

## Gap Management and Placement of a CONTACT Implant in the Esthetic Zone



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First published in: *Restorative Gap Management in the Esthetic Zone*, Konrad Meyenberg, Quintessence Publishing



### The Baseline Situation

Patient with root resorption due to ankylosis

A patient presented at the dental office with **root resorption due to an ankylosed maxillary right central incisor** with an extended crown. The tooth had been damaged during an accident a few years before. A **gap was present** between the maxillary right canine and right lateral incisor.



### The Treatment Strategy



#### 1 Extraction, ridge reconstruction, and provisional

Extraction and immediate reconstruction of the ridge with guided bone regeneration and a soft tissue graft

Provisional RPD during the first 6-month healing phase to enable a slight distalization of the right lateral incisor with an internal spring



#### 2 Implantation

After 6 months, placement of a CONTACT implant PF 4.5\*

Simultaneous soft tissue grafting

Conditioning of augmented soft tissue with an individualized healing abutment



#### 3 Prosthetic restoration

Implant impression taking after soft tissue conditioning

Preparation of screw-retained glass ceramic crown cemented on individualized zirconia abutment as final restoration\*\*

Renewal of the composite buildup on the left central incisor



### The Outcome

The performed gap closure combined with the placement of a CONTACT implant led to convincing esthetics after finishing the treatment. An excellent mechanical stability of the zirconia abutment walls was possible due to the small abutment screw diameter



PF, platform; RPD, removable partial denture.

\*The implant surgery was performed by Dr. Marco Imoberdorf \*\*Dental technology was performed by Walter Gebhart.