

Bölüm 4

BİLGİSAYAR DESTEKLİ-REHBERLİ İMPLANT CERRAHİSİ

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Dental implantların uygun konumda çene kemiği içeresine yerlesimi, sinir hasarı ve kemik perforasyonu gibi olusabilecek cerrahi komplikasyonları azaltmaktadır. Rehberli implant cerrahisi, implantların çene kemiği içeresine ideal konumda yerleşimlerini sağlamak amacıyla kullanılan bir tedavi yöntemidir. Dijital planlama, kişiye özel cerrahi rehber üretimi ve implant uygulama aşamalarını ifade eder. Rehberli implant cerrahisi farklı basamaklardan oluşan komplike bir tedavi yöntemidir. Bu basamakların her birinde önemli problemler meydana gelebilir ve meydana gelen problemlerden dolayı uygulanan tedavi olumsuz sonuçlanabilir. Rehberli implant cerrahisi, geleneksel implant cerrahisi ile karşılaşıldığında tedavi daha kısa sürede tamamlanmaktadır. Bunun asıl nedeni tedavi protokülü sırasında flep kaldırma operasyonunun yapılmaması ve sonrasında sütur ihtiyacıının bulunmamasıdır. Ayrıca flepsiz tedavi protokolüne bağlı olarak post-operatif ağrı, ödem, kanama ve trismus oluşma riski azalmaktadır.

TARİHÇE

Radyografi dönemi, 19. yy'in sonlarında Wilhelm Conrad Roentgen'in X-ışınlarını keşfi ile başlamıştır. Şu anda non-invaziv bir teknik olarak internal anatomik yapıların değerlendirilmesinde kullanılmaktadır. Eskiden tek sınırlama, mineralizasyonların yalnızca iki boyutlu olarak değerlendirilmesiydi (1, 2). Alan McLead Cormack ile 1979 Nobel Ödülü'nü paylaşan bir İngiliz elektrik mühendisi olan Sir Godfrey Newbold Houndsfield, farklı yönlerden veya açılardan 3-boyutlu olarak incelenebilecek radyografiler elde etmek için dijital bir yöntem geliştirmiştir (3, 4). Başlangıçta bilgisayarlı aksiyal tomografi ve daha sonra bilgisayarlı tomografi olarak adlandırılan bu yeni teknik, konvansiyonel tomografiden yaklaşık 100 kat

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1. Statik bilgisayar destekli implant cerrahisi kapsamlı tanı, tedavi planlaması ve cerrahi prosedürler için ek bir araç olarak düşünülmelidir.
2. Bu sistemde implantlar protetik olarak yüklenmelidir.
3. Bu sistemde yerleştirilen implantlar için doğru ve olumlu bir sonuç elde etmek için cerrahi deneyim ve genel kapsamlı bir eğitim gerekmektedir.

SONUÇ

Rehberli implant cerrahisi, dental implant tedavisi gerektiğinde hasta ve hekim için avantajlı bir prosedür olabilir. Bu avantajlara rağmen prosedürün her adımda farklı hatalar meydana gelebilir. Rehberli implant cerrahi sürecinin tam olarak anlaşılması, kapsamlı ve dikkatli cerrahi teknik, kapsamlı eğitim ve yeterli vaka hazırlığının mevcut olması koşuluyla bu riskleri ortadan kaldırmak veya azaltmak mümkündür.

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