

26. PARTICULARITIES OF IMPLANT-PROSTHETIC REHABILITATION IN THE AESTHETIC ZONE OF THE UPPER JAW

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Introduction. Oral implantology is one of the dental sciences that is developing at a very fast pace. As a result of the development of social media, the emergence of new beauty trends, and the accessibility of information across all social channels, patients have greater demands and expectations for treatment outcomes beyond human biological limitations. Implant-prosthetic rehabilitation in the aesthetic zone faces particular challenges and difficulties determined by these new standards in the modern world.

Aim of study. To study and determine the peculiarities of bone atrophy and implant rehabilitation of the aesthetic zone in the upper jaw and to determine the optimal method of implantation in the aesthetic zone.

Methods and materials. In this study we used research methods and analysis of national and international existing literature on implant-prosthetic rehabilitation in the aesthetic zone of the maxilla. IBN, Google Scholar and PubMed platforms were used to search for articles. Thirteen clinical cases of patients who visited the University Dental Clinic No. 2 with single tooth edentulous in the aesthetic zone of the upper jaw were also analyzed.

Results. Following the analysis of the articles and the patients who visited the clinic, immediate and delayed implantation were considered as treatment options. In both cases the implant survival rate was 95%. On average, marginal bone loss was 0.56 mm for immediate and 0.67 mm for delayed implants. Each method has its own indications, and by understanding tissue biology correctly we can distinguish when one method or the other would be preferred.

Conclusion. There is no difference in the long-term integration of the implant in the aesthetic zone. In the case of both immediate and delayed implant placement the osseointegration rate is 95%. However, due to the presence of bone resorption mechanisms that are activated following extraction, it is better for the patient to receive immediate implantation, within the limits of bone quality of the implant site and the general condition of the patient.