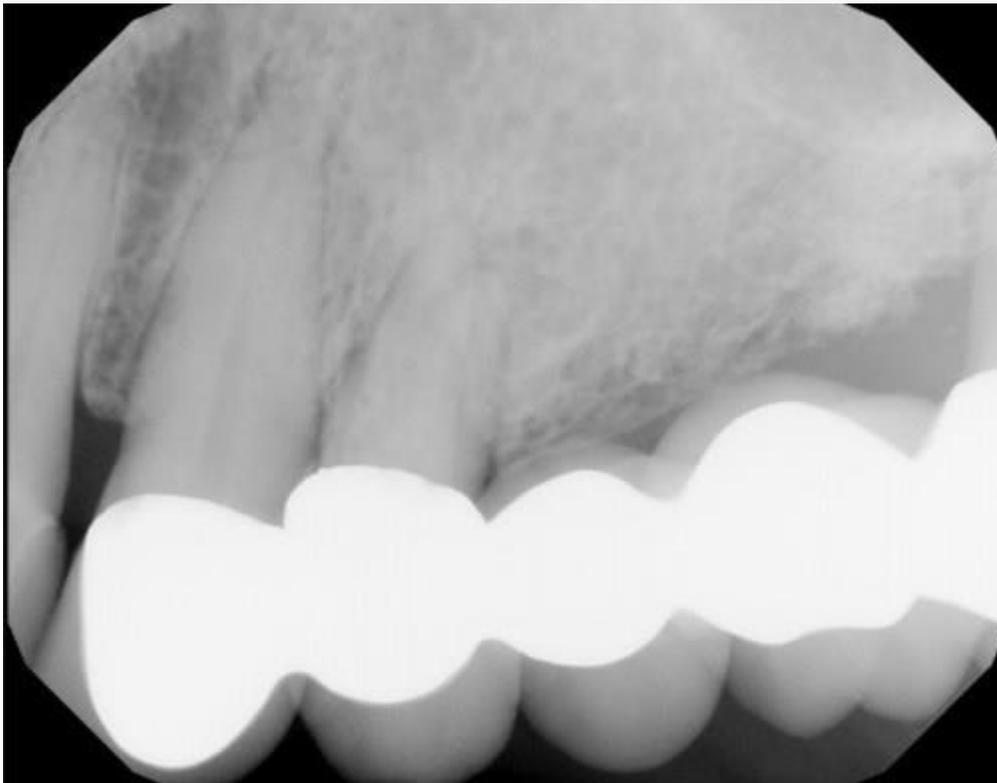
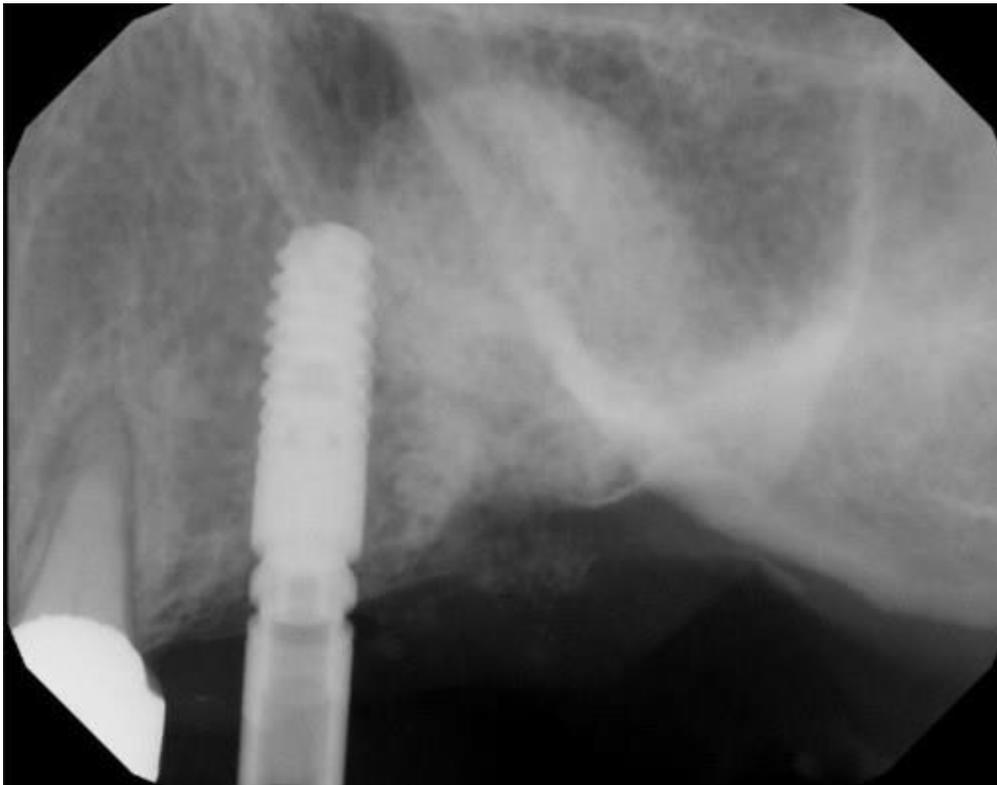
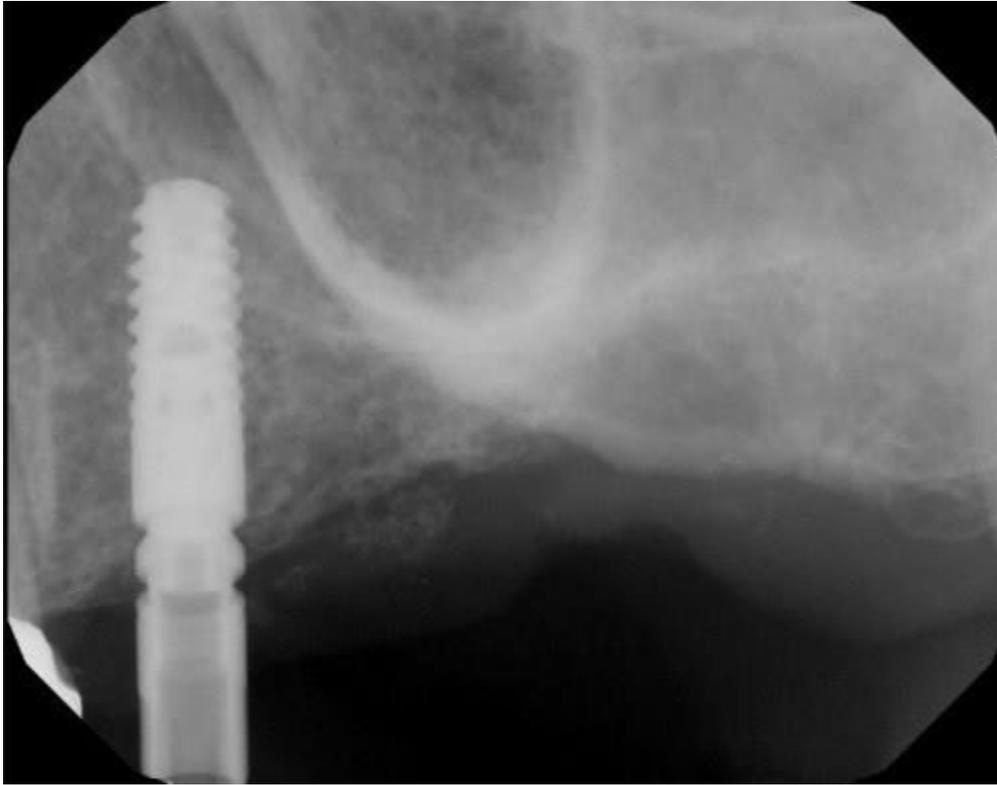
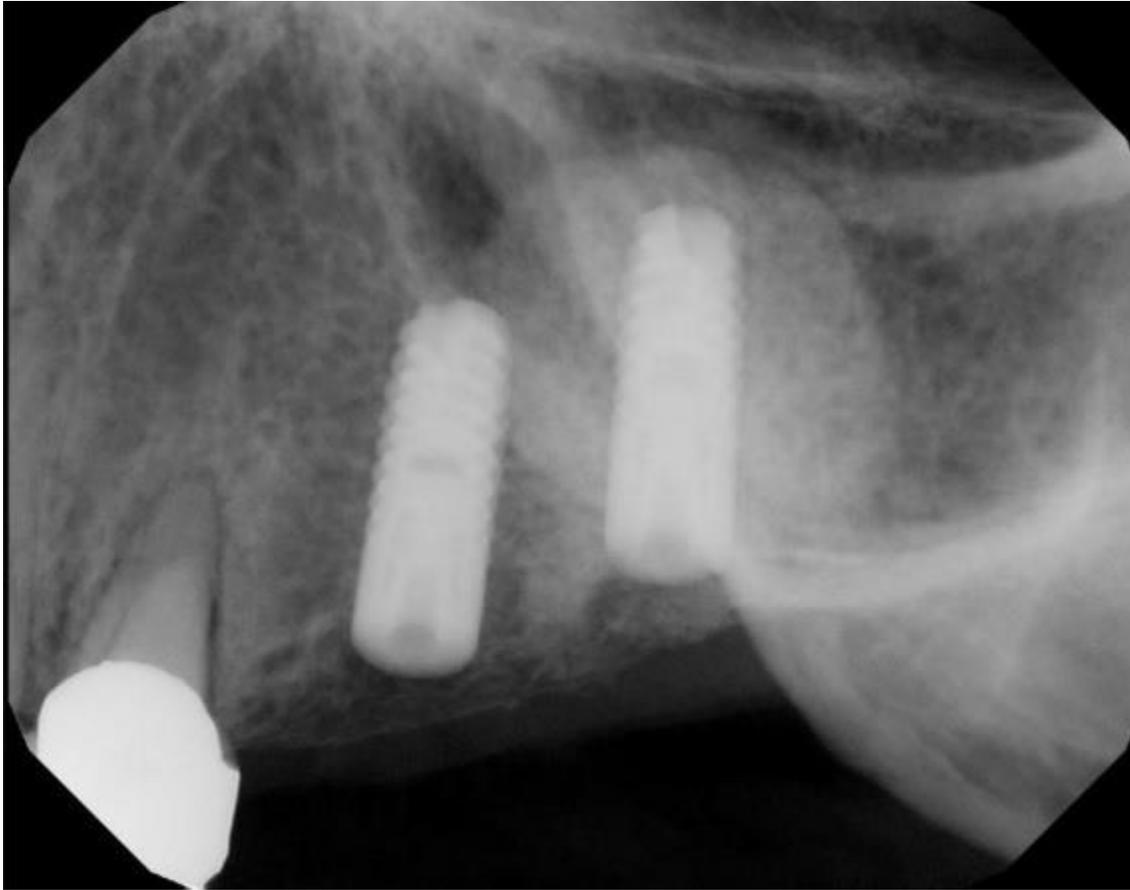


Sinus Augmentation with OsseoConduct β TCP

The following case illustrates a crestal access sinus augmentation performed by [Dr. John Diana](#), Clinical Associate Professor of Periodontology at Stony Brook University School of Dental Medicine.







The molar was failing and the bridge was sectioned distal to the bicuspid.

The first implant was positioned in the second bicuspid area.

Due to the position of the sinus, a crestal approach was taken to access the sinus membrane.

OsseoConduct β TCP granules were placed into the osteotomy and packed into the sinus.

The presence of a dome shape indicates where the granules were packed into the sinus maintaining the integrity of the membrane. With the graft in place, the implant is inserted into the grafted sinus.

This case is an example of a minimally invasive surgery that provided implant placement at the same time the bridge was removed. Creating a large lateral window and packing cadaver bone into the sinus requires 4 to 6 months to lapse before an implant can be placed. Using a large lateral wall and either autografts or allografts also requires months before the implants can be restored. This minimally invasive sinus augmentation is a

simple technique that reduces the surgical intervention to one visit, shortens the time until restoration by 50%, and minimizes the amount of postoperative pain a patient experiences.

As clinicians, it is important to offer the best quality of care we possibly can along with using the best materials available. As technology in dentistry advances, it is critical we have a full understanding of the materials we are using and seek the latest scientifically proven materials that will continue to improve our patients' oral health.





Why Graft with Beta Tricalcium Phosphate Granules?

The reason is performance. Many factors go into choosing the best bone graft material for your patients. Most clinicians are trained that autografts are the gold standard and allografts are an acceptable alternative. That may have been true 5-10 years ago, but science has evolved and studies now prove that beta tricalcium phosphate granules are equal to or superior than the performance of both allografts and autografts.

“Modern beta tricalcium phosphate bone grafts perform as well as or better than allografts or autografts. The negatives of autograph morbidity and cadaver harvesting makes high performing β TCP a superior choice.”

[Int J Oral Maxillofac Surg. 2017 Apr](#)