RESONANCE FREQUENCY ANALYSIS OF IMPLANTS SIMULTANEOUSLY INSERTED IN SINUS GRAFTED SITES.

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بسم الله الرحمن الرحيم

لا يُكِلِّفُ اللَّهُ نَفْسًا إِلَّا وُسْعَهَا لَهَا مَا كَسَبَتْ وَعَلَيْهَا مَا أَنْ أَوْا خِذْ نَا إِن نَسِينَا أَوْ أَخْطَأْنَا وَبَنَا وَعَلَيْهَا مَا آكَتَسَبَتْ رَبِّنَا لا ثُوا خِذْ نَا إِن نَسِينَا أَوْ أَخْطَأْنَا وَبَنَا وَلا تَحْمِلْ عَلَيْنَا إِصْرًا كَمَا حَمَلْتُهُ, عَلَى ٱلَّذِينَ مِن قَبْلِنَا وَبَنَا وَلا تُحْمِلْ عَلَيْنَا مَا لا طَاقَة لَنَا بِهِ عَوَاعْفُ عَنَّا وَآغْفِر لَنَا وَآرْحَمْنَا وَلا تُحَمِّلُنَا مَا لا طَاقَة لَنَا بِهِ عَوَاعْفُ عَنَّا وَآغُفِر لَنَا وَآرْحَمْنَا أَنْ تَمُولُلْنَا فَآنِهُ وَلَا تُعَمِّلُنَا عَلَى ٱلْقُومِ ٱلْكُنْفِرِينَ لِيْنَ اللَّهُ وَالْمَا عَلَى ٱلْقُومِ ٱلْكُنْفِرِينَ لِيْنَا

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To

My Mother

&

My Father

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LIST OF ABBREVIATIONS

DFDBA Deminalized freezed dried bone

RFA Resonance frequency analysis

ISQ Implant stability quotation

PSME Piezoelectric sinus membrane

HA Hydroxyl apatite

TCP Tricalcium phosphate

FHA Flurohydroxy apatite

BMPs Bone morphogenic proteins

TGF-β1 Transforming growth factor beta

CRA Cutting resistance analysis

RTT Reverse torque test

BIC Bone implant contact

RIV Removal torque value

DMC Dental mobility checker

POWF Pulsed oscillation wave form

AED Acous electric deriver

ADR Acous device receiver

PTV Periotest value

PDL Periodontal ligament

DBBM deproteinized bovine bone mineral

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INTRODUCTION

Dental implants have become a popular alternative in oral rehabilitation in the past two decades, and numerous studies regarding dental implants therapy have showed successful outcomes. (1-4)

The posterior maxilla commonly presents with limitations in alveolar bone height for implant placement. Loss of maxillary molars leads to rapid loss of the alveolar bone that represents the maxillary sinus floor and increases the maxillary sinus cavity causing a phenomenon known as sinus pneumatization; bone loss can extend to the alveolar process, leaving a thin wall of bone between the maxillary sinus and the oral cavity. This may compromise the alveolar bone height thereby limiting the possibilities of future implant placement in the affected sites. (5-7)

The successful placement and integration of endosseous implants under such circumstances requires augmentation of the maxillary sinus floor. This procedure may help increases the available alveolar bone height facilitating future implant placement in the compromised sites. Elevating the sinus involves augmenting and grafting the floor of the maxillary sinus with bone graft material. The grafting materials, which are derived from or composed of tissue involved in the growth or repair of bone, could encourage bone formation or stimulate quicker bone growth in bone implant sites. (8-10)