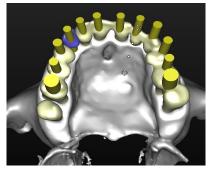


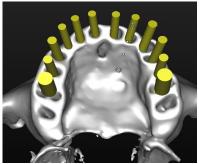


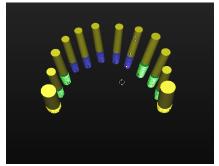




Computer Guided Immediate Implant Placement

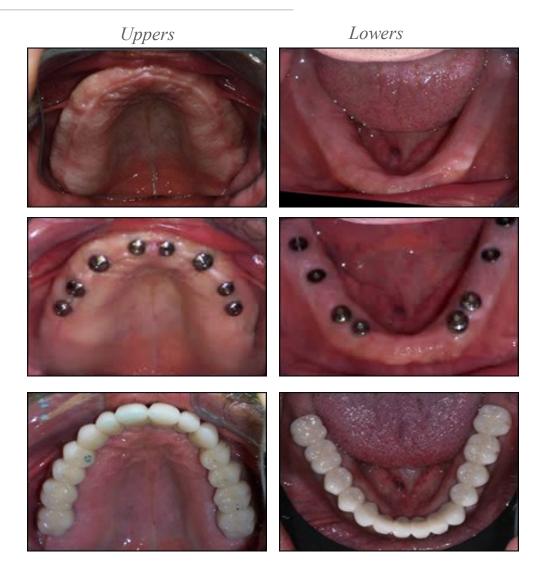






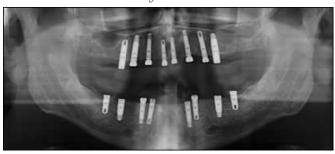


Full Mouth Rehabilitation



Before After







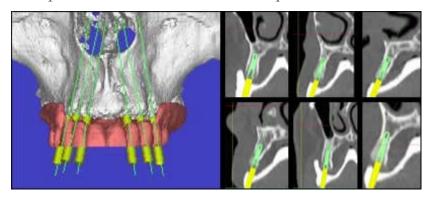
Computer Guided Immediate Loading

Pre-Op



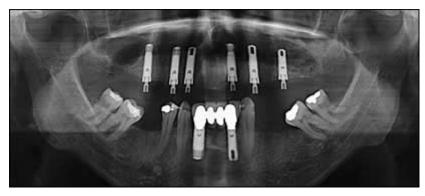


Computer Guided Non-Invasive Implant Placement. No stitches required





Implants & Teeth in a Day

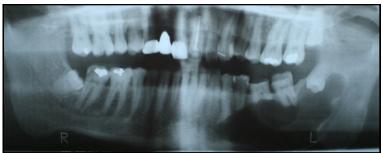


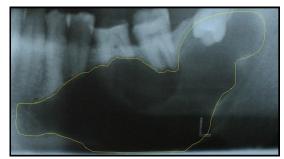




Computer Guided Flapless

Odontogenic Cyst of Left Mandible





Cyst Removal & Bone Regeneration





Non-Invasive, Computer Guided Implant Placement. No stitches required.





Efficient Restoration



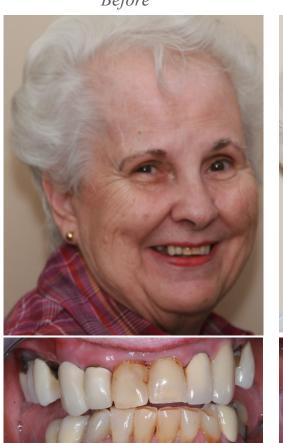






Maxillary Clip-On Overdenture

Before After





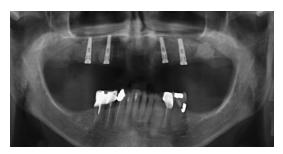














Decayed and failing dentition





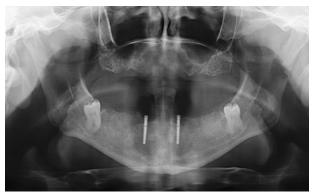
Removal of the decayed teeth & transitional dentures





Two mandibular implants to retain the lower denture







Before





Implants Placed





Completed Case



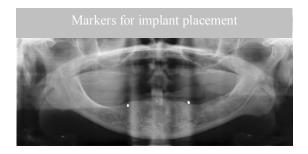










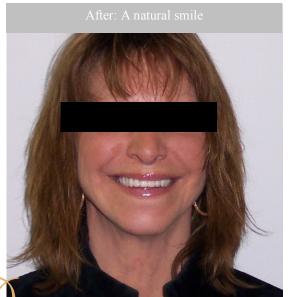




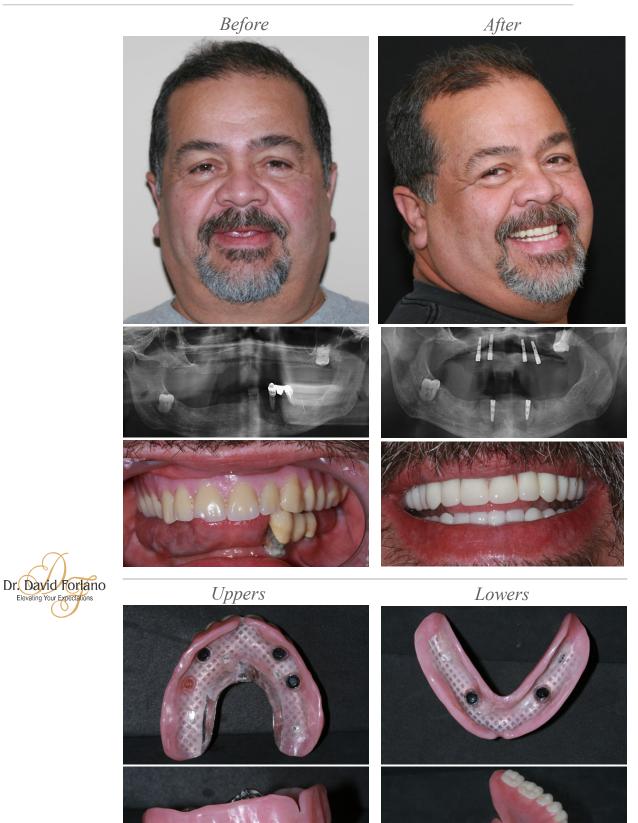








Upper & Lower Clip-On Overdentures



Mandibular Overdenture



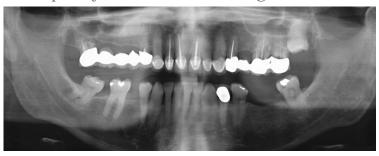
The mandibular clip-on overdenture.





Bilateral Sinus Lifts & Zirconia Restorations

Pre-Op: Defective Posterior Bridges





Planning Bilateral Sinus Lifts & Implant Placement





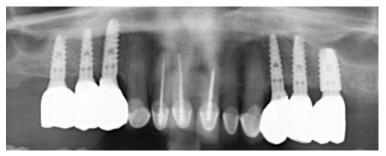
Solid CAD/CAM Zirconia Prostheses







The Finished Case







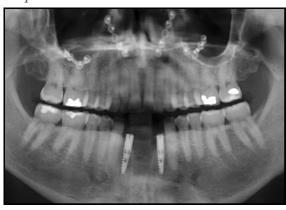
CAD/CAM Solid Zirconia Prosthesis

Large periapical lesion affecting the lower central incisors





Implant Placement and zirconia restoration





Lifelike results







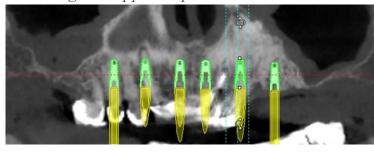
Computer Guided Full Mouth Rehabilitation

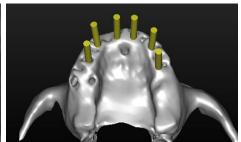
Collapse of the Masticatory System with a Warped Occlusal Plane



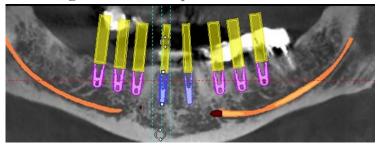


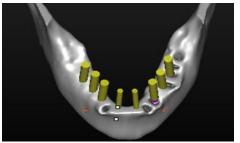
Planning the Upper Implants





Planning the Lower Implants





 $Restoration\ of\ the\ masticatory\ System\ with\ a\ Level\ Occlus al\ Plane$

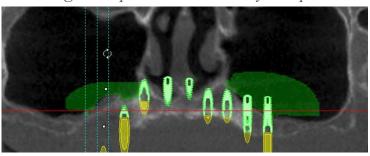


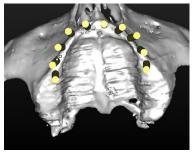




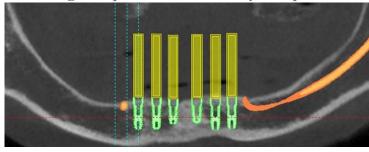
Full Mouth Rehabilitation

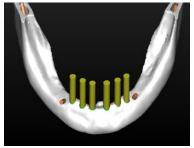
Planning 10 implants in a severely atrophied maxilla





Planning 6 implants in a severely atrophied mandible



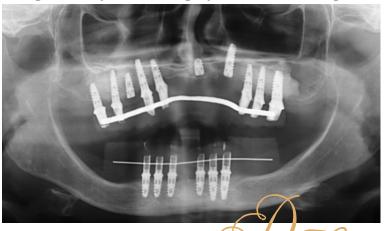


Magnificent prostheses by Yovino Dental Studio





Integration of the sinus grafts and dental implants





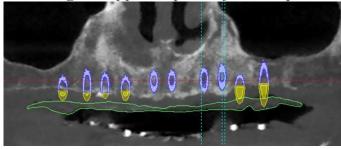
Full Mouth Rehabilitation

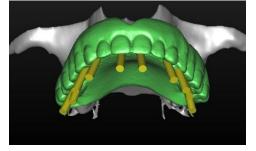
A failing dentition



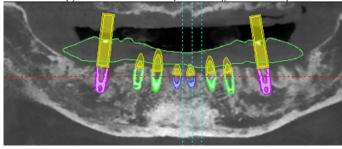


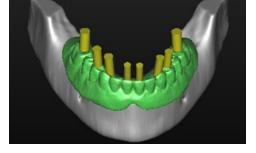
Planning the upper implants for Computer Guided Placement. No stitches.





Planning the lower implants for Computer Guided Placement. No stitches.





Rehabilitation.





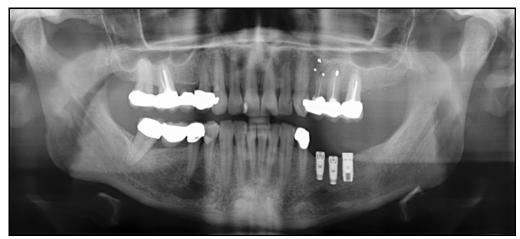


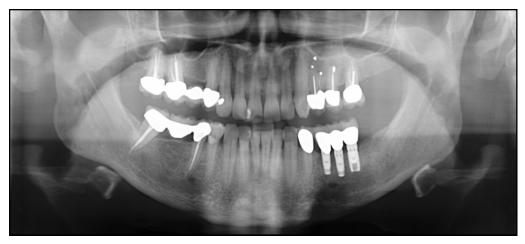
Non-Invasive Implant Placement













Immediate Placement & Loading

IMMEDIATE PLACEMENT

Immediate Placement is the term used for removing a tooth and placing an implant into the tooth socket the same day. Immediate placement is not always possible. One common obstacle is the shape of the tooth socket. For example, sometimes the root socket is curved or oblong. Dental implants are straight and cylindrical, so trying to put a straight and cylindrical object into a curved and oblong space isn't possible,...like trying to put a square object into a round hole. Not very precise. There are ways to overcome the discrepancy in shape, such as reshaping the tooth socket so it is straight and cylindrical. Often times we are able to do this very successfully. Another obstacle to immediate placement is the surrounding anatomy. In order for immediate placement to be successful, we like a few millimeters of bone beyond the tip of the root socket is required so that the implant can engage solid bone. Sometimes we do not have a few millimeters of bone beyond the root socket because of nerves, blood vessels or sinuses.

IMMEDIATE LOADING

Once an implant is placed in the bone, we typically wait 3-6 months before we put a crown on the implant. This allows time for the bone cells to integrate with the implant surface. Immediate Loading is the term used for bypassing the 3-6 month waiting time and placing a crown on a dental implant the same day the implant is placed. Immediate Loading is only successful on implants that go in very tight. Realize that some implants don't go in very tight. For those that go in very tight and resist a certain amount of torque, we can send you home with a tooth the same day. Another obstacle to Immediate Loading is a strong or deep bite. Strong bites can cause micromotion of the dental implant and cause the bone cells to die around the implant, causing it to loosen.

SUCCESSFUL IMMEDIATE PLACEMENT & IMMEDIATE LOADING

So with all this said, if we can overcome the obstacles, Immediate Placement & Immediate Loading can be very successful if planned properly, as shown here:









Immediate Implant in the Esthetic Zone

A defective central incisor with graying of the gumline required extraction.









A dental implant was placed and the tooth socket grafted.









A temporary with an ovate pontic was custom carved to support the gumline.









Allowing nature to provide adequate healing, the gumline was maintained.



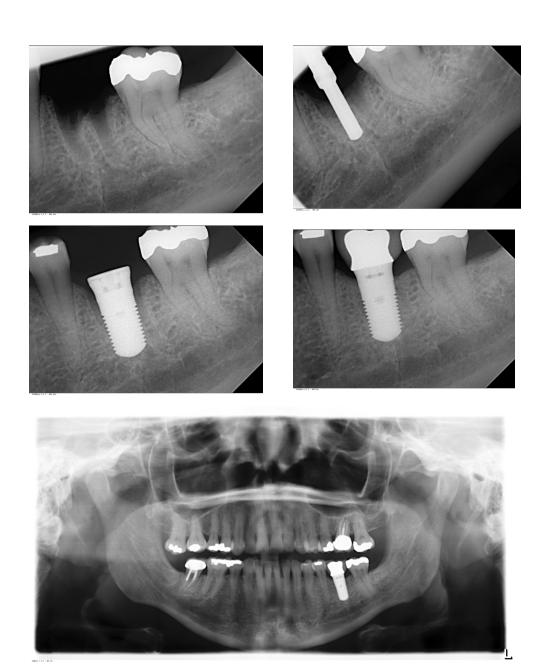








Immediate Implant Placement





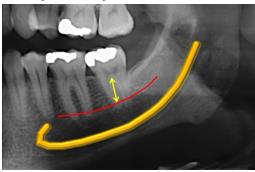
Implant Placement above the Mylohyoid Ridge

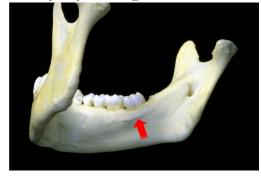
External resorption of the mandibular left second molar required extraction





Identification of vital landmarks includes the Mylohyoid Ridge





Implant placement above the vital structures & final restoration







Single Tooth Implants & The Buccal Corridor

Before After













Correcting Hypodontia in the Adolescent

Before After

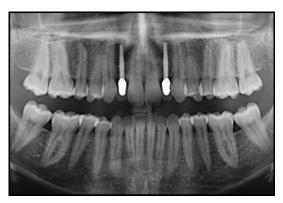














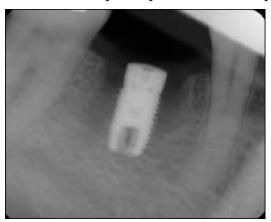
Correcting Hypodontia in the Adult

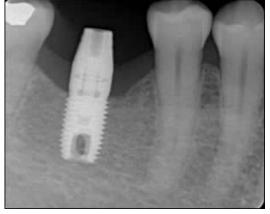
A retained deciduous tooth developed an abscess after 35 years.





Immediate implant placement was performed in the interradicular bone





Teeth were whitened and implant was restored.



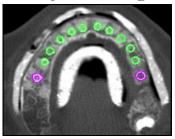




Computer Guided Immediate Loading

Twelve implants were planned for non-surgical placement.









CAD/CAM replica & SurgiGuide allowed for non-invasive implant placement. No stitches!









Teeth in a Day!





After



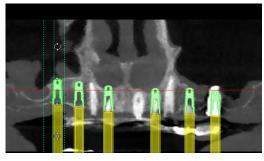


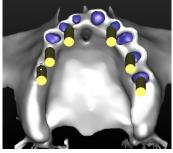
Staged implant case utilizing three failing teeth to support temporary bridge.





Computer Planning of six implants connecting three-section prosthesis.







The Prosthesis





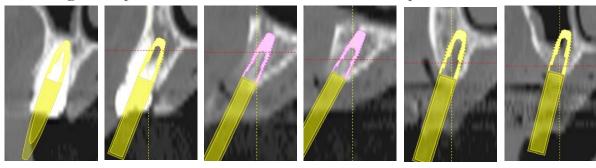
After





Complete Arch Upper Prosthesis

Planning six implants in cross-sectional views on Simplant.



Before



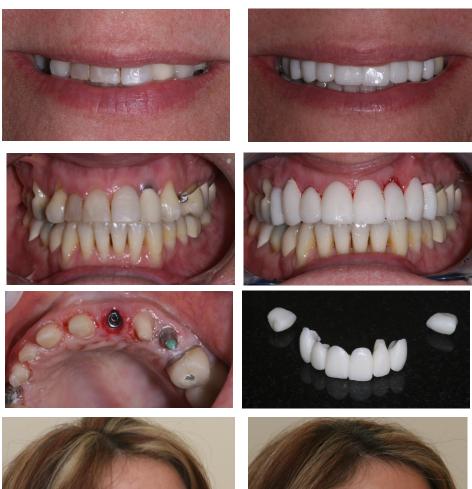
After







Combination Implants & Veneers





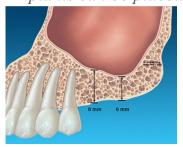


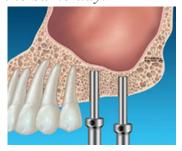


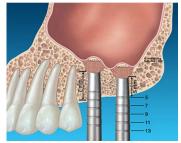




When a small volume of graft is necessary, the graft material can be inserted through the holes drilled for the dental implants. Hydrolic pressure on the graft material can elevate the sinus. Implants can be placed the same day.



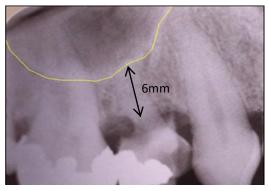




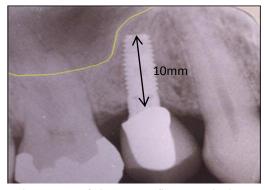




Decaying deciduous molar in a 35yr old male.



Only 6mm of available bone height beneath the maxillary sinus.



Elevation of the sinus floor and placement of a 10mm implant.



Remodeling of the sinus floor 12mm above the crest.

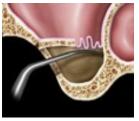


Lateral Approach Sinus Lift

When a large volume of graft is necessary, a window, is made through the side of the sinus and graft material can be inserted through the window.









After a 6-8 month maturation period, the graft material is replaced with natural bone and the dental implants can be placed.







Pre-Op: Low sinus on both sides





Post-Op: Bilateral sinus elevation & implant restoration







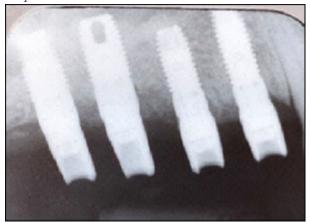
Pre-operative radiograph revealing four missing teeth.



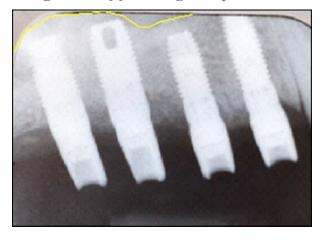
A low maxillary sinus appeared to be an obstacle to implant placement.



Using the Summer's Technique the floor of the maxillary sinus was gently elevated to accommodate four dental implants.



The repositioned sinus floor and integration of full-length implants.

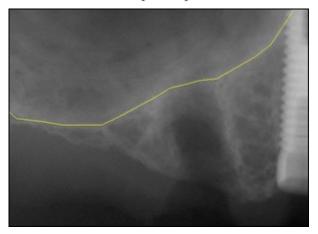




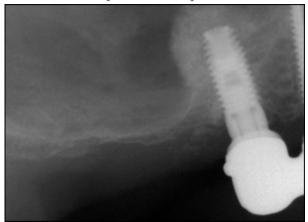
The upper right second bicuspid was extracted.



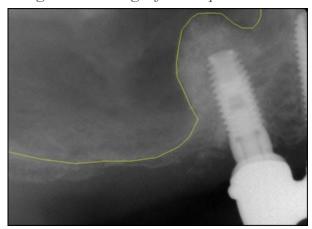
A low maxillary sinus appeared to be an obstacle to implant placement.



Using the Summer's Technique, the floor of the sinus was gently repositioned "non-surgically". A bone graft and dental implant were placed



The new position of the sinus and the integrated bone graft & implant.

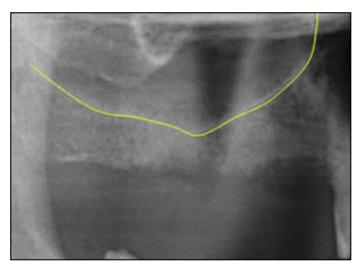




Pre-operative radiograph reveals a low maxillary sinus.



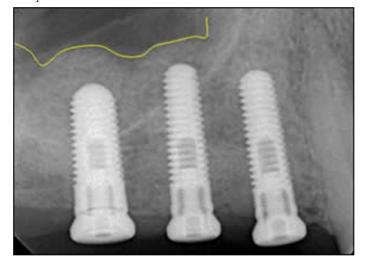
Tracing of the sinus floor.



Post-operative radiographs reveals placement of three dental implants after a non-invasive sinus elevation

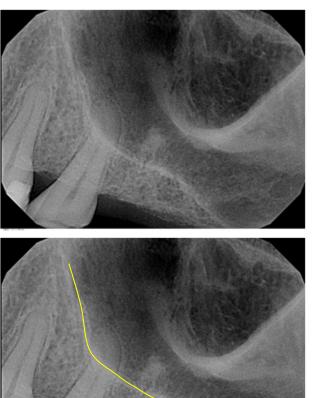


Tracing of the repositioned sinus floor providing ample space for the three dental implants





A low maxillary sinus appeared to be an obstacle to implant placement. Only 3mm of available bone beneath the sinus.



Using the Summer's Technique, the floor of the sinus was elevated "nonsurgically" 7mm. Well above the documented average of 4mm.

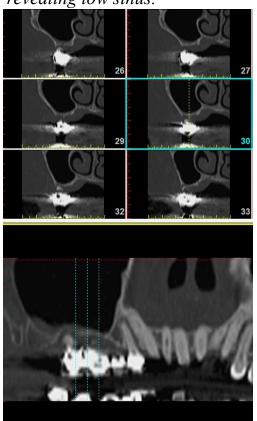


Unprecedented results attributed to Dr. Forlano's experience and skilled team of assistants.

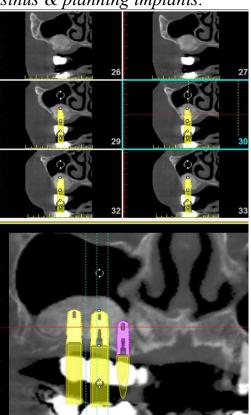


Lateral Approach Sinus Lift

Pre-Operative CBCT Scan revealing low sinus.



Large graft placed beneath the sinus & planning implants.



Placement of implants in the grafted bone.





Circumnavigating the Maxillary Sinus

A cystic lesion around upper molar displaced the sinus.



The tooth was removed & sinus allowed to heal.





The adjacent teeth proved inadequate to support a bridge.





Implants were strategically placed avoiding a sinus lift.





Successfully restored implants. 10 year follow-up.











Dr. Forlano is a general dentist trained in rehabilitating the entire masticatory system. The masticatory system is the functioning part of the body responsible for chewing.

He has earned Diplomate status in implant dentistry through the International Congress of Oral Implantologist. He is on faculty at New York University College of Dentistry where he teaches other dentists implant surgery, prosthetics and all stages of bone grafting.

All of the cases and clinical photographs presented here are of actual patients treated by Dr. David Forlano.

Thank you for allowing us to display your cases. Thank you for the opportunity to treat so many interesting cases. I am grateful for your trust & confidence.





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