CLINICAL CASE REPORT

SALVIN® AlloSpark-GF®

Root Coverage Using AlloSpark–GF®–Enhanced Dermal Allograft as an Alternative to Autogenous Connective Tissue Grafting

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PRESENTATION & DIAGNOSIS

A 57–year–old male patient was referred for treatment of generalized gingival recession. 1 2 Class I and Class III recession was noted in all four quadrants, with the patient's primary concern being the exposed roots of his maxillary left central incisor through canine area. Root–coverage surgery with a AlloSpark–GF®–enhanced dermal allograft was planned as an alternative to an autogenous connective tissue graft.

GRAFT PREPARATION

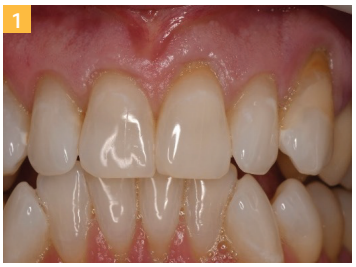
Prior to surgery, a dermal allograft with a thickness of 0.4–0.7mm was hydrated with AlloSpark–GF® and allowed to absorb the growth factors for at least 20 minutes prior to application.

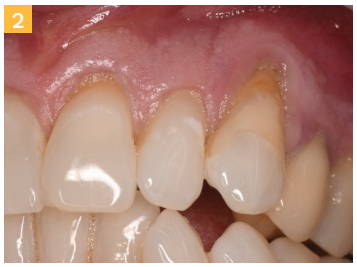
SURGICAL PROTOCOL

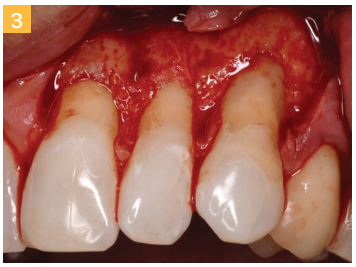
3 A facial, trapezoidal, full–thickness flap was reflected. Root planing, including reduction of the Class V composite restoration on the canine, was performed with finishing burs, piezoelectric and manual instrumentation. Root conditioning with a slurry of doxycycline and sterile saline was performed for 3 minutes, followed by copious sterile saline irrigation. 4 The AlloSpark–GF®–enhanced dermal allograft was sutured at the level of the CEJ of the teeth, with the lamina propria side facing outward. 5 A periosteal releasing incision at the base of the flap facilitated tension-free coronal repositioning of the flap margin to cover 100% of the dermal allograft.

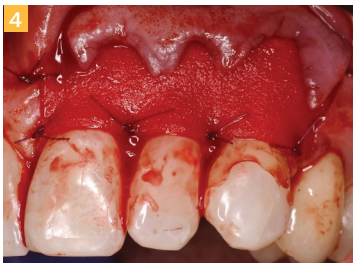
OUTCOME

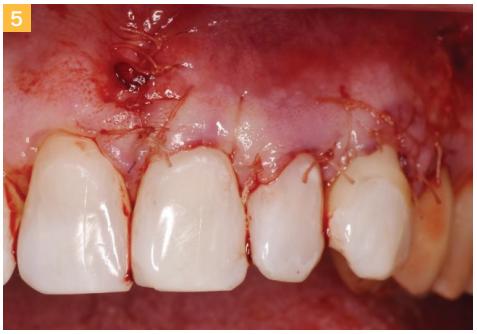
6 7 At six months post–operative, after completing identical therapy on the maxillary right canine and first bicuspid several months earlier, significant root coverage is evident.

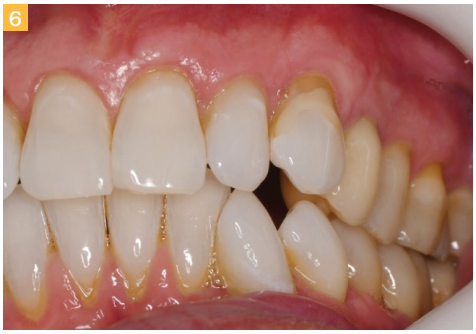


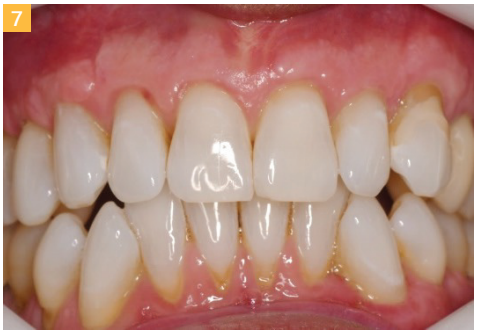












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