Efficacy of the Microscope in Periodontal Surgery and our new technique

In recent years, microscopic treatment has been used in various areas. In the field of periodontal disease, periodontal basic treatment, periodontal plastic surgery, and periodontal regeneration therapy have been established as periodontal micro-treatment areas, and a number of advantages have been reported, which I have also experienced myself.

Generally, treatment of periodontal disease is essential for eliminating infection, and in this regard, utilizing a microscope is very effective in confirming the presence and removal of infection at a high magnification. Furthermore, primary closure of the flap, an important factor in the success of periodontal regeneration therapy, is achieved when the incision, dissection, and suturing are performed precisely and properly. It is common knowledge that the microscope has dramatically improved success rates in achieving primary closure.

In recent years, there has been a shift from using the traditional extended flap design to the MI flap design, which is commonly utilized in combination with a microscope where necessary. Moreover, there is a growing need for surgery that is more accurate and precise, with high magnification and clarity, particularly for approaches that do not require incisions in the interdental papillae.

In the field of periodontal plastic surgery, we often experience the benefits of using a microscope to perform procedures that are highly precise and delicate. We have published a combination of periodontal plastic surgery and periodontal regeneration to simultaneously achieve hard and soft tissue reconstruction:supraalveolar periodontal tissue reconstruction (SAPRE), and a new flap design that allows for a 1-2 wall approach to alveolar bone defects without incision into the interdental papillae: Double Entire Papilla Preservation technique (DEPP).

In my presentation, several cases in which periodontal treatment was performed utilizing a microscope will be presented, and, in addition, sharing our new periodontal surgical techniques. Hopefully, it will contribute to all participants.



Yudai Ogawa, DDS