

OBJECTIVE OF THE COURSE

The main topic that will be treated during the four days of the course will be the vertical and horizontal bone regeneration in the posterior and anterior area of the upper and lower jaw.

A careful and complete presentation regarding the soft tissue management (Brushing Technique and New Lingual Flap) will be described with all attendees in order to avoid the known consequences caused from the early exposure of the membranes.

The management of the soft tissue around implants, inserted in regenerated bone, will be the second interesting topic that will be dealt with.

In association with the theoretical part some surgical treatments will be performed in live surgery, so that the scientific schedule can be completed.

DATE DEL CORSO

18 - 19 - 20 - 21 November 2019

SEDE DEL CORSO

Studio RONDA DOTT. MARCO
16122 Genova
Piazza Brignole, 3/8 - Tel. 010583435

COSTO DEL CORSO

MODALITÀ DI PAGAMENTO

INFORMAZIONI E ISCRIZIONI

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Provider ECM



Genova
18-21 November
2019

Prof. Marco
RONDA

**Management of the
Vertical and Horizontal
bone defects in Lower
and Upper Jaws**

Prof. Marco Ronda

He graduated in medicine 1990 at the University of Verona and since then he practices dentistry at his private office in Genoa.

Among the many post graduate courses attended, he attended the one-year-course in advanced surgery held by Prof. Massimo Simion in Milan and attended a Master course in Regenerative Surgical Techniques at the University of Pennsylvania.

He annually attends the meetings organized by 'American Academy of Implant Dentistry' and several specialized courses on the techniques of horizontal and vertical bone regeneration.

He also participates annually at the Continuing Dental Education at the New York University College of Dentistry, Post Graduate.

He periodically gives lectures and provides practical training courses in implantology and bone regeneration techniques at his office. He also speeches at national and international meetings and cooperates with several Italian Universities, like Milan, Trieste, Modena, Genoa, Pisa, and Bologna.

The International Journal of Periodontics & Restorative Dentistry published his study reporting a new surgical technique of lingual flap management appropriate in all cases of increase in bone volume.

In a short time, on the same magazine, a new clinical study on the management of the buccal flap titled "A novel approach for the coronal advancement of the buccal flap" will be published.

He is also author of an article published on COIR magazine comparing the clinical outcomes in GBR with the e-ptfe and d-ptfe non resorbable membrane.

He is an active member of the SICOI (Italian Oral Surgery Society) and co-founder of the Piezosurgery Academy.

1st DAY

9.00 a.m. - 1.00 p.m.
1.00 p.m. - 2.00 p.m. Lunch
2.00 p.m. - 6.00 p.m.

Theoretical part

- Indication and Contraindication at the GBR procedure
- GBR Guidelines for a high surgical and prognostic predictability
- Concept of Encumbrance Volume and its application in the vertical bone regeneration of the posterior lower jaw
- Is the keratinised tissue band needed for the high surgical predictability of GBR?
- Design of the flaps in free edentulous ridges

Live surgery

- **First Surgery:** management of the soft tissues around implants inserted in regenerated bone I could show them how we should deal with the soft tissues around the implants, how we should restore the depth of the fornex and how we should suture, harvest and shape the tissue graft
- **Second Surgery:** removal of a membrane after 6 months from the GBR Procedure with simultaneous insertion of the implants can show how to draw a non invasive flap and evaluate the evidences related to the regenerated bone.

2nd DAY

9.00 a.m. - 1.00 p.m.
1.00 p.m. - 2.00 p.m. Lunch
2.00 p.m. - 6.00 p.m.

Theoretical part

- Timing of the GBR procedure in the posterior lower jaw
- Description and analysis of the soft tissue realising techniques
- One Stage Vs Two Stages: when one or the other procedure is recommended
- How is possible to reduce the incidence of the infections below the membranes although if the flaps are perfectly closed on top of the membranes?
- Discussion about Graft, Sutures, and different other Material for an ideal GBR surgical approach.

Live surgery

- **First Surgery:** surgical treatment of a vertical bone defect in the posterior lower jaw with the simultaneous insertion of the implant: a preliminary discussion will be held before the surgical treatment and so I can describe all details of the surgery, like the design of the flaps, the soft tissue amount that I need to close, without tension and for first intention, the sutures on top of the membrane. During the surgical treatment I will show you perfectly the 4 passivation techniques of the buccal and lingual flaps, the shaping of the membrane for a perfect adaptation to the defect, the different options for the fixing of the membrane, the different strategies to maintain "decontaminated" the surgical area an than all little details of this precise technique.

3st DAY

9.00 a.m. - 1.00 p.m.
1.00 p.m. - 2.00 p.m. Lunch
2.00 p.m. - 6.00 p.m.

Theoretical part

- GBR with absorbable membrane (Sausage Technique): results, indication and limitation.
- Diagnostic Mask in aesthetic area for the definition of an hypothetical new bone volume necessary for the support of the interdental papilla and a well integrated soft tissue profile with the adjacent teeth
- Timing and protocol of GBR procedure in aesthetic areas
- Analysis of the bone absorption after teeth extraction and consequently buccal and palatal bone regeneration

- **First Surgery one of these two different option**

The selection of one of these two surgical treatments will be in relationship at the availability of the cases but in a anyway will be taken into account as far as possible the preference expressed by colleagues.

First Option: management of the soft tissues around implants inserted in regenerated bone in aesthetic area

I could show them how we should deal with the soft tissues in the aesthetic areas after the GBR procedure, the removal of the membrane, the insertion of the implants the grafting of the connective soft tissue...the finalisation of the ideal gingival profile with restoration of the fornex depth and the keratinised soft tissue grafting and the mucosa gingival line realignment and the maneuvers for the recovery of possible mismatches in the lip vermillion

Second Option: connective soft tissue grafting at the removal membrane time:

in the aesthetic areas after the bone regeneration without the simultaneous insertion of the implants, at the membrane removal time and insertion of the implants has to be grafted a thick crestal connective tissue. A modest flap passivation will be performed for a primary closure of the flaps to ensure the needed protection of the connective soft tissue.

4st DAY

9.00 a.m. - 12.00 a.m.
12.00 a.m. - 12.30 a.m. Lunch
12.30 a.m. - 3.00 p.m.

Theoretical part

- Measuring of bone defect in order of the membrane shaping
- Soft tissues management after the GBR procedure ... timing and protocol.
- Timing and strategies of suturing and modalities for the reduction of the flap tensions
- Group session...find the mistake: a serie of GBR pictures will be screened and the participants have to understand with kind of surgical mistake has been done during the surgical procedure

- **Second Surgery one of these two different option**

The selection of one of these two surgical treatments will be in relationship at the availability of the cases but in a anyway will be taken into account as far as possible the preference expressed by colleagues.

First Option: a GBR approach will be performed in the anterior area (intercalate space)

The aesthetic areas normally are treated for the augmentation of the bone but without the simulation of the implants. The passivation of the buccal flap (Brushing Technique), the shaping of the membrane and the selection of ideal membrane size, the fixing of the membrane, distant screws, grafting material, e suture will be show during this surgical treatment

Second Option: a GBR procedure will be applied in the posterior upper jaw:

the simultaneous elevation of the sinus and the increase of the horizontal and vertical bone ridge will be presented during this surgical approach. As I have described for the first surgical solution the passivation of the buccal flap (Brushing Technique), the shaping of the membrane and the selection of ideal membrane size, the fixing of the membrane, distant screws, grafting material, e suture will be show during this surgical treatment.