







شبكة المعلومـــات الجامعية التوثيق الالكتروني والميكروفيا.



جامعة عين شمس

التوثيق الالكتروني والميكروفيلم



نقسم بللله العظيم أن المادة التي تم توثيقها وتسجيلها على هذه الأفلام قد اعدت دون آية تغيرات



يجب أن

تحفظ هذه الأفلام بعيداً عن الغبار

40-20 في درجة حرارة من 15-20 منوية ورطوبة نسبية من

To be kept away from dust in dry cool place of 15 – 25c and relative humidity 20-40 %









B 1.187



CLINICAL EVALUATION OF BOVINE-DERIVED HYDROXYL APATITE IN THE TREATMENT OF PEIODONTAL OSSEOUS DEFECTS

Thesis
Submitted in Partial Fulfillment
of Master Degree in
Oral Medicine and Periodontology

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DEDICATION

TO MY PARENTS;

MY HUSBAND AND

MY DAUGHTERS "AYA & NORAN"

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First and foremost I feel always indebted to GOD, the most kind and the most merciful.

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INTRODUCTION

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Periodontitis is an inflammatory disease of the periodontium which is characterized by progressive destruction of the tissues supporting the tooth.

The ultimate goal of periodontal therapy is the reversal of periodontitis by regeneration of new bone, cementum, and periodontal ligament. Bone graft, both autogenous and allogenic are felt to be essential if restoration of lost bone accompanied by a functional attachment apparatus is to be achieved.

Osseous grafting has been shown to be clinically successful for time intervals exceeding 20 years when encompassed in a comprehensive care program based on effective daily plaque control. However, the frequent lack of intra oral bone available and potential problems due to allograft materials have led to the search of substitute.

The advent of AIDS has created patient fears regarding human tissue transfer. Also a growing awareness of disease transmission via contaminated blood and tissue has raised concerns about allograft materials.

Alternative allograft materials are of increasing interest to clinicians. One such alternative is natural bovine derived hydroxylapatite (Osteograf/N).

REVIEW OF LITERATURE

REVIEW OF LITERATURE

Chronic inflammatory periodontal conditions encompass a number of diseases that affect the gingival tissues, periodontal connective tissues and supporting bone. All these conditions are characterized by breakdown of connective tissue and loss of alveolar bone (Page and Schroeder, 1982).

The onset and progression of inflammatory periodontal disease is triggered by interaction of host defense mechanisms and periodontal pathogens present in dental plaque. Bacteria that are associated with progressive disease are capable of producing a variety of bioactive molecules that can directly affect the host including lipopolysaccharides (LPS), proteases and other enzymes and cytotoxic molecules. The interaction between the host cells and these molecules will determine the outcome of infection (Van Dyke et al., 1993).

Approximately a dozen of the several hundred bacterial taxa which can inhibit the human oral cavity have been implicated as periodontal pathogens. There are a group of periodontal micro-organisms for which extensive and convincing data exist that they are etiologic agents in periodontitis. These include *Actinobacillus actinomycetemcomitans*, *Bacteriodes forsythus* and *Porphyromonas gingivalis*. There