

Materials and methods. The study group comprises patients who benefit from the application of platelet-rich fibrin and some of them who do not.

Results. It is proved that regeneration of the sockets can be achieved using a non-expensive method of augmentation and prevent the reduction of bone size in future oral rehabilitation.

Conclusions. The benefits of using platelet-rich fibrin are to stimulate bone regeneration, increase osteogenesis and to deal with postextractional complications.

Key words: augmentation, platelet-rich fibrin, extraction, socket, tooth.

288. IMMEDIATE IMPLANT PLACEMENT AFTER EXTRACTION

Author: **Marcel Muntean**

Scientific adviser: Chele Nicolae, associate professor, MD, PhD, Department of Maxillo-facial Surgery and Oral Implantology

Nicolae Testemitanu State University of Medicine and Pharmacy of the Republic of Moldova

Introduction. Nowadays, the implant-prosthetic treatment is a globally accepted, well-defined rehabilitation option for edentulous patients. According to the classical implantation method, the implants are installed in two stages, after the final cure of the post-operative alveolar (6-12 months after extraction). During this time, the alveolar apophysis is atrophic, especially on the vestibular side, and the implant installation becomes difficult.

Considering patient's expectations and requests for reducing the number of procedures and increasing the aesthetic results, a widely recommended procedure is the immediate implantation. A tooth extraction followed by dental implant insertion and a fixed temporary restoration has many advantages for soft tissue preservation.

This study describes the surrounding implant structures, their advantages and disadvantages, contraindications and specific features of the immediate implant placement regarding the post extraction alveolar ridge anatomical and structural elements.

Aim of the study. Determination of efficiency of immediate implantation versus the classic method of implantation.

Materials and methods. The study included 20 patients- 9 males and 11 females, aged between 27 and 60 years old, with 20 extracted teeth. The group of 20 patients was divided into 2 groups. There were 10 patients in the two-step implantation protocol group and 10 patients in one-step implantation protocol group.

Results. At the end of the first year, in the group of patients with the two-step implantation method, all implants had good stability, except of one lost implant at the end of the second month. We determined the loss of bone tissue of 1.0 ± 0.70 mm after the radiological control. Implants in the one-step implantation group were clinically stable without mobility. Loss of bone tissue was 0.8 ± 0.40 mm after 1 year.

Conclusions. Planned and executed correctly, immediate implant placement after extraction can offer a range of benefits, such as: reduced number of procedures, preservation of the width and height of the alveolar bone, preservation of soft tissue, obtaining an ideal location for the implant.

Key words: tooth extraction, bone desorption, implantation

289. ESTHETIC AND MORPHOFUNCTIONAL REHABILITATION OF PATIENTS WITH RADICULAR CYST

Author: **Ilie Tilinschii**

Scientific adviser: Mostovei Andrei, MD, PhD, Associate professor, Department of Oral and Maxillo-facial Surgery and Oral Implantology *Arsenie Gutan*