

## BÖLÜM 10

### ATROFİK ALVEOLER KRETLERİN CERRAHİ AUGMENTASYONU: GÜNCEL YAKLAŞIMLAR VE KLİNİK SONUÇLAR

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#### GİRİŞ

Augmentasyon uygulamaları, ağız, diş ve çene cerrahisinde dental implant tedavisinin başarıyla gerçekleştirilebilmesi için sıklıkla başvurulanan yöntemler arasındadır. Osseointegrasyon kavramının tanımlanmasından sonra biyomateryallerde ve cerrahi tekniklerdeki gelişmeler, parsiyel ve tam dişsiz hastaların rehabilitasyonunda implantların kullanımını önemli ölçüde artırmıştır. Bu hastalarda görülen yumuşak ve sert doku defektleri; travma, enfeksiyon veya diş kaybı gibi çeşitli etkenlere bağlı olarak ortaya çıkmakta ve çoğu zaman ideal implant yerleşimini güçleştirmektedir. Özellikle diş kaybını takiben gelişen kemik rezorpsiyonu, ek augmentasyon işlemlerini zorunlu kılmaktadır (1).

Alveoler kretin genişlik ve yüksekliğinin artırılmasına yönelik pek çok yaklaşım tanımlanmış olmakla birlikte, hangi yöntemin en uygun olduğuna dair kesin bir görüş birliği bulunmamaktadır (2, 3). Mandibulada kemik kaybı, dental implant planlamasında en sık karşılaşılan problemlerden biri olup, başarılı bir protetik rehabilitasyon için augmentasyon cerrahisi sıklıkla gereklidir (4). Ancak mandibulanın yoğun kortikal yapısı, augmentasyonun başarısını olumsuz etkileyebilmekte; cerrahin deneyimi, doğru teşhis ve planlama süreci de tedavi sonucunu doğrudan belirlemektedir (5).

Alveoler kretin dikey yönde augmentasyonu, yatay augmentasyona kıyasla daha zorlu olup, hem cerrahi teknik hem de yumuşak dokunun yeniden konumlandırılması açısından ek güçlükler barındırmaktadır (6). Ayrıca augmentasyonda kullanılan greft materyallerinin özellikleri de tedavi başarısında kritik rol oyna-

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