



MUCOGINGIVAL SURGERY AND CONSERVATIVE DENTISTRY: AN ALLIANCE FOR HEALTH AND ESTHETICS

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Since patient aesthetic expectation and perception constantly increased in the last decades, the ultimate goal of mucogingival surgeries is not only the root coverage but also an aesthetic outcome, which results in a complete blending of tissue color and texture of the treated area with the adjacent soft tissues (de Sanctis & Zucchelli 2007). For these reasons recently the AAP substituted the old term mucogingival surgery with periodontal plastic surgery in order to emphasize the esthetic purpose of these procedures. The most widely utilized surgical technique are the coronal advanced flap (de Sanctis & Zucchelli 2007) and the multiple coronal advanced flap (Zucchelli & de Sanctis 2000) with or without connective tissue graft. One of the most frequent problem a clinician can encounter in performing mucogingival surgery is the absence of a CEJ due to the presence of non-carious cervical lesion (NCCL).

The major concern related with the undetectability of the CEJ is the difficulty to predetermine the maximum root coverage level (MRC). A method to predetermine the MRC based on the calculation of the ideal height of the anatomic interdental papilla (Zucchelli et al 2011, 2010) was demonstrated to be reliable in predicting the position of the soft tissue margin after root coverage surgery. Following this method, it is possible to recreate the cemento-enamel junction at the level of maximum root coverage, thus obtaining stabile and esthetic results.