



Dr. José Xabier Arévalo Varela

Dentistry Degree (Universidad Autónoma – Honduras)
 Oral Medicine Postgraduate Course (Univesidad de Barcelona – Spain)
 Implant Dentistry Certificate (Goteborg University – Sweden)
 Clinical Periodontology Certificate (Goteborg University – Sweden)
 Research in Dentistry Official Master (Univesidad de Barcelona – Spain – 2008)
 Clinical stays in several foreign universities
 Private surgery on Implantology
 Collaborating teacher in several national and international certificates
 Author of several papers in indexed international journals

Collaborators

Dr Armando Gracia – Implantologist
Mr. Andrés Mur – Prosthodontist

Immediate total restoration

PATIENT

82 year old male.

MEDICAL HISTORY

- Non-smoker.
- No medical pathologies or interesting records.
- Upper and lower partial edentulism.
- Worn facets which indicate clenching and/or bruxism episodes.
- Brachyfacial pattern.

REASON OF THE VISIT

Evaluate the possibility of eliminating the upper and lower removable prosthesis.

TREATMENT PLAN

- Extraction of all remaining teeth.
- Bone remodelling with height reduction of upper anterior sector's bone crest.
- Case study through virtual planning software.
- Placement of six external connection post-removal implants into the jaw and five into the lower jaw.
- Temporary restoration through a completely acrylic fixed screw-retained bridge.

Immediate total restoration



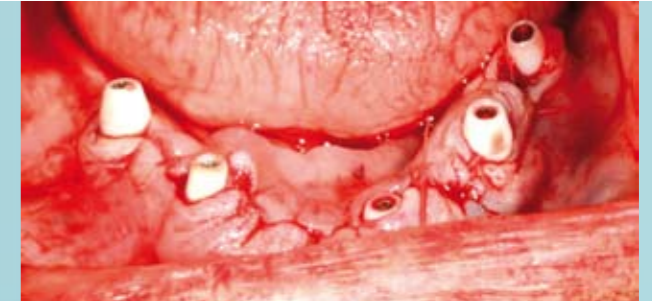
01

The residual crest shows a keratinized gingiva band with proper width and thickness.



05

We observe the transepithelial abutments placed and parallelized thanks to the different angles of the abutments' design.



06

View of the implants placed into the lower jaw with the healing cap.



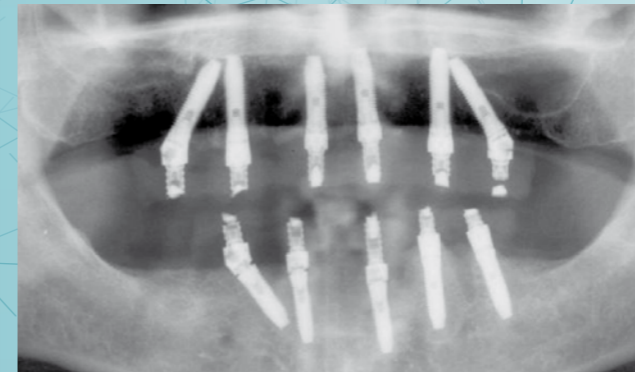
02

After case planning —through virtual planning software— we decide to extract all remaining teeth and place six external connection post-removal implants with immediate loading into the jaw and five into the lower jaw.



03

Implants are submerged considering the definitive prosthesis, and straight and angled transepithelial abutments with different heights depending on the gingiva are placed.



07

Post-surgery panoramic radiograph where you can see the implant distribution and the subsequent angle correction through transepithelial abutments with different angles.



04

Avinent transepithelial abutments have a transport system with a clicker that allows an easy and safe placement of the abutments into the mouth. Moreover, angled abutments have a security screw. Once they are placed, they are tightened to the suitable torque with a torque wrench and a specific wrench.

08

Aesthetic result of the immediate temporary prosthesis.

