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MULTIDISCIPLINARY APPROACH TO A COMPLEX CASE OF UNILATERAL MAXILLARY LATERAL INCISOR AGENESIS AND PERIODONTITIS STAGE IV

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AIM

A hopeless tooth from a periodontal perspective, with severe bone resorption, mobility and abnormal tooth migration, is often extracted. The purpose of this case report is to illustrate the management of a difficult case of ***unilateral maxillary missing lateral incisor*** in a general status of stage IV periodontitis with altered anterior teeth display in the smile area.

MATERIALS AND METHODS

A ***62 years-old woman*** required treatment due to the progressive elongation of the maxillary left central incisor in the last few years and a general discomfort in the smile area. Periodontal evaluation including perio chart, full X-Ray status, occlusal and aesthetic evaluation revealed PERIODONTITIS STAGE IV GRADE 2 w ith a severe prognosis for the maxillary right molars and first premolar and maxillary left central incisor (angular PD= 8mm and secondary extrusion).

The first and second stage of ***Supportive Periodontal Case*** consisted in supragingival and subgingival scaling. Extractions of the maxillary molars and interim restorations on maxillary right premolars were made. ORTHODONTIC THERAPY was performed in order to reduce the probing depth of the maxillary left central incisor, for space management aimed at prosthetic camouflage of the canine in the missing lateral position and rebalancing of the occlusion. At the end of the treatment, periodontal evaluation revealed ***clinical and radiographic improvement*** of the central incisor site, although the first premolar (in canine position) was extracted because the endodontic failure and residual probing depth could not guarantee a long-term prognosis. The interim restorations with resin provisional on maxillary left central incisor, direct restoration to change shape and emergence profile of the right canine in lateral position and cantilever metal-reinforced resin provisional on right second premolar to support the canine during bone- integration of the implant.



RESULTS AND CONCLUSIONS

The success achieved in the present case shows how COMBINED ORTHODONTIC-PERIODONTIC treatment is required in improving the periodontal health of a compromised tooth in the aesthetic area with complete reduction of active site and infrabony pocket. In conclusion, orthodontic treatment is a useful step in the supportive periodontal care of stage IV periodontitis in the case of pathological migration or elongation that ***allows the prosthetic rehabilitation and the restitution of a proper function and aesthetics***.

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