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Clinical outcomes after Guided Bone Regeneration (GBR) with d-PTFE Ti-reinforced membranes versus Ti-meshes plus collagen membranes.

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The aim of this RCT is to compare 2 GBR procedures evaluating surgical and healing complications, implant primary stability and newly-formed bone. Forty partially edentulous patients were randomly treated by d-PTFE membranes (A) or Ti-meshes + cross-linked collagen membranes (B) with simultaneous implants placement. After 9 months of subemerged healing, all clinical variables were recorded and analyzed to reveal statistically significant differences (P>0.05).

Fig.1 – Implants placed in bone defect with perforation and bleeding of narrow space

Fig.2 – Application of mixture of particulated autogenous bone and Encore allograft

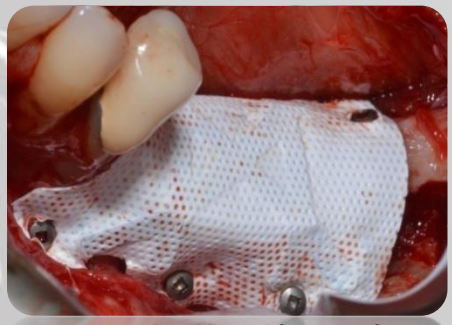

Fig.3 – Lingual and buccal fixation of Cytoplast Ti-250 XL membrane

Fig.4 – After a follow-up of 9 months, the second surgical phase was reported

Fig.5 – Removal of Cytoplast Ti-250 XL membrane and exposure of newly-formed bone

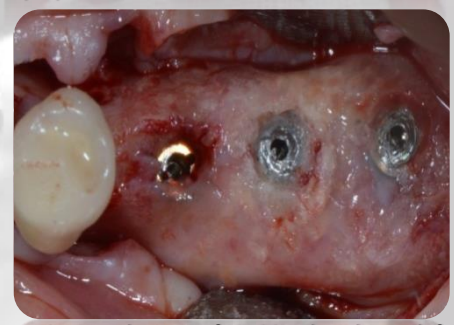

Fig.6 – Absence of peri-implant bone defect And measurement of vertical bone gain

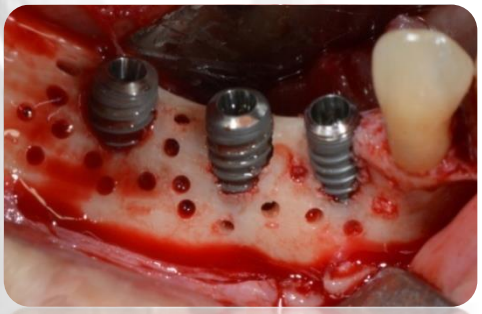

Fig.7 – Implants placed in site defect with perforation and bleeding of narrow space

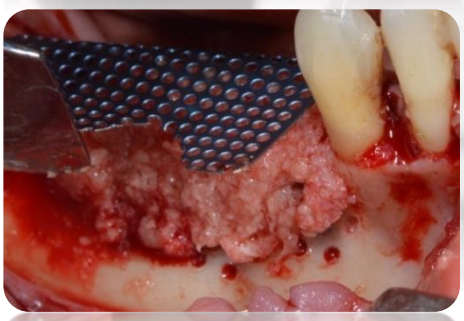

Fig.8 – Application of mixture of particulated autogenous bone and Encore allograft

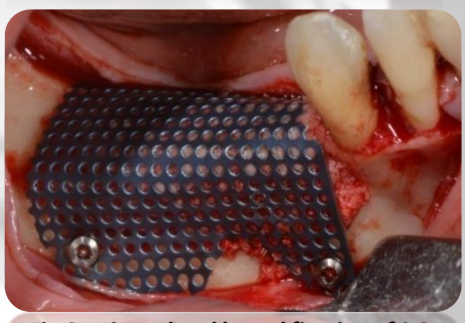

Fig.9 – Lingual and buccal fixation of 0.2-mm thickness titanium mesh (MT-20-46 DeOre)

Fig.10 – After a follow-up of 9 months, the second surgical phase was reported

Fig.11 – Removal of Titanium mesh and exposure of newly-formed bone

Fig.12 – Absence of peri-implant bone defect And measurement of vertical bone gain

No statistically differences were reported (P=0.05). 99.0% of implants showed a primary stability. Surgical and healing complication rates were 5.0% and 15.9% in group A; 15.0% and 20.0% in group B, respectively. In group A, the vertical bone gain was 4.3 ± 1.2 mm (range 2.3 – 6.5 mm); similarly, in group B, the vertical bone gain was 4.2 ± 1.1 mm (range 1.8 – 6.8 mm).
No statistical differences were observed between the 2 study groups.