

BÖLÜM 18

PERİ-İMLANTİTİSİN CERRAHİ OLMAYAN TEDAVİSİ: GELECEKTE CERRAHİ TEDAVİLERİN ÖNÜNE GEÇEBİLECEK EK YÖNTEMLER VE LOKAL AJANLAR

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Peri-implantitis, implant çevresindeki sert ve yumuşak dokuları etkileyen, enfamatuvar bir hastalıktır ve doğru teşhis ile uygun tedavi planlaması, klinik başarı için kritik öneme sahiptir (1). Hastalığın morfolojisinin ve şiddetinin doğru değerlendirilmesi, cerrahiye hemen başvurulması gerekmeyen vakaların ayrımında, cerrahi olmayan tedavi yöntemlerinin uygulanabilirliğinde ve lokal ajanların etkinliğinin anlaşılmasında temel rol oynamaktadır (2,3).

Peri-implantitis için literatürde farklı tanı kriterleri önerilmiş olsa da, günümüzde en yaygın kabul gören tanım Berglundh ve çalışma arkadaşlarının 2018'de yayımladığı uzlaşi raporunda yer almaktadır (4,5). Bu rapora göre tanı koyulabilmesi için, nazik sondalama sonrasında kanama ve/veya süpürasyonun gözlenmesi, önceki muayenelerle kıyaslandığında sondalanabilir cep derinliğinde artış olması ve fizyolojik sınırların üzerinde marjinal kemik kaybının bulunması gereklidir (4). Eğer hastaya ait önceki klinik veriler mevcut değilse, peri-implantitis tanısı; kanama ve/veya süpürasyon varlığına ek olarak 6 mm veya daha fazla sondalanabilir cep derinliği ile alveol kretin en koronal noktasına göre marjinal kemik seviyesinin en az 3 mm apikalde tespit edilmesi durumunda konulabilmektedir (4,6).

PERİ-İMLANTİTİS KEMİK DEFİKTLERİNİN MORFOLOJİSİ VE ŞİDDETİ

Peri-implant kemik defektlerinin morfolojisini ve şiddetini kavramak, doğru tanı ve tedavi planlaması için esastır (1). Bu defektlerin kapsamlı preoperatif değerlendirilmesi, tedavi sonuçlarını optimize etmek için kritiktir (2,3).

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kriterleri ve defekt morfolojisinin değerlendirilmesi, hangi vakaların cerrahiye gerek kalmadan kontrol altına alınabileceğini belirlemede kritik öneme sahiptir. Peri-implantitis tedavisinde cerrahi olmayan yaklaşımlar günümüzde yalnızca geçici bir seçenek değil, cerrahinin önüne geçebilecek potansiyele sahip güçlü bir tedavi alternatifi olarak değerlendirilmektedir. Bu alanın gelişmesiyle birlikte, cerrahiye ihtiyaç duyulmadan daha fazla vakanın kontrol altına alınabileceği, hastalar için daha az invaziv ve daha yüksek kabul edilebilirlik sağlayan protokollerin standart klinik uygulamalara gireceği öngörülmektedir.

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