Assessment of Hyaluronic Acid Carrier with Xenogenic Cancellous Bone for Maxillary Sinus Augmentation: A Clinical Study

Thesis Submitted for partial fulfillment of the requirements for Doctoral Degree in Oral and Maxillofacial Surgery,
Faculty of Dentistry, Ain-Shams University

By **Rehab Ahmed Ali AbdAllah**

B.D.S 2001 M.Sc. 2011

Assistant Lecturer of Oral and Maxillofacial Surgery Faculty of Dentistry, Misr International University

Supervised by

Mohamed Diaa Zein Elabdeen Ismail

Professor of Oral and Maxillofacial Surgery Faculty of Dentistry, Ain Shams University

Mohamed Abdul Magied Katamish

Professor of Oral and Maxillofacial Surgery Faculty of Dentistry, Ain Shams University

Nahed Samy Khamis

Professor of Pathology Faculty of Medicine, Ain Shams University

Moustafa Mohamed sayed taha

Lecturer of Oral and Maxillofacial Surgery Faculty of Dentistry, Ain Shams University

> Faculty of Dentistry Ain Shams University 2017

بئي بناي التجالي التعالي التعا

سورة البقره الايتين 285و 286

<u>ACKNOWLEDGEMENT</u>

Thanks to God, The most merciful, the most compassionate.

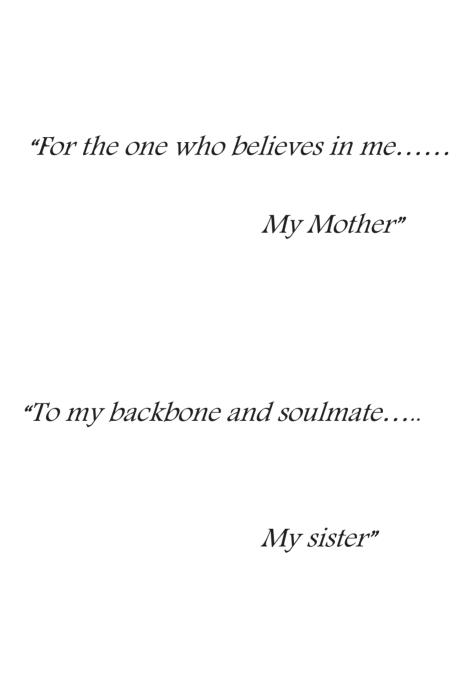
I would like to express my deep appreciation to prof. Dr. Mohamed Diaa Zein Elabdeen professor of Oral and Maxillofacial Surgery Department, Faculty of Dentistry, Ain Shams University for his great help and encouragement throughout this work.

No words can describe my deep appreciation and thankfulness to prof. Dr. Mohamed Abdul Magied Katamish professor of Oral and Maxillofacial Surgery Department, Faculty of Dentistry, Ain Shams University for his helpful directions, honest assistance and valuable advices throughout the course of this thesis.

I would like to express my special thanks and gratitude to Prof.Dr/
Nahed Samy Khamis professor of Pathology, Genaral pathology
department, Faculty of Medicine, Ain Shams University, for her sincere
support during histological assessment of the results of this research and
without her help the work, wouldn't have been accomplished.

I would like to thank Dr. Moustafa Mohamed Sayed Taha, lecturer of Oral and Maxillofacial Surgery, Faculty of Dentistry, Ain Shams University, for his continuous guidance, support and help throughout the research.

Finally, I would like to thank all the staff of oral and Maxillofacial surgery Department, Ain Shams University and all who have helped me throughout the performance of this study.



List of Contents

Introduction
Review of literature
Aim of the Study
Patients and Methods
Results
Discussion
Summary
Conclusion
Recommendations
References
Arabic summary

List Of Abbreviations

Abbreviation Full name

HA Hyaluronic acid

GBR Guided Bone Regeneration

BMP bone morphogenetic protein

ABB Anorganic Bovine Bone

FFB fresh frozen bone

DFDBA demineralized freeze dried bone allograft

PRF Platelet rich fibrin

PDGF platelet-derived growth factor

B-TCP Beta Tricalcium Phosphate

TCP Tricalcium Phosphate

GF Growth Factors

TGF Transforming Growth Factor

IGF Insulin like Growth Factor

FGF Fresh frozen Growth Factor

PRP platelet rich plasma

rhBMP recombinant bone morphogenetic protein

MSCs Mesenchymal Stem Cells

CD44 Cluster of Differentiation 44

MHBA Mineralized human bone allograft

CT Connective tissue

CBCT cone beam computerized tomography

DBM demineralized bone matrix

Fig Figure

mm Millimetre

Ncm Neuten centimetre

MT Messon's Trichrome

TRAP Tartrate Resistant Acid Phosphatase

REC Research Ethical committee

SD Standard deviation

CI Confidence Intervals

IBM International business machine

SPSS Statistical program for social science

SFE Sinus floor elevation

CHBG Collagenated Heterologous Bone Graft

List Of Figures

No	Figure title
Figure 1	patient evaluation chart
Figure 2	Preoperative CBCT of maxilla showing bilateral pneumatized maxillary sinus related to radiopaque objects.
Figure 3	Preoperative CBCT of maxilla showing the measurement of
	alveolar bone height in relation to the maxillary sinus floor.
	CBCT coronal view showing posterior superior
Figure 4	alveolar artery lying at the lateral wall of maxillary
	sinus.
Figure 5	Crestal incision with anterior and posterior releasing incisions.
Figure 6	Reflection of full thickness flap.
Figure 7	Bony window preparation by round diamond bur size 8.
Figure 8	Sinus membrane elevation.
Figure 9	Bony cavity created after membrane elevation.
Figure 10 a, b & c	Photographs showing: a, the sinus cavity was filled with graft material, b, the sinus cavity was closed by collagen membrane and c, suturing. (<i>Control group</i>).
Figure 11 a, b	a, xenograft (anorganic bovine bone). b, collagen type membrane.
Figure 12 a, b & c	Photographs showing: a, the sinus cavity was filled with graft material mixed with HA,(study group)/b, the hyaluronic acid application over the graft material before closure and c: Suturing and Closure (study group).
Figure 13 a & b	 a: Hyadent BG Bio Science, b:The mixture of xenograft and Hyadent gel.

Figure 14	CBCT after 6 months of sinus lifting
F: 15	Preoperative CBCT (gray image) which superimposed by
Figure 15	postoperative CBCT (red image).
	postoperative elber (red image).
Figure 16	the trephine bur while harvesting the core biopsy.
Figure 17	Trephine bur containing biopsy.
Figure 18	Dental Implant successfully in place.
Figure 10	A panoramic view showing dental implants installed after
Figure 19	successful sinus augmentation.
Figure 20	final fixed prosthesis
Figure 21	Cell Marque Sigma Aldrich Company-USA
Figure 22	Screen shot from Leica Q win and Q go software.
Eigung 22	Bar chart representing mean and standard deviation values for
Figure 23	bone height before and after augmentation within each group
Ei 24	Bar chart representing mean and standard deviation values for
Figure 24	newly formed bone percentages in the two groups.
Fi. 27	Bar chart representing mean and standard deviation values for
Figure 25	bone marrow percentages in the two groups
Eigure 26	Bar chart representing mean and standard deviation values for
Figure 26	residual bone percentages in the two groups
Eigura 27	Bar chart representing mean and standard deviation values for
Figure 27	osteoid tissue percentages in the two groups
Figure 29	Bar chart representing mean and standard deviation values for
Figure 28	mature bone percentages in the two groups

	Clinical photographs showing a case with hilatoral sinus lifting
Figure 29	Clinical photographs showing a case with bilateral sinus lifting (right side: control group/ left side: study group). a. preoperative, b.postoperative after loading of successful dental implants bilaterally.
Figure 30	A preoperative reformatted panoramic view showing a case with bilateral sinus pneumatization.
Figure 31	A postoperative reformatted panoramic view showing a case with bilateral sinus augmentation after 6 months.
Figure 32	A panoramic view showing the case after implant placement.
Figure 33	Clinical photographs showing a case with unilateral sinus lifting (right side: study group). a. preoperative, b.postoperative after loading of successful dental implants unilaterally.
Figure 34	A preoperative reformatted panoramic view showing a case with unilateral sinus pneumatization.
Figure 35	A postoperative reformatted panoramic view showing a case with unilateral sinus augmentation after 6 months.
Figure 36	A panoramic view showing the case after implant placement.
Figure 37	Haematoxylin and Eosin (H&E) stained sections of (Group A), showing newly formed bone (NB) with Bone marrow (BM). (Arrow) dense inflammatory reaction.(H&E 200 magnification scale bar:100 mm)
Figure 38	Haematoxylin and Eosin (H&E) stained sections of (Group B), showing newly formed bone (NB), Bone marrow (BM) and residual bone graft(RM). (Arrow) presence of Gient cells indicating the process of remodelling.(H&E 200 magnification, scale bar:100 mm)
Figure 39	Haematoxylin and Eosin (H&E) stained sections of (Group B), showing newly formed bone (NB), Bone marrow (BM) and residual bone graft (RM). (Black arrow) showing lines of remodeling. (Blue arrow) showing blood vessel.(yellow arrow) showing osteocytes. (Red arrow) showing osteoblastic rimming.(H&E 200 magnification, scale bar:100 mm)