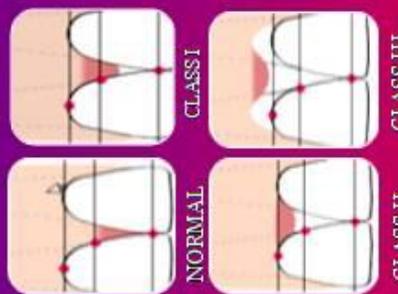


HYALURONIC ACID – A NOVEL NON-INVASIVE TECHNIQUE FOR INTERDENTAL PAPILLA RECONSTRUCTION

- Hyaluronic acid is a natural – non sulfated high-molecular weight glycosaminoglycan that forms a critical component of the extracellular matrix and contributes significantly to tissue hydrodynamics, cell migration and proliferation.
- Hyaluronic acid has been widely used in the treatment of osteoarthritis knee and in combination with cataract surgery.
- In the field of dentistry hyaluronic acid has shown anti-inflammatory and anti-bacterial effects for the treatment of gingivitis and periodontitis.
- HA gel (Gengigel) used as local drug delivery and HYALOSS MATRIX for osseous defects has shown clinical benefits .

CLASSIFICATION – BLACK TRIANGLE



ETIOLOGY



Recently hyaluronic acid has been used for regeneration of the interdental papilla and has shown promising results.

MATERIALS & METHOD

- Hyaluronic acid gel.
- Administration of Local Anaesthesia.
- Hyaluronic acid gel (less than 0.2 mL) was injected 2–3 mm apical to the tip of the deficient papilla.
- Patients were recalled at the interval of three weeks , and repeated the procedure.
- Complete regeneration of papilla was observed at the end of four months.

PROCEDURE



CONCLUSION :- Present case report highlights the use of hyaluronic acid for the treatment of deficient interdental papilla successfully by a novel non invasive method.

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Abstract

Patient demands for esthetically pleasing results after periodontal Interdental papilla reconstruction possess a great challenge to the clinicians. There are various surgical and non-surgical treatment available for papilla reconstruction. The various invasive methods available for papilla reconstruction are papilla preservation flap, semilunar flap, connective tissue graft etc. Recently a novel non-invasive method for Interdental Papilla reconstruction by Hyaluronic acid has shown promising results. Hyaluronic acid is a natural non-sulfated high molecular weight glycosaminoglycan that forms a critical component of the extracellular matrix and contributes significantly to tissue hydrodynamics, cell migration and proliferation.

The aim of this study is to evaluate a new method for reducing or eliminating small papillary deficiencies. The use of a commercially available gel was evaluated as a possible method for enhancing deficient papillae. Prior to treatment a short-acting local anesthetic was administered. "A commercially available, hyaluronic-based gel (less than 0.2 mL) was injected 2–3 mm apical to the tip of the papilla." After treatment individual patients' syringes were capped, identified with the patient's name, and stored in a refrigerator for future use on the same patient. The needles were discarded. Patients were seen three weeks after the initial treatment and photographed, and if the dark space remained another injection was applied. This sequence was repeated up to three times. A new minimally invasive method for papilla reconstruction adjacent to teeth or dental implants, in the esthetics zone, the use of a commercially available gel can be used as a possible method for enhancing deficient papillae.

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