



# BIOLOGICKÁ AUGMENTACE KOSTI AUTOLOGNÍM DENTINEM

D R . I V A N T R E S N A K

RATHAUSSTRÄBE 5, I-39032 SAND IN TAUFERS  
TEL.: 0039-0474/679510 FAX: 0039-0474/679511

[IVAN.TRESNAK@TRESNAK.COM](mailto:IVAN.TRESNAK@TRESNAK.COM)  
[WWW.TRESNAK.COM](http://WWW.TRESNAK.COM)

# CENA A BIOKOMPATIBILITA

- Vedeli jste ze lidsky dentin ma stejne vlastnosti v ohledu na augmentaci jako kortikalni kost??



Vedeli jste  
ze lidsky  
dentin ma  
stejne  
vlastnosti v  
ohledu na  
augmentaci  
jako  
kortikalni  
kost??

# Kometabio

Tissue Engineering

srdce  
systemu, jež  
umožnuje  
získávat  
augmentacn  
i granulat z  
extrahovany  
ch zubu



- 1.Extrakce
- 2.Ocistení a rozemletí
- 3.Vycistění granulátu
4. Augmentace

# VEDECKE PODKLADY

- Remodeling po extrakci zuba
  - Status presens: biologicky odpad kontaminovaneho materialu
  - Autotransplantace
  - Retinovane zuby
- 
- Autogenni dentin je ten nejlepsi augmentacni material pro socket preservation a augmentaci alveolarni kosti

# DENIN Z POHLEDU AUGMENTÁTU

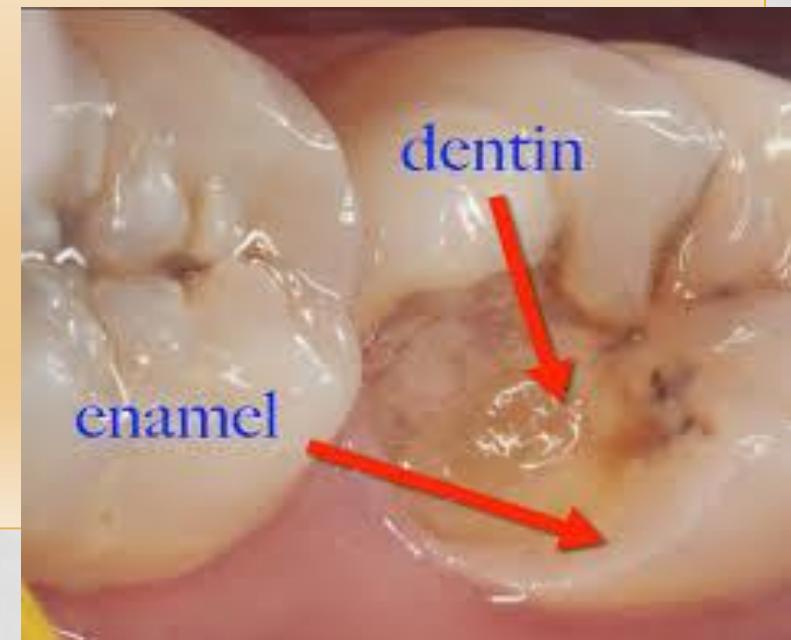
- Zuby jsou částí obou čelistí, obou alveolárních výběžků
- Dentin představuje 85% zubní struktury
- Sklovina sestavá pouze z HA minerálu a nepředstavuje 10% zubní struktury
- V ohledu na chemickou kompozici je dentin totožný s kostí – **stejný volumen obsahuje 50% HA minerálu a 50% organické matrix**, převážně fibrozní typ Kolagenu I.
- Podobně jako kost může dentin uvolňovat růstové a diferenciační faktory které jsou rezorbovány osteoklasty.
- Indukuje generování nové kosti.

# CISTENI GRANULATU

- Presypani z kontejneru do pripravene dozy
- Pridej cleanser do dozy tak, aby granulat byl kompletně ponoren.
- Uzavri dozu vickem a protrepej kruhovým pohybem ve směru rucicek.
- Ponechej v cleansing roztoku po 10 minutes.
- Pomoci pipety odsaj cistici roztok.
- Napiň dozu cistym Phosphate Buffered Saline (PBS). Napiň přibližně polovinu kontaineru.
- Protrepej kontainer jemne a odsaj pipetou zbytek PBS. Zopakuj process podruhé.
- Partikulovany dentin je nyní pripraven pro immediatni augmentaci

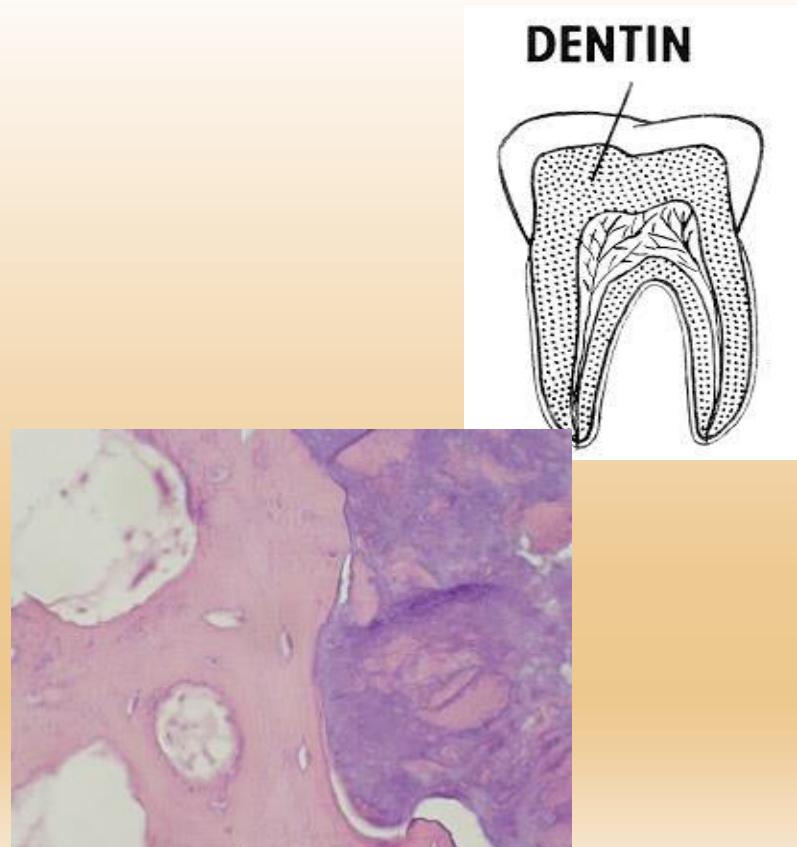
# PROČ ZUBY A PROČ DENTIN?

- Zuby jsou anatomicky částí obou čelistí
- Dentin - 85%
- Sklovina - 10%
- Chemická kompozice totožná s kostí 50/50
- uvolňování růstových a
- diferenciаčních faktorů
- 



# ZÁVĚR: PROČ SE STALY EXTRAHOVANÉ ZUBY BIOLOGICKÝM ODPADEM?

- Dentinová matrix má
- podobně jako kost
- vrozené chemické a
- fyzikální vlastnosti
- přitahovat progenitorní
- buňky a schopnost jejich
- indukce ke generování
- nové kosti.

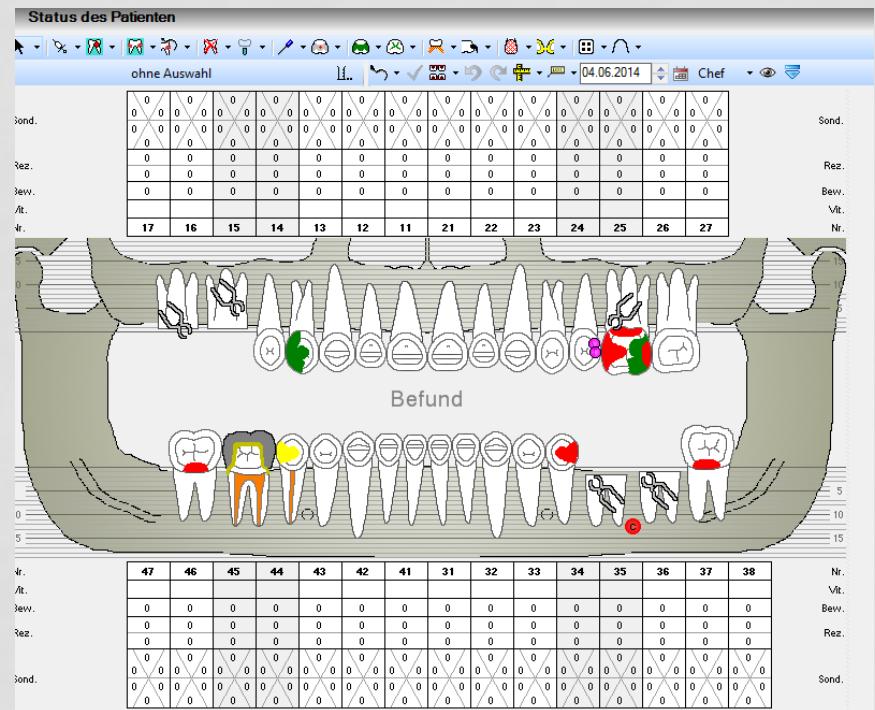


# DALŠÍ INDIKACE NEJSOU UVÁDĚNY

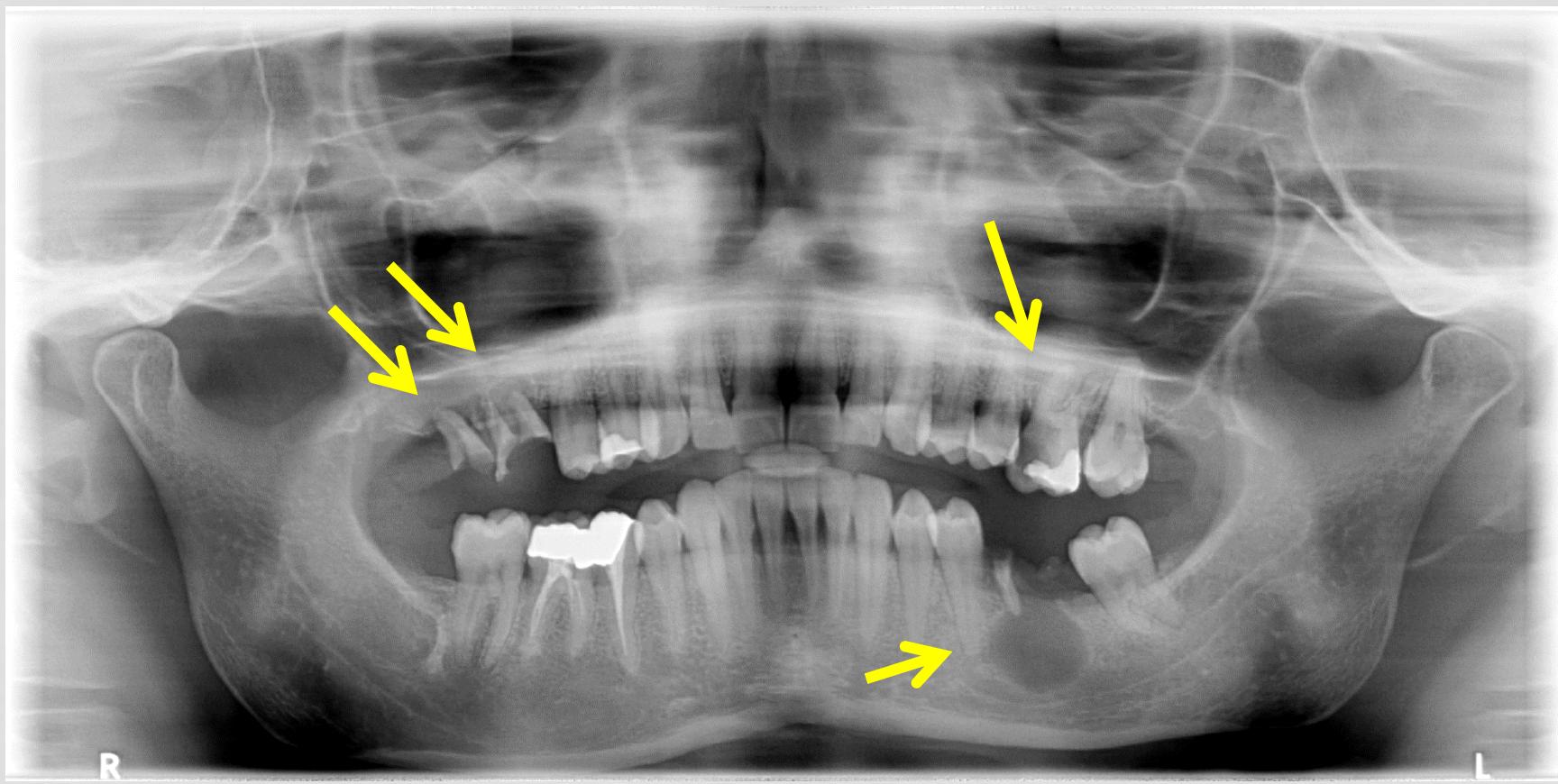
- **Indikace k extrakci v mé praxi:**

- Parodontálně poškozené zuby
- Kariesní destrukce zuba
- Orthodontické indikace
- Zuby moudrosti
- Endo komplikace (nevzhodne)
- Paro-endo komplex (nevzhodne)
- Urazy
- Extrakce v rámci nového lěčebného plánu

# TANJA, 37 LET, ZDRAVÁ

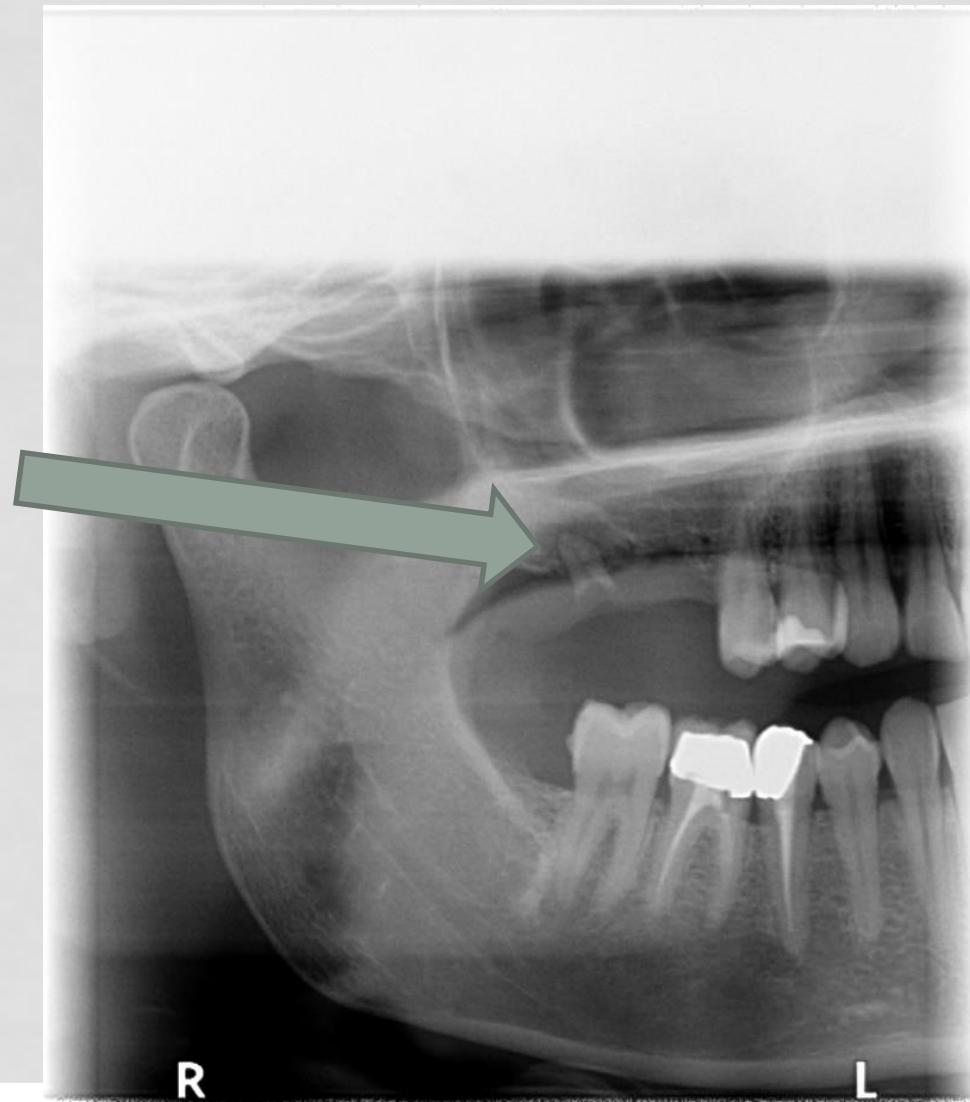


# VSTUPNÍ OPG



# ...KAZDY ZVBYTEK DENTINU

...i radix relictia



# EXTRAKCE



# PŘÍPRAVA EXTRAHOVANÝCH ZUBŮ



# MLÝNEK, OBA ČISTÍCÍ ROZTOKY



# VÍKO JE NUTNO ZAARETOVAT



# PROCES MLETÍ A ODSÁTI GRANULÁTU



# ZÁSOBNÍK PRO GRANULÁT





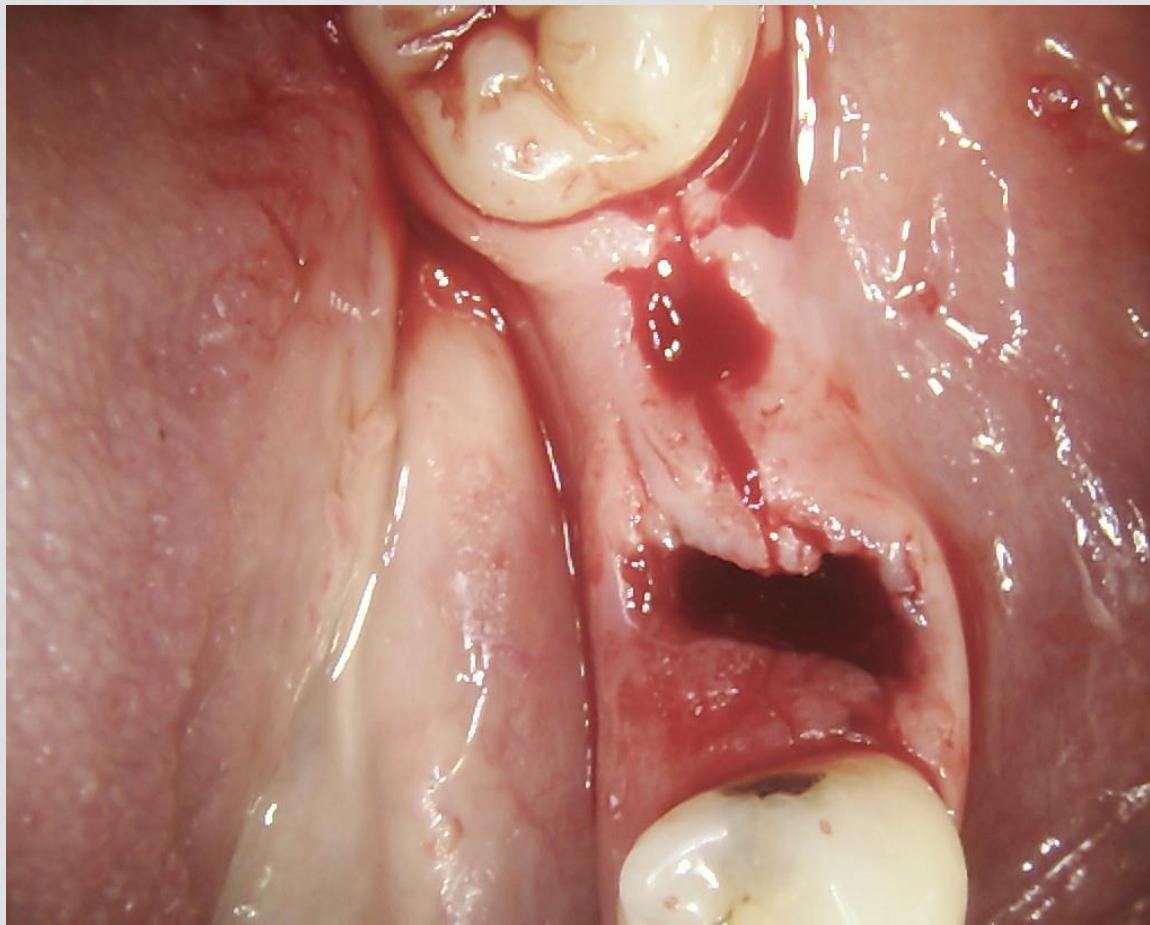




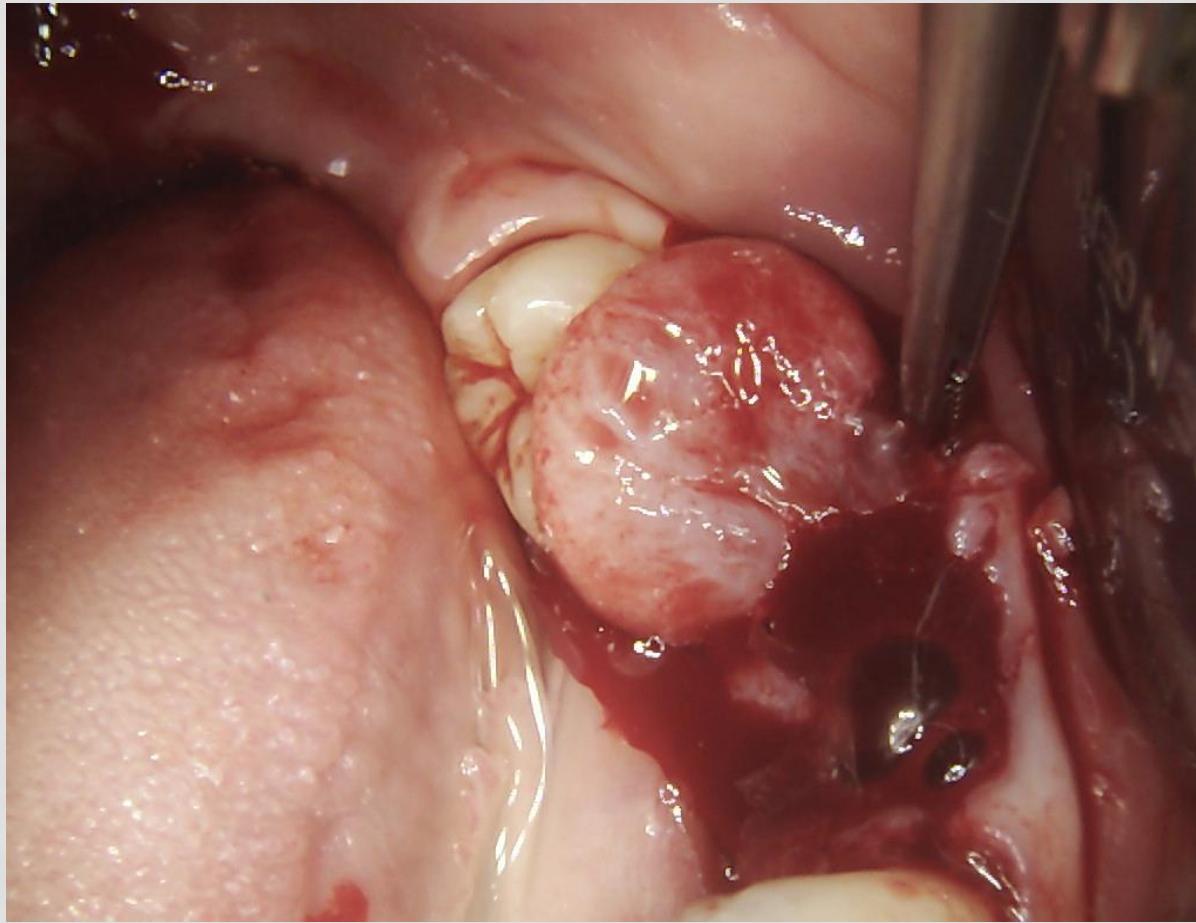
# GRANULAT A KOLAGENNÍ BUNIČINA



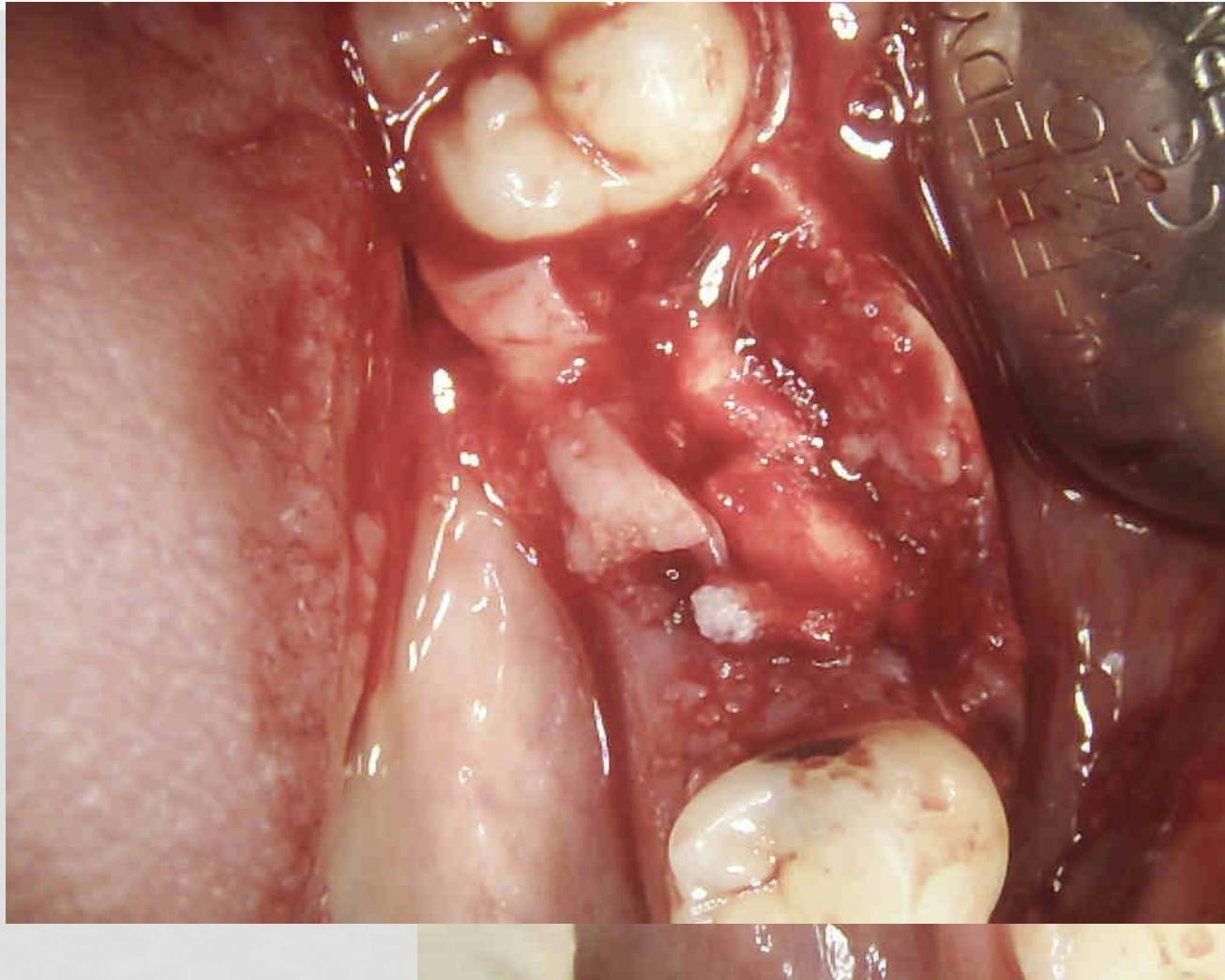
# CRESTÁLNI INCIZE PRO CYSTEKTOMII



# EXTIRPACE CYSTY IN TOTO



# AUGMENTACE A SUTURA



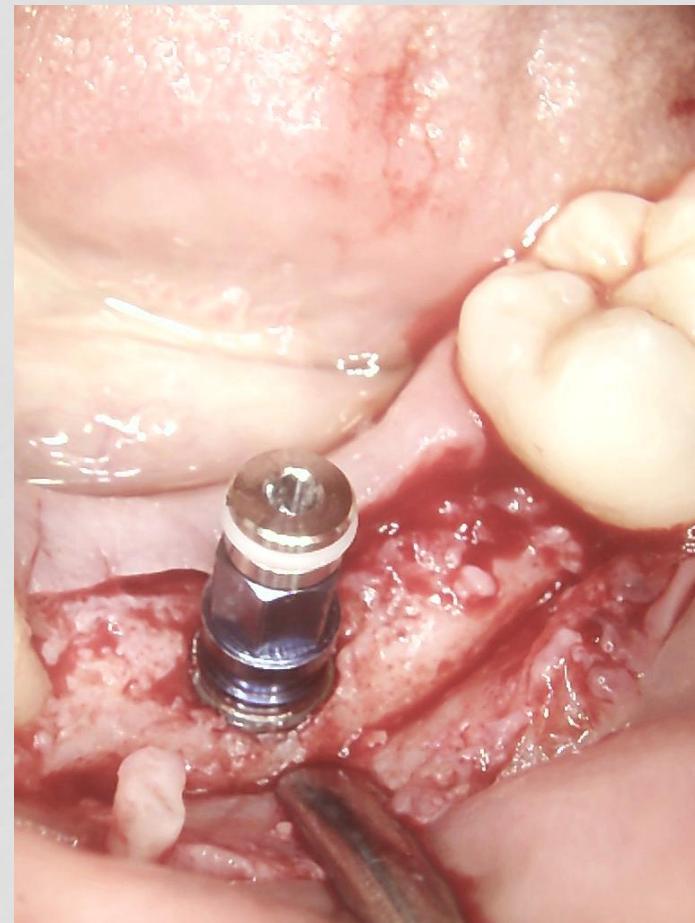
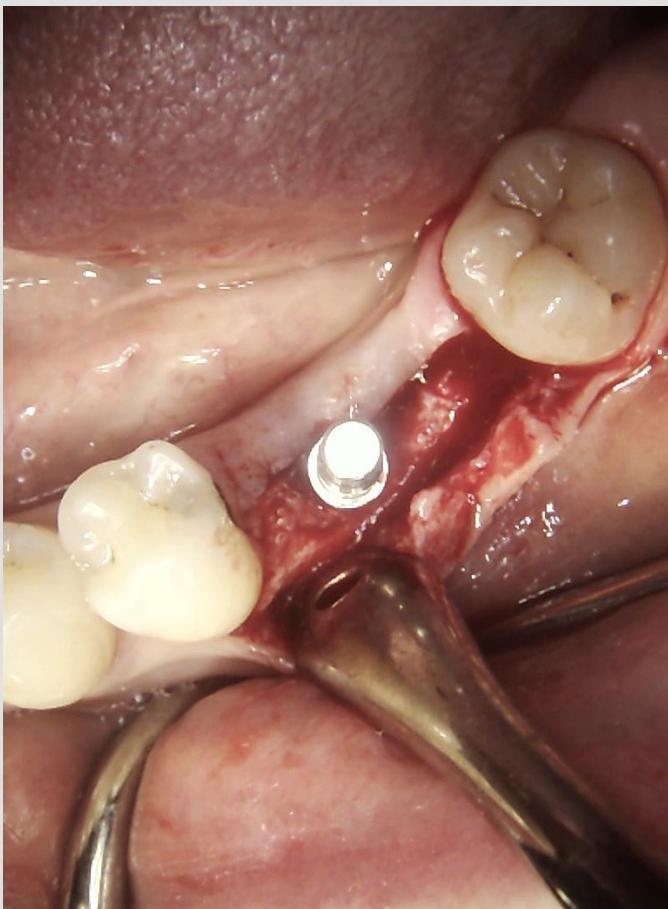
# SOCKET PRESERVATION 26

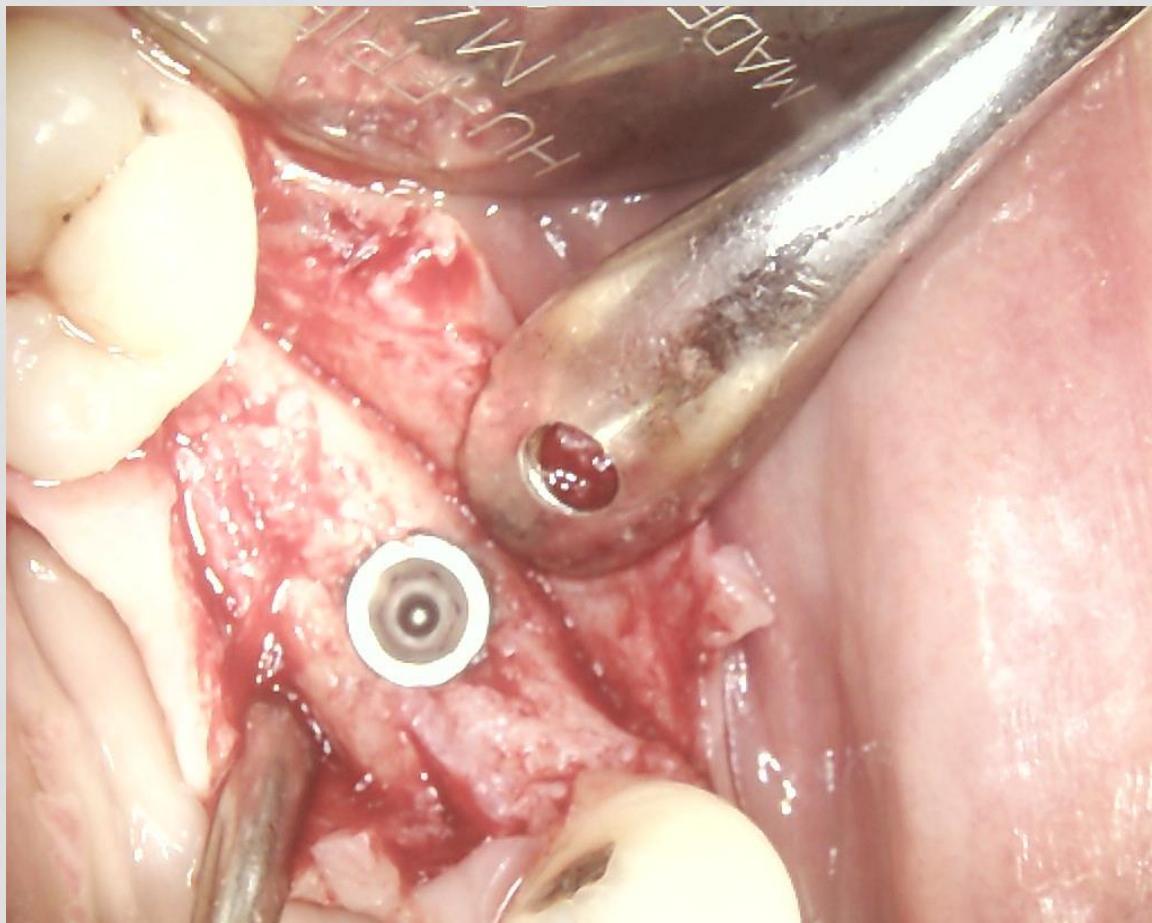


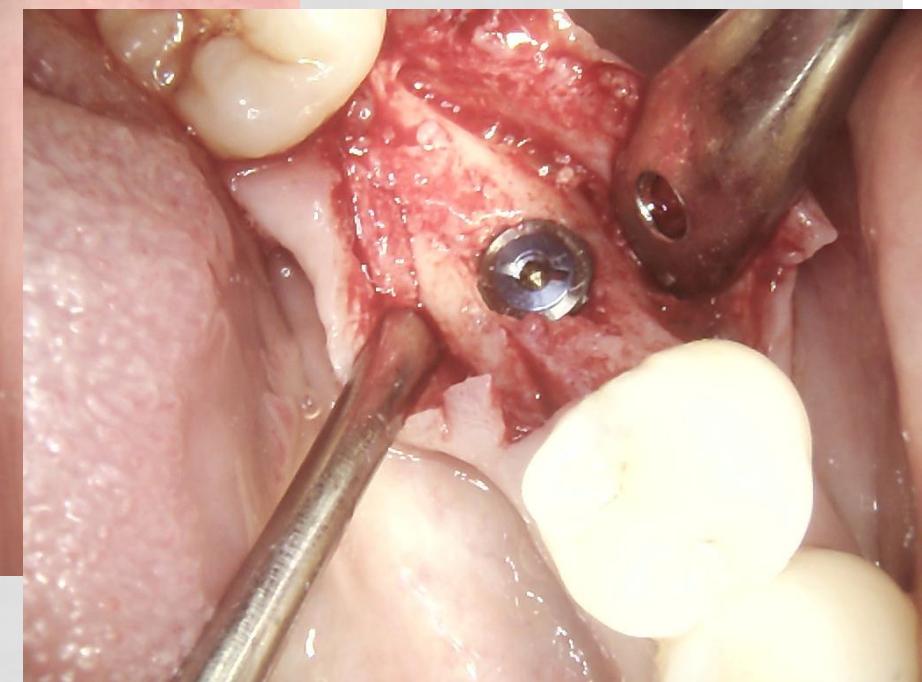
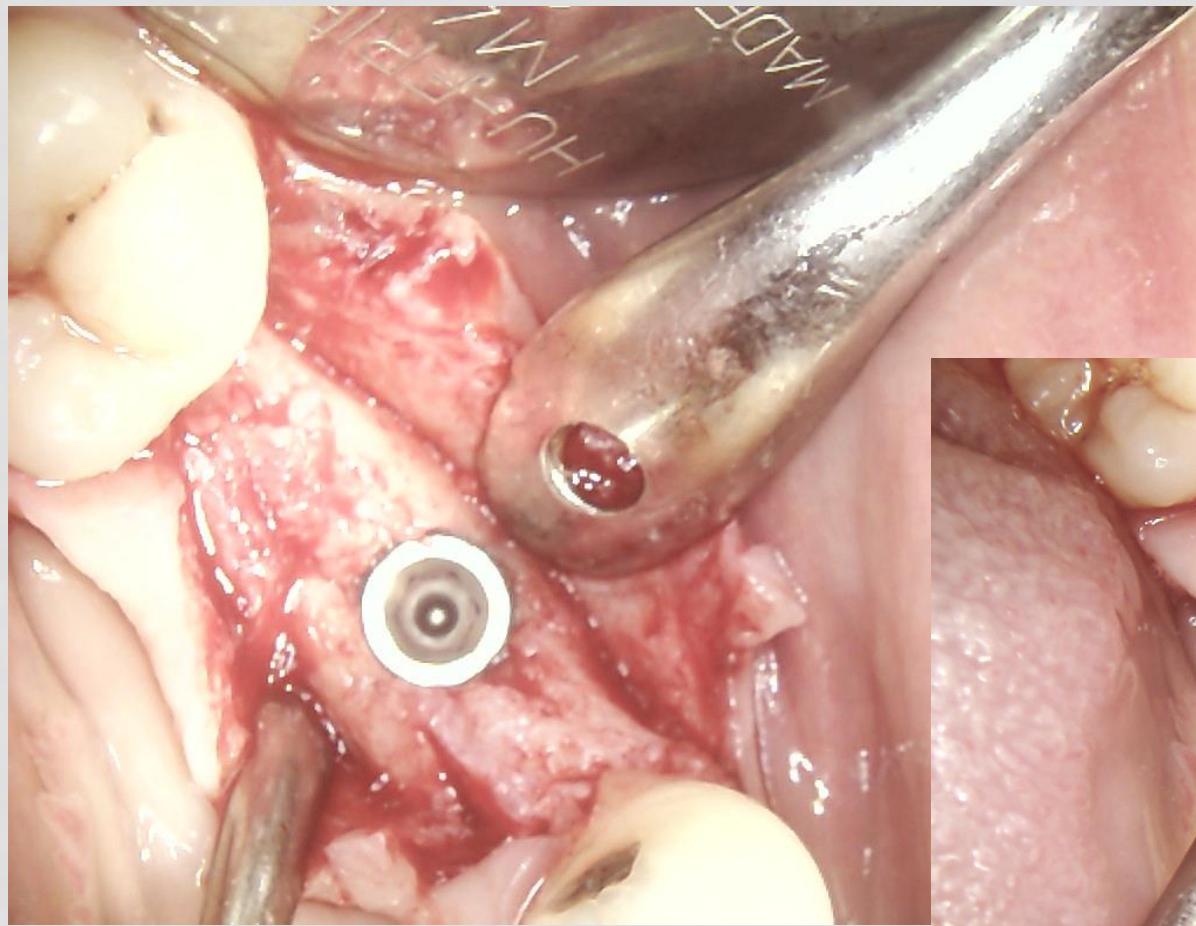










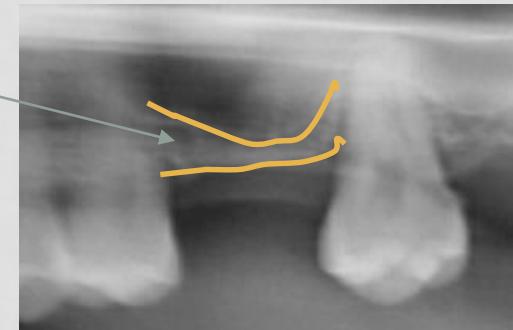
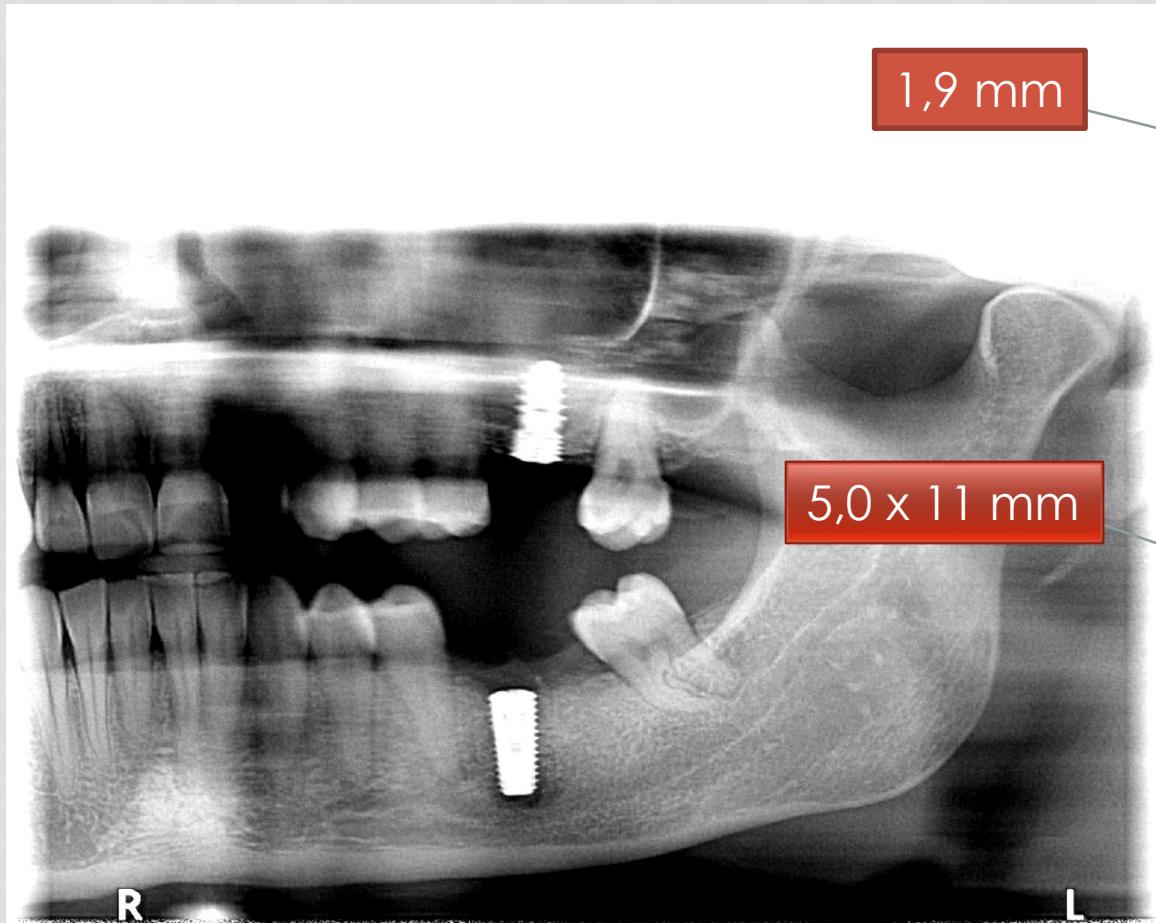




# INSERCE 36



# IBS IMP. C.M.C. (CRESTAL APPROACH WITH MEMBRANE CONTROL)





# Reference

## Teacher Reference Center



Human dentin has the same grafting properties as cortical bone? That's why extracted teeth, a valuable organic material, can no longer be considered a clinical waste!

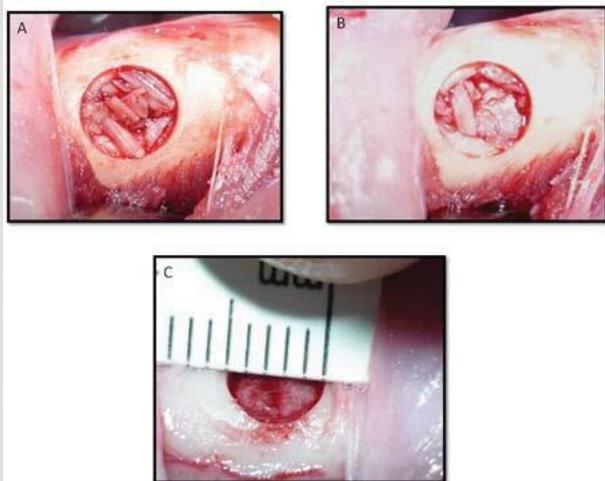
Extracted teeth can be recycled as an autologous bone graft, which is considered the GOLD STANDARD of grafting.

# LITERATURA

- **Scientific Articles**
- Related Scientific Articles – Autograft of Dentin Materials for Bone Regeneration



# AUSTRALIAN JOURNAL OF BASIC AND APPLIED SCIENCES



osteo-compatible and effective

Australian Journal of Basic and Applied Sciences, 4(12): 5932-5940, 2010  
ISSN 1991-8178

**AJBAS**  
Australian Journal of  
Basic and Applied Sciences

## Processed Allogenic Dentine as A Scaffold for Bone Healing: An *in vivo* study.

<sup>1</sup>Dr. AL-Namnam, N.M., <sup>1</sup>Shanmuhasuntharam, P., <sup>1</sup>Dr. Ha K.O. and <sup>2</sup>Prof. Siar C.H.

<sup>1</sup>Department of Oral & Maxillofacial Surgery and <sup>2</sup>Department of Oral Pathology, Oral Medicine & Periodontology, Faculty of Dentistry, University of Malaya, Kuala Lumpur, Malaysia

## KEY WORDS: DENTINE, AUTOGRAFT, ALLOGRAFT, LIQUID NITROGEN, BONE SUBSTITUTE.

- Abstract: Processed Allogenic Dentine as A Scaffold for Bone Healing: An *in vivo* study  
Purpose: (i) to assess the osteo-compatibility of dentine *in vivo*; (ii) to evaluate the ability of liquid nitrogen treated allogenic dentine to accelerate bone healing compared to normal healing in ungrafted defect, and (iii) to compare quantitatively the amount of new bone formation in the allogenic dentine treated defect to autogenous bone treated defect.  
Methods: Allogenic dentine of New Zealand White rabbits
- was treated with liquid nitrogen for 2 weeks. In sixteen rabbits, a defect (diameter: 5 mm) was created in each femur for grafting with either allogenic dentine (experimental groups) or autogenous bone (positive control), and in another four rabbits a defect (diameter: 5 mm) was created in each femur and left ungrafted (negative control). The rabbits were sacrificed at 2, 4, 8 and 12-week intervals.  
Results: Histologically, dentine-bone union has been achieved with no signs of inflammation.
- Histomorphometric, there was no significant difference in bone regeneration between the groups ( $p>0.05$ ). However, the difference was clinically significant between the experimental and negative control groups at 2, 4 and 12 weeks.  
Conclusion: Results suggest that the liquid nitrogen-treated dentine is osteo-compatible and effective as a bone substitute for accelerating bone repair.

# ADVANCES IN BIOMATERIALS SCIENCE AND BIOMEDICAL APPLICATIONS

## Healing Mechanism and Clinical Application of Autogenous Tooth Bone Graft Material

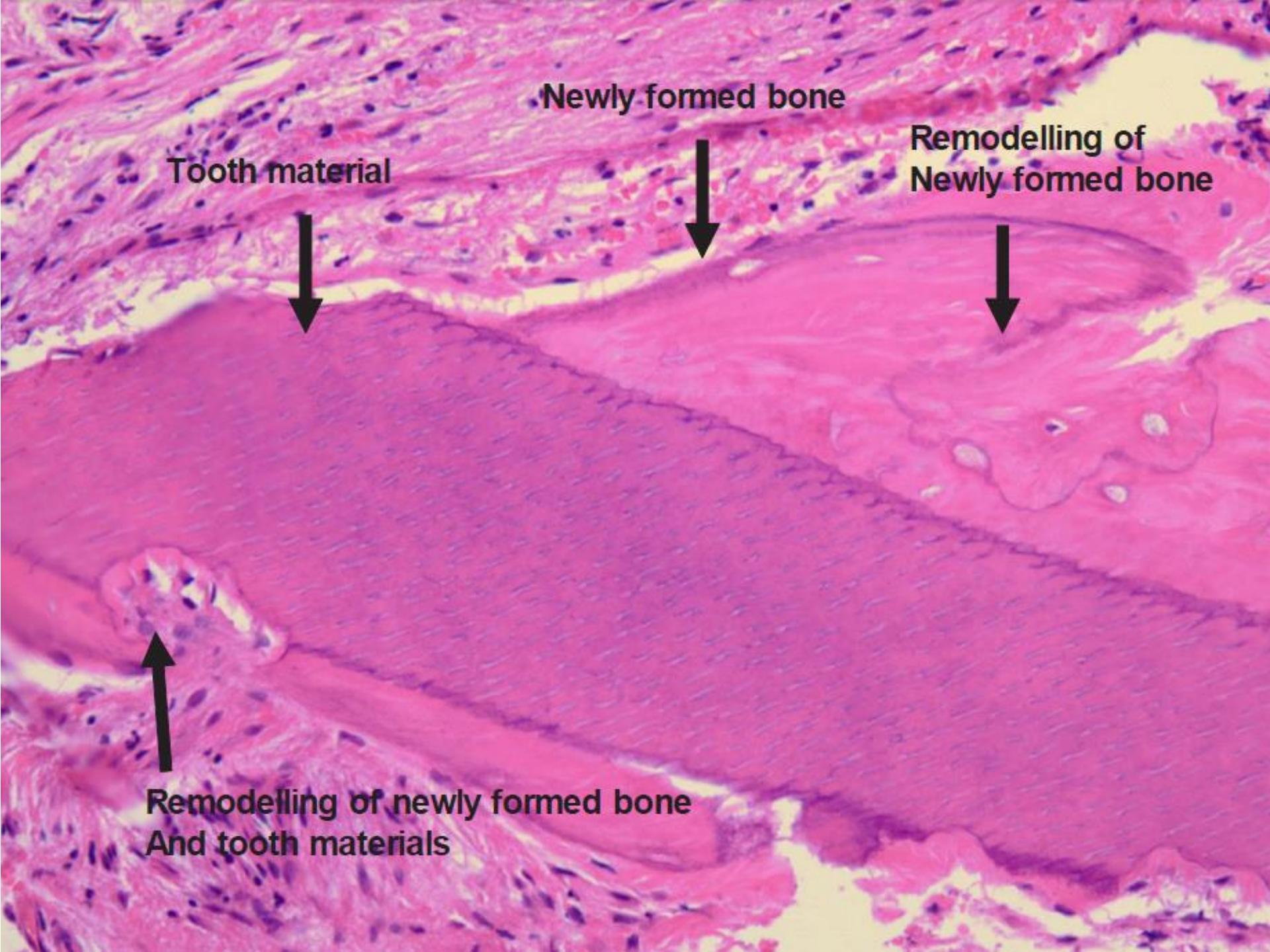
---

Young-Kyun Kim, Jeong Keun Lee,  
Kyung-Wook Kim, In-Woong Um and  
Masaru Murata

autogenous tooth bone graft materials, are safer than allogeneic and xenogeneic bone graft materials

# CONCLUSION

- It is obvious that autogenous tooth bone graft materials(AutoBT) are safer than allogeneic and xenogeneic bone graft materials; the fact that they are compared with the healing performance
- of free autogenous bone graft in histological view is clear evidence. AutoBT can be used safely



# KNOCHEN TECHNIK MIT DEMINERALISIERTEM DENTIN-MATRIX UND MENSCHLICHEN BMP-2

- Als erstes bestätigen wir die ostoinduktiven Eigenschaften von menschlicher demineralisierter Dentin-Matrix. Menschliches DDM ist von lebenswichtigem Zahn gewonnen, und im Unterhautgewebe von Nacktmäusen implantiert worden. Die Form vom DDM ist eine Teilchenart und variiert von den Größen 0,4 bis 0,8mm. Hautgewebe mit 70mg vom DDM ist schätzungsweise 4 Wochen nach der Implantation hart. Das DDM induziert Knochen und Knorpel. Des Weiteren, wurde im Zeitverlauf des Bioteests vom menschlichen BMP-2/DDM (70g) das Hautgewebe von Ratten geschätzt. Histologische Untersuchungen zeigten, dass das BMP-2/DDM Knochen und Knorpel beinhalten und das DDM nach und nach mit neuen Knochen ausgetauscht worden ist. Die Analysen zeigten, dass das BMP-2/DDM 79,0 % im Volumen des Knochen und Knochenmarks war, und in dem des DDM 21,0%, in 32 Wochen. Diese Resultate zeigen, dass menschliches DDM ostoinduktive Matrix hat, und die DDM-Macht wird effektiv eine Karriere von BMP-2 für Knochen Technik.



## A Novel Procedure to Process Extracted Teeth for Immediate Grafting of Autogenous Dentin

Itzhak Binderman<sup>1</sup>, Gideon Hallel<sup>2</sup>, Casap Nardy<sup>3</sup>, Avinoam Yaffe<sup>4</sup>, and Lari Sapoznikov<sup>2</sup>

<sup>1</sup>Department of Oral Biology, School of Dental Medicine and Department of Bio-Engineering, Faculty of Engineering, Tel Aviv University, Tel Aviv, Israel

<sup>2</sup>Private Practice, Tel Aviv, Israel

<sup>3</sup>Departments of Maxillofacial Surgery and Hebrew University Jerusalem, Israel

<sup>4</sup>Hadassah Faculty of Dental Medicine, Hebrew University Jerusalem, Israel

### Abstract

**Background:** Extracted teeth are still considered a clinical waste and therefore being discarded. It is evident that chemical composition of dentin is similar to bone. Following tooth replantation the tooth is replaced by bone then followed by root resorption and ankyloses and finally integrated into the surrounding alveolar bone.

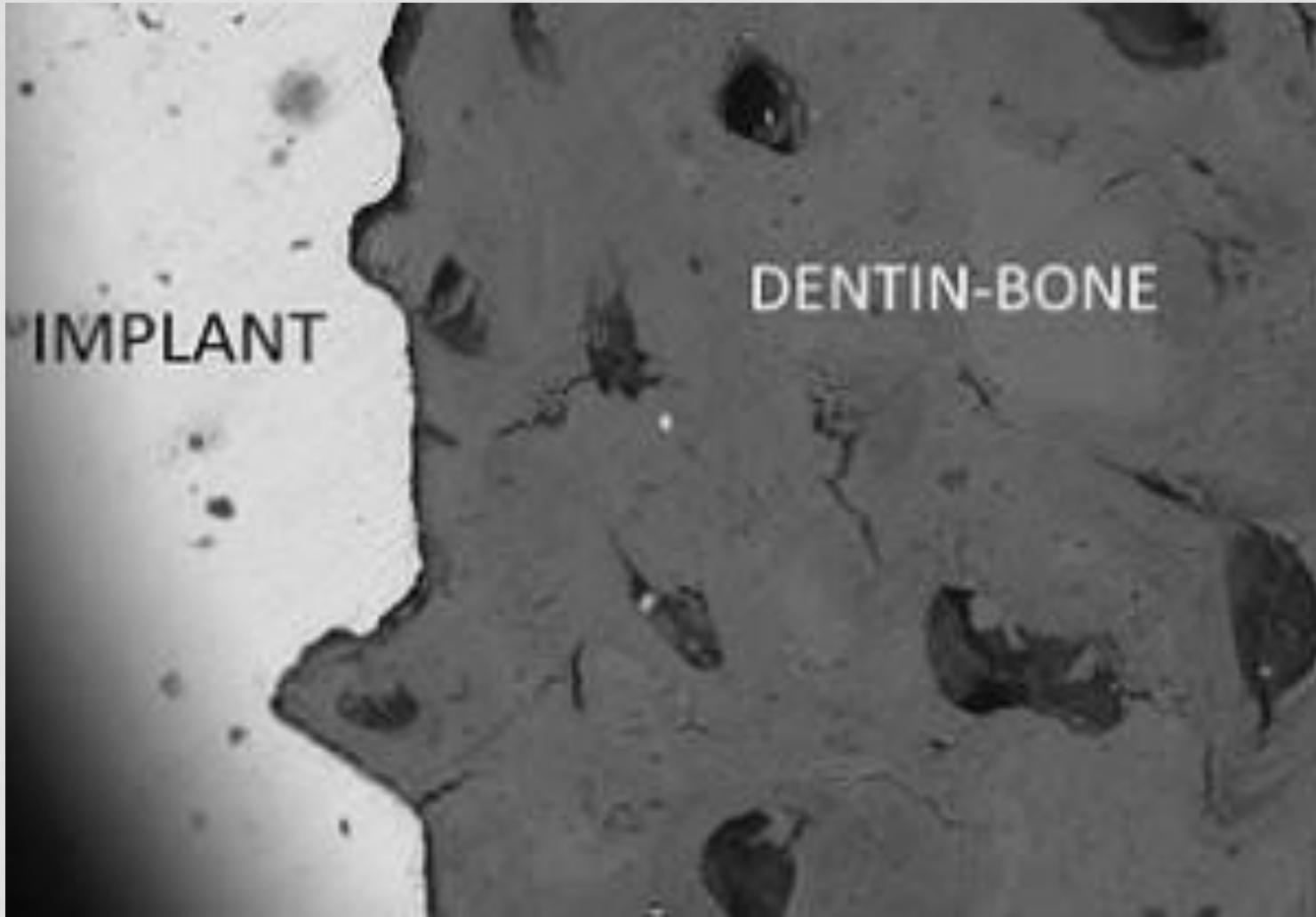
**Aims:** Here we present a novel procedure in a clinical setting that employs freshly extracted teeth that are processed into a bacteria-free particulate dentin, and then grafted immediately into extraction sites or bone deficiencies.

**Methods:** The procedure consists of reducing any restorations, caries or debris. The clean and dry tooth, mostly dentin, is immediately grinded using a specially designed 'Smart Dentin Grinder'. The dentin particulate of 300-1200  $\mu\text{m}$  is sieved through a special sorting system. The sorted particulate dentin is immersed in basic alcohol cleanser in a sterile container to dissolve all organic debris and bacteria. Then, the particulate is washed by sterile saline. The bacteria-free particulate dentin is ready for immediate grafting into extraction sites or into bone defect sites.

**Results:** During the period of two years, more than 100 procedures were performed, most of which for the purpose of preservation of alveolar bone. In those patients, implant insertion was possible as soon as 2-3 month after grafting of autogenous dentin. On x-rays and biopsy of grafting sites a dense dentin-bone composite was found. No wound healing complications were observed.

**Conclusion:** Autogenous mineralized dentin particulate grafted immediately after extractions should be considered as the gold standard for socket preservation, bone augmentation in sinuses and bone defects.

# **SHRNUTÍ, INFO – DALŠÍ DOPORUČENÍ A ÚVAHY AUTORA**



# OBJEKTIVNÍ POLOHA

- Stovky dokumentovaných cases ve světě
- 5 vlastních kasuistik, bez komplikace,
- Rychlé a bezproblémové hojení
- 15 minut přípravy je rálný čas
- Pokud je očištění delegováno, lze paralelně operovat
- Recykling, biologický přístup k likvidaci biol. odp.
- Ne rezignace na NKM, možná každý pátý pacient
- Compliance pacienta

# DĚKUJI ZA POZORNOST

