

Dentist: Dr. Emma Dougherty & Dr. David Reaney

## **INTRODUCTION**

The patient presented requesting treatment to improve the appearance of her upper anterior teeth.

She had a missing UL1 which had been replaced with a resinbonded bridge some years previously. The bridge pontic was much larger than the adjacent teeth and this was the main reason for presenting for treatment.

Following clinical and radiographic examination, options for treatment were discussed along with the anticipated risks associated with each.

A definitive treatment plan was drawn up and the patient consented to proceed with the treatment.

The proposed treatment required a multidisciplinary approach which included orthodontic and implant treatment.

The initial phase of treatment involved the orthodontic alignment of the upper anterior segment which improved the implant site by torquing the root of the 22. This was followed by implant provision, associated bone grafting and when osteointegration had occurred restoration of the implant 11.



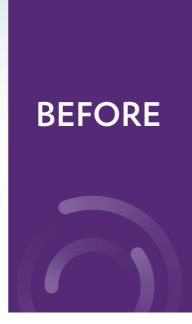
# **Dr. David Reaney**BDS DGDP(UK) MClinDent(Prosthodontics) FICD

- Clinical Director of David Reaney Associates.
- Clinical Advisor of Southern Cross Dental Laboratory.
- Practice limited to Prosthodontics and Implant Dentistry.
- Independent Expert Witness.

Case number: 6827



## TREATMENT STARTING

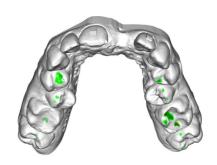










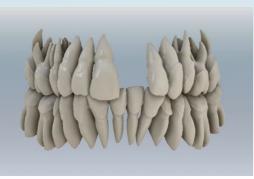


## TREATMENT PLAN

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TRIOCLEAR™ CASE REPORT 3

#### **BEFORE AND AFTER**









FTER

# **CONCLUSION**

BEFORE





### **DENTIST AND PATIENT FEEDBACK**

#### Dr David Reaney:

"To improve the alignment of the upper anterior teeth prior to implant provision 21, TrioClear aligner treatment was carried out by Dr Emma Dougherty.

This case required two attachments provided using a pre-formed template through which composite was bonded to teeth 11,22.

Three aligners were required to provide the planned outcome. Dr Dougherty also provided some composite bonding prior to implant restoration 21.

I placed a bone level TRI 3.3mm implant and to improve the buccal contour, some bone grafting was done using Guided Bone Regeneration (GBR). Following osseointegration, a bis-acryl temporary crown was placed to develop the gingival contour. After stabilisation of the gingival tissues a definitive restoration of the implant was carried out using a screw-retained porcelain fused to metal (PFM) crown.

The gingival contour of the implant crown was planned not to replicate the gingival recession at 11. If this had proven necessary modification of the temporary crown would have provided a match of the gingival zenith position."

#### Patient:

"I was very embarrassed by the appearance of my front teeth and wanted an improvement especially with my old bridge that was out of position and the tooth appeared very long.

Dr Dougherty did the orthodontic treatment with TrioClear aligners which worked really well and the aligners were very comfortable to wear.

I was able to use the aligners to replace my missing front tooth when the old bridge was removed and composite bonding provided a good result.

Dr Reaney carried out a careful assessment with placement. This surgery proved very successful and not as painful as I thought.

I was delighted with the result of this treatment and I have more confidence in my smile which has been life changing for me. Thank you for everything!"



