

A black and white portrait of a middle-aged man with short, wavy hair, smiling. He is wearing a dark suit jacket, a white shirt, and a dark tie. His arms are crossed. The background is a light green circle on a white background. A small yellow circle with the letters 'OS' is positioned over his chest.

OS

GAMBORENA MASTERCLASS

IMMEDIATE IMPLANT PLACEMENT INTO FRESH EXTRACTION SOCKET

IÑAKI GAMBORENA

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SUMMARY

Topic:

Dr. Iñaki Gamborena presents a comprehensive approach to optimize functional and esthetic results with immediate implant placement and immediate restoration into fresh extraction socket by merging surgical, technical and restorative steps into one successful protocol.

Objectives:

Dr. Gamborena discusses the key elements of advanced aesthetics and implant dentistry, the critical thinking, and the importance of connective tissue through several detailed clinical videos.

TOPICS:

- key elements for advanced esthetics
- critical thinking, the importance of CTG
- evolution, concept & long-term results
- contemporary 8-step protocol
- type 2 socket treatment alternatives

About the author:

With more than 25 years of experience in private dental practice, Dr. Iñaki Gamborena is one of the world's leading experts in Implant Dentistry and Esthetic and Restorative Dentistry.

LEVELS

Difficulty ●●●●

Theory ●●●

Practice ●●●

KEY INFO

English

On Demand

Implant - Perio - Esthetic

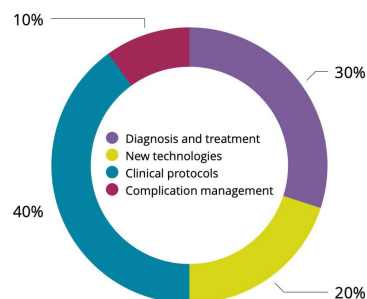
13h 60m

15 Lectures with 13 surgical videos

Surgery Yes

No Credits

SKILLS YOU WILL LEARN





Why enroll:

1. Learn the art of compensating reabsorption with this brand-new Masterclass on immediate implant placement into fresh extraction socket
2. Deepen your knowledge of the key elements of advanced aesthetics and implant dentistry thanks to 15 detailed theoretical- surgical videos and the exclusive Live Discussion with Dr. Gamborena
3. Enjoy lots of practical tips & tricks on how to optimize functional and esthetic results and merge surgical, technical and restorative steps into one successful protocol

Thanks to this Masterclass you will learn:

This Masterclass will mainly address the key elements of advanced aesthetics and implant dentistry, the critical thinking, and the importance of connective tissue through more than a dozen videos.

- key elements of advanced esthetics
- critical thinking, the importance of CTG
- evolution, concept & long-term results
- contemporary protocol in 8 steps
- type 2 socket treatment alternatives
- adjacent implants long-term results
- all-at-once concept
- take home message

Competences to be acquired by participants:

To provide them with the concept of lifetime achievement on immediate implant placement. Dr. Gamborena will describe how to solve problems and show a **contemporary protocol with 8 steps** that can be adapted to any kind of implant:

1. provisional restoration of the tooth to be extracted
2. atraumatic extraction
3. ideal implant placement with surgical guide
4. initial stability above 35-Ncm torque
5. 3D bone packing
6. customized abutment delivery
7. provisional reline
8. TCTG

A true Masterclass that includes a series of insights on how to plan ahead and how to control the final result and predictability, not only for the benefit of the patient, but also for a long-term successful prosthetic and surgical outcome.

Alternative treatments will be explored to:

1. Learn how to achieve better aesthetic results with CTG by discussing several implant esthetic failures and how to solve them
2. Maxillary tuberosity CTG donor site to reduce patient discomfort and achieve clinical gains
3. Learn how to reconstruct type 2 and 3 socket with a missing part of the alveolus
4. Applying different protocols on single, multiple and adjacent implants
5. All-at-once concept for single anterior implants placed and immediately restored with a permanent crown

INTERACTIVE Q&A ZOOM SESSIONS: the dates will be shared with attendees, 2 sessions will be made available to best suit your schedule.

During these LIVE Zoom sessions, participants will have a chance to submit their own questions and receive practical tips about the correct implementation of the approaches shown during the course. The recordings will be then made available to all participants.

Thanks to this educational format, participants will have the expertise of Iñaki Gamborena at their fingertips, and will have the possibility to watch and re-watch all the videos as many times as they wish.



FREE Lecture 1: Treatment philosophy to preserve what there is immediate implants

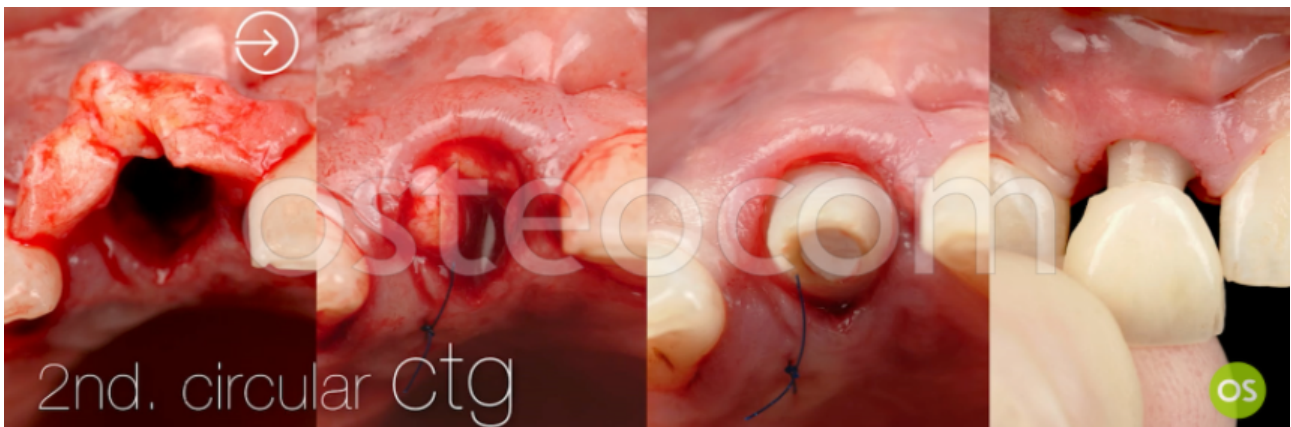
The ultimate goal is to replace missing teeth with implant restorations that are indiscernible from the surrounding dentition in terms of shape, morphology, and color, but also to restore and maintain a natural hard and soft-tissue architecture, which is considered the frame for any restoration. Soft-tissue aberrations, defects, and deficiencies will make even the most beautiful restoration unsuccessful, not just in the beginning, but also when they happen long after completion of treatment. This is probably the most challenging aspect in implant dentistry.

This part of the lecture will focus on how much CTG can create to achieve the above-mentioned goal with several implant esthetic failures and how to solve them.

Lecture 2: Critical thinking, the importance of CTG

Traditionally, the palate was the preferred connective tissue donor site due to its abundance of tissue and relatively easy access. Limiting anatomical structures on the palate, great variations in thickness, and significant patient discomfort are some of the disadvantages reported.

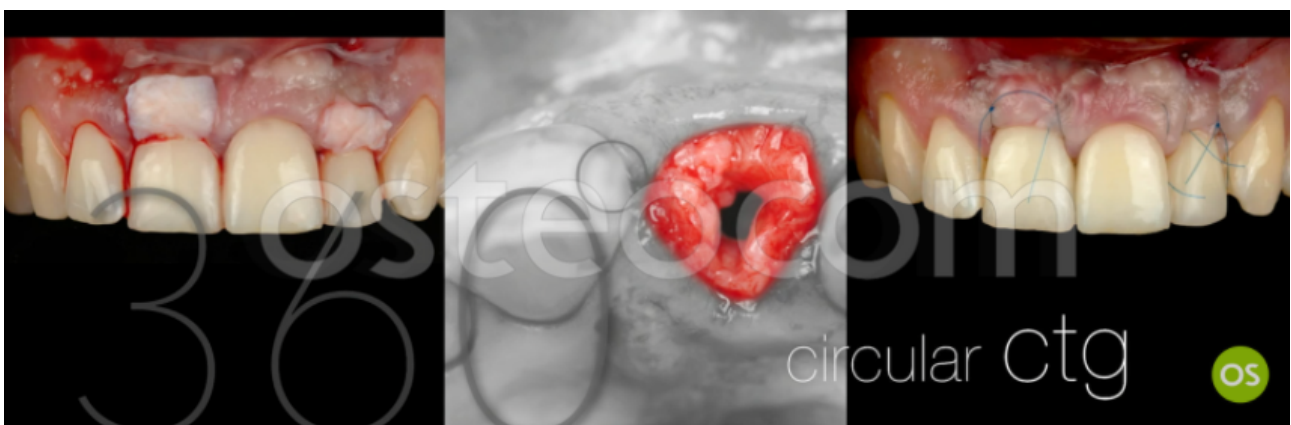
Another CTG donor site is the maxillary tuberosity, which is less favored due its more complicated surgical access. However, patient discomfort is more limited compared to palatal donor areas. In addition, tissue thickness is typically greater and more consistent among patients. Unlike palatal subepithelial connective tissue, it is denser, due its higher collagen fiber content, and contains less fat, making it less prone to postoperative resorption. In this section surgical technique will be discussed in order to facilitate the sampling of tissue.



Lecture 3: Evolution, concept & long-term results

The fact that even the slightest changes can have devastating consequences in esthetic areas is one of the major challenges. These problems are exacerbated in younger patients, where treatment outcomes should last for many years or even decades.

Tuberosity CTG has help us successfully achieve our goals at any age, providing a truly stable long-term result. We are going to introduce representative cases of consistent long-term outcome in our professional career.



Lecture 4 (Surgical Video): DTX Studio Implant Plan & execution - Smartfusion

A clinical video shown in lecture 3 from the all pre- prosthetic and laboratory aspects to surgery

- 6.provisional restoration + final impression
- 7.pour PVS final impression in epoxy
- 8.full contour wax-up
- 9.2 silicone matrices indexes before cutting abutment
- 10.scan epoxy model to perform smart fusion
- 11.DTX implant studio implant placement - export STL file
- 12.print surgical guide & bond ring
- 13.transfer implant placement into epoxy master model
- 14.duplicate tooth diameter & finishing line into custom abutment
- 15.transfer implant head orientation into surgical guide

Lecture 5: Contemporary protocol, the 8 steps - Step 1

Planning ahead is the key to success with immediate implant placement into fresh extraction sockets. It is essential that the dental team understands and properly carries out every step for predictable long-term esthetic results.

This lesson will focus on the first of the 8 steps of this systematic approach:

1. Provisional restoration of the tooth to be extracted

- 16.Placing a provisional restoration before tooth extraction, no matter the condition of the tooth to be extracted, and before immediate implant placement has many advantages for implant position planning and simplified treatment execution
- 17.Learning how to copy the result achieved with the provisional crown and transfer it to the implant
- 18.Understanding how to evaluate the ideal emergence profile and reference point for implant position depth with the intracrevicular preparation finish line
- 19.Learning how to communicate to the dental technician the location of the subgingival crown margin, tooth diameter, and the prepared abutment characteristics
- 20.Understanding how to estimate the necessary CTG volume using the abutment as a reference to evaluate the amount of vertical tissue collapse



Lecture 6: Contemporary protocol, the 8 steps - Steps 2 and 3

This lesson will focus on the second and third of the 8 steps of this systematic approach:

2. Atraumatic extraction

3. Ideal implant placement with surgical guide

21. The technique to perform the atraumatic tooth extraction without placing any instrument between the crestal bone and the root
22. The systems and tools available for an atraumatic tooth extraction
23. The ideal 3D implant placement: all immediate implants are inserted with a computer or model-based surgical guide to place the implant precisely with the planned position, angulation, and depth.
24. Implant recommended placement: the authors' opinion

Lecture 7: Contemporary protocol, the 8 steps - Steps 4, 5, 6, 7 and 8

This lesson will focus on the fourth, fifth, sixth, seventh and eighth of the 8 steps of this systematic approach:

25. initial stability above 35-Ncm torque
26. 3D bone packing
27. customized abutment delivery
28. provisional reline
29. TCTG

In this lecture you will learn that:

30. Reaching 35Ncm or above is mandatory for a successful treatment alternative
31. Insertion torque should be 35 Ncm or above and that this can be achieved only with proper selection of implant type, shape, diameter, and length
32. The initial implant osteotomy is critical for reaching the desired insertion torque value when placing an implant into a fresh extraction socket. The cutting,

compressing, bone expansion, and, most importantly, the reorientation capabilities, with no major torque loss, make this an ideal implant for immediate placement

33. 3D bone packing technique provides support and stabilization of the surrounding bone
34. Customized implant restoration serves to seal the socket and protect the tissue grafts.
35. There is a customized abutment and cement-retained provisional restoration in the immediate implant protocol
36. Sealing the sockets protects and retains the blood clot and the CTG
37. You can transfer to the position of the implant abutment precisely as fabricated on the master model
38. The advantage of using the same provisional again is that it already features all the necessary anatomical, functional, and esthetic parameters.
39. CTG placement is the final step of the immediate implant treatment protocol.
40. The donor site of the CTG is arguably the most important factor for long-term soft tissue stability



Lecture 8 (Surgical Video): Video presentation of a clinical case on the 8-step schematic protocol

41. Delivering a provisional restoration from day first (on tooth 1st)
42. surgical stent ready for ideal implant placement
43. delivery at day of surgery: the final Zr abutment
44. same provisional restoration relined on the final Zr abutment
45. CTG from tuberosity around the implant

Lecture 9 (Surgical Video): Case presentation with video surgeries, recorded in Dr. Gamborena's Clinic

- 46. presentation of the clinical case using different design with Ti Ultra Nobel Implants
- 47. presentation of the post-op results
- 48. discussion of the surgical approaches used

This surgical lectures focuses on:

- 49. tooth extraction + immediate implant placement in 22 + CTG and pontic in 23 + provisional abutment and crown
- 50. provisional restoration on tooth
- 51. the importance of provisional in defining the tooth diameter/locating margin
- 52. planning the incisal implant placement
- 53. transfer the provisional interface and customized abutment
- 54. CTG below the finishing line

Lecture 10: Type 2 socket treatment alternatives

This lecture combines clinical and surgical clips.

Elian Type 2 socket represents a higher degree of difficulty as one of the socket is missing. This means that it will have to be reconstructed as in the previously discussed protocol.

Lecture 11: Type 2 socket treatment alternatives: multilayer technique

This lecture, which combines clinical and surgical videos, will focus on the different treatment alternatives as well as the treatment sequencing, materials and execution and their relative outcome.

Lecture 12: Socket type 3 treatment alternatives

This lecture, which combines clinical and surgical videos, will focus on the treatment approach to adopt when the tissue is also deficient as in type 3 sockets where the implant positioning is uncommonly deeper and where a transmucosal abutment is advisable for bone stability.

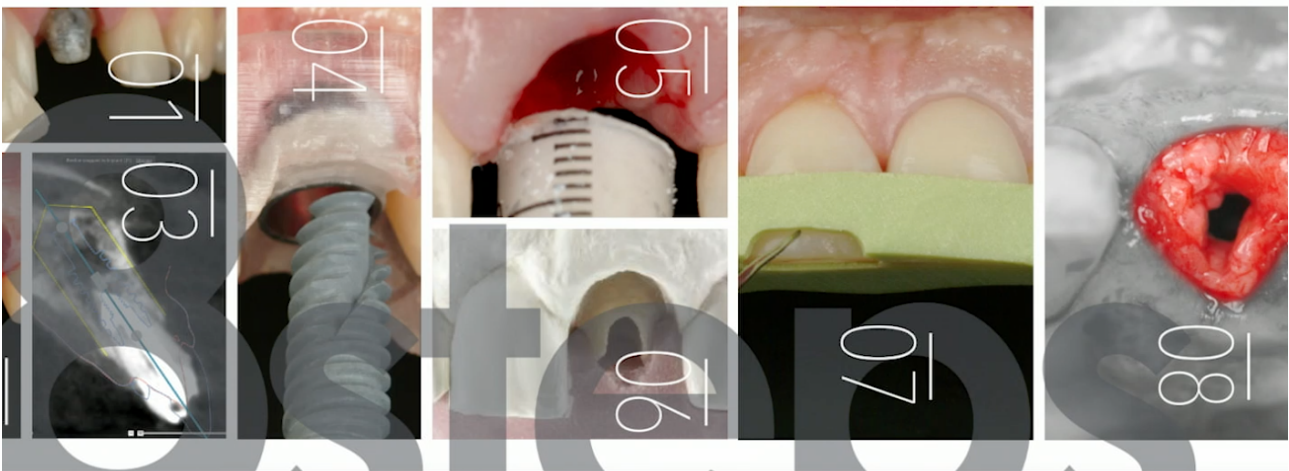
Lecture 13: Adjacent implants long-term results - part 1

The above protocol applies to single, multiple, and adjacent implants. The protocol has been successfully applied to a wide variety of cases. Periapical radiographs document the initial situation of some cases in 2006 and the follow-up situation up to 2021. In this

section, the cases discussed prove the satisfying outcome obtained on average in 15-year span.

Lecture 14: Adjacent implants long term results - part 2

The above protocol applies to single, multiple, and adjacent implants. The protocol has been successfully applied to a wide variety of cases. Periapical radiographs document the initial situation of some cases in 2006 and the follow-up situation up to 2021. In this section, the cases discussed prove the satisfying outcome obtained on average in 15-year span.



Lecture 15: All-at-once concept

This series of cases depicts a new “all-at-once concept” described in 2016 for instantly placed single anterior implants that are immediately restored with a definitive Crown on type 1 socket. The final crown is fabricated beforehand on the natural tooth to be extracted and then picked up with a polyvinyl siloxane (PVS) impression. In the laboratory, computer-guided or model-based implant surgery is simulated on the master cast. The final zirconia abutment is fabricated on the same model and retrofitted to the definitive crown to construct a screw-/ cement-retained implant restoration.

Critical aspects are explained in detail in this lecture with detailed videos of some of the cases presented at 5 years.

Benefits of the all-at-once concept:

55. The all-immediate approach of the procedure allows for significantly faster healing and less trauma, which translates to patient satisfaction.

56. The ASC abutment design provides great versatility and ideal implant placement. One of the disadvantages is that this concept is technique-sensitive and requires a certain level of expertise as well as excellent communication between the clinician and the dental technician.



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to see the
course page



Dr. Iñaki Gamborena

Degree in Dentistry, U.O.D. 1989. 1989-90 Certificate in Occlusal and Temporo-mandibular disorders. Mexican Association of Occlusal Reconstruction (Mexican Association of Occlusal Reconstruction), Mexico City. 1990-92 Certificate in Autonomous Restoration Dentistry of Nuevo León University, Monterrey, Mexico. 1993-96 Certificate in Prosthodontics & Master of Science in Dentistry. University of Washington, Seattle WA - USA. 1993-96 Winner of the "Bolender Contest Award" for Academic and Clinical Excellence. Associate Professor at the University of Washington Dental School since 2001. Associate Professor (Clinical Associate Professor) at the Medical College of Georgia, Faculty of Dentistry. Active member of the European Academy of Aesthetic Dentistry (European Academy of Esthetic Dentistry, E.A.E.D.). International KOL and speaker at continuing education courses worldwide.

