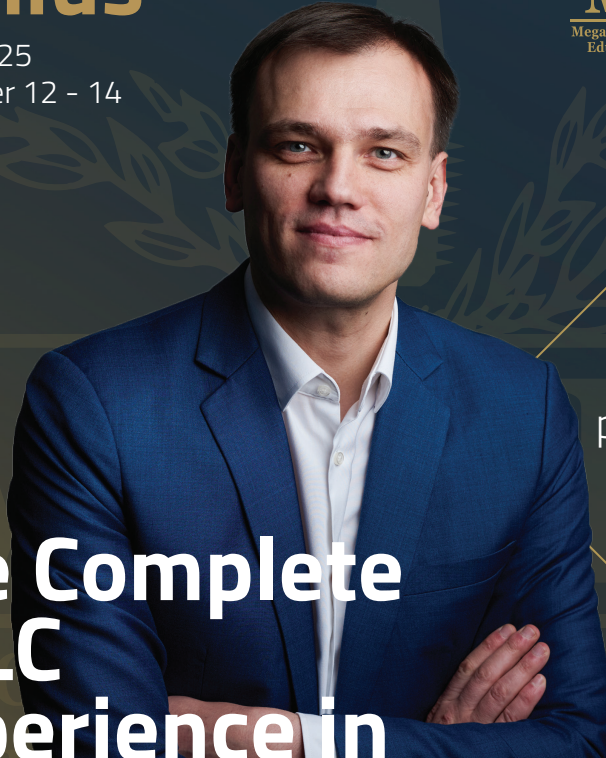


Vilnius

May 23 - 25
September 12 - 14



prof. Tomas
Linkevičius

The Complete ZBLC Experience in Person

First full 3-day course with handsons to give full experience of Zero bone loss concepts!

- ◆ Day 1. Delayed Implants
- ◆ Day 2. Immediate Implants
- ◆ Day 3. Implant Prosthetics
+ Free access to Online courses!

DAY 1

DELAYED IMPLANTS

Development of crestal bone stability by surgical means.

Influence of vertical soft tissues on crestal bone stability. Does platform switching save the bone? Influence of implant placement depth on crestal bone stability. What is the importance of implant-abutment connection stability? Bone remineralization and corticalisation processes in thick tissues.

Four novel methods to increase vertical soft tissue thickness:

- a. Subcrestal implant placement
- b. Flattening of the alveolar bone
- c. "Tent pole" technique
- d. Vertical soft tissue thickening

HANDS-ON

All 4 methods to increase vertical soft tissue thickness

1. Practice on pig jaws of vertical soft tissue augmentation with membranes
 - a. Incision
 - b. Blunt flap release to relief the tension
 - c. Preparation of allogenic membrane
 - d. Positioning of membrane
 - e. Suturing of the membrane with matrix suture for stabilization
2. Subcrestal implant placement
3. Tent pole technique
4. Flattening of the bone

ADDITIONAL HANDS-ON

1. Soft tissue profile creation with individual healing abutment

DAY 2

IMMEDIATE IMPLANTS

- Rationale for immediate implant placement I. Why should we do immediate implants?
- Rationale for immediate implant placement I. Why immediate implants are still considered risky?
- Why are immediate implants successful? I. Osseointegration, profile and peri-implant tissues
- Why are immediate implants successful? II. Primary stability and crestal bone levels
- Immediate implant placement in molar region I. Implant depth, stability, bone grafting, healing abutments and soft tissue grafting.
- Type A, B and C.
- Immediate premolars
- Immediate implants in anterior region
- Complications, which could be avoided

HANDS-ON

Place implants in premolars and molars, when traditional apico-coronal placement is not possible. Individual healing abutment fabrication.

Practice with models

1. Evaluation of the extraction socket
2. Elimination of thin septum
3. Implant diameter and thread width determination
4. Placement of the implant
5. Fabrication of individual healing abutment.

DAY 3

IMMEDIATE IMPLANTS

How to control cement remnants after cementation. Supragingival margins and individual abutments. Relation between cement and peri-implant disease. Screw-retained restorations. Use of Ti-base for fabrication of restorations. Which cement is most suitable for cementation of Ti-bases?

Subgingival prosthetic materials. Zirconia, titanium, ceramics – which is better. Use of ultra-polished zirconia for implant restorations. Composition of peri-implant soft tissues.

Supragingival materials. Ceramics, e.max, monolithic Zr – where to use and why?

HANDS-ON

Prosthetic part will focus on implementing special impression method, designed by Dr. Tomas Linkevičius for deeply positioned implants, by using occlusal registration materials to stabilize the transfer.

◆ Location:

VILNIUS PARK PLAZA HOTEL
M. K. ČIURLIONIO 84,
LT03100 VILNIUS, LITHUANIA