

Successful Treatment of a Patient With Peri-Implantitis two Years After Implantation

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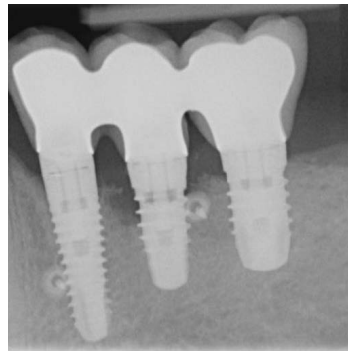
The Baseline Situation



Diagnosis of peri-implantitis based on medical and radiographic examinations

A **62-year-old patient** with 3 Thommen implants in the positions 34, 35, and 36, who had received periodontal treatment prior to implantation, presented **2 years post-implantation with peri-implantitis**. The implants had been loaded with cemented-fixed splinted crowns.

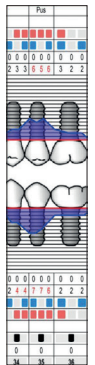
Peri-implantitis was caused by insufficient post-insertion maintenance, smoking, and poor compliance.



Presence of pockets (6-7 mm) around implant 35

Purulent exudate on probing around implant 35

General bleeding on probing



The Treatment Strategy



1. Non-surgical phase

- Smoking cessation program
- Removal of crowns and abutments
- Placement of healing caps
- 24-hour mechanic implant debridement
- Antibiotic therapy against Pg and Aa

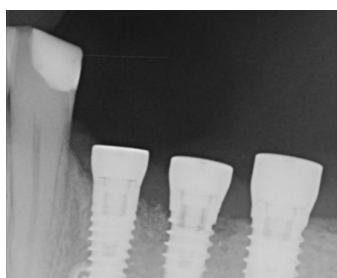
2. Surgical phase

- Surgical flap
- Local decontamination and debridement on implant 35 mesial (PEEK-Ultrasonic, Tigran Peribrush®, Periflow® and PVP-iodine irrigation)
- Treatment with a resorbable membrane covered with xenograft bone material

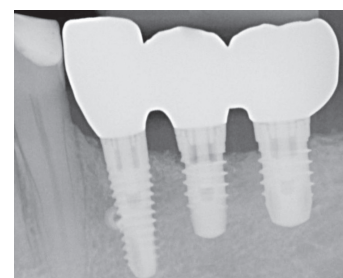
3. Prosthetic phase

- Screw-retained concept for easier hygiene maintenance
- Splinted crowns made of zircon (CFAO)
- 4-monthly recall interval for periodontal maintenance

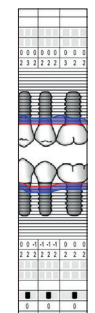
The Outcome



3 months



18 months



Excellent clinical and radiological outcomes 3 and 18 months after surgical intervention