

GINGIVAL ENLARGEMENT: 915NM DIODE LASER -ASSISTED TREATMENT.



Figure 1: Presence of gingival enlargement involving the vestibular and lingual side of 4.2 and 4.3, regardless the initial periodontal therapy. The 41 year old female patient has a negative history of immunosuppressant and calcium channel blockers or other drugs known to cause gingival enlargement.



Figure 2: A NIR 915 nm diode laser has been used for the treatment. The SMA905 connection of the POCKET LASER device (88Dent PERO-MI) enable the quick substitution of cables and devices connected to the main unit.

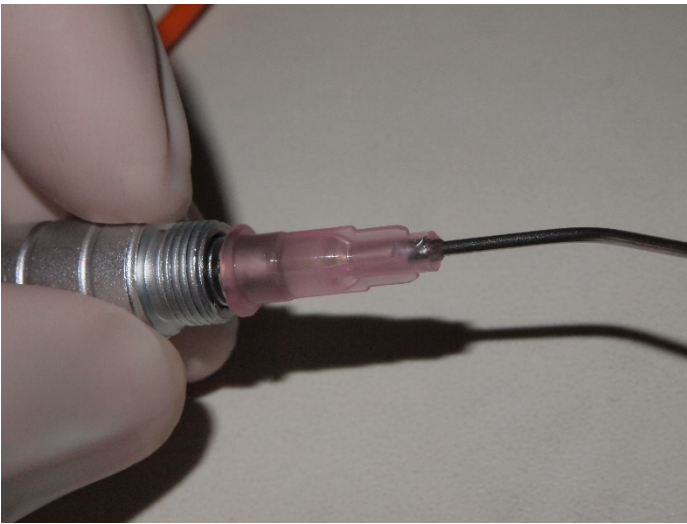


Figure 3: The interchangeable tips can be conveniently mounted on the MULTIP ORANGE handpiece.

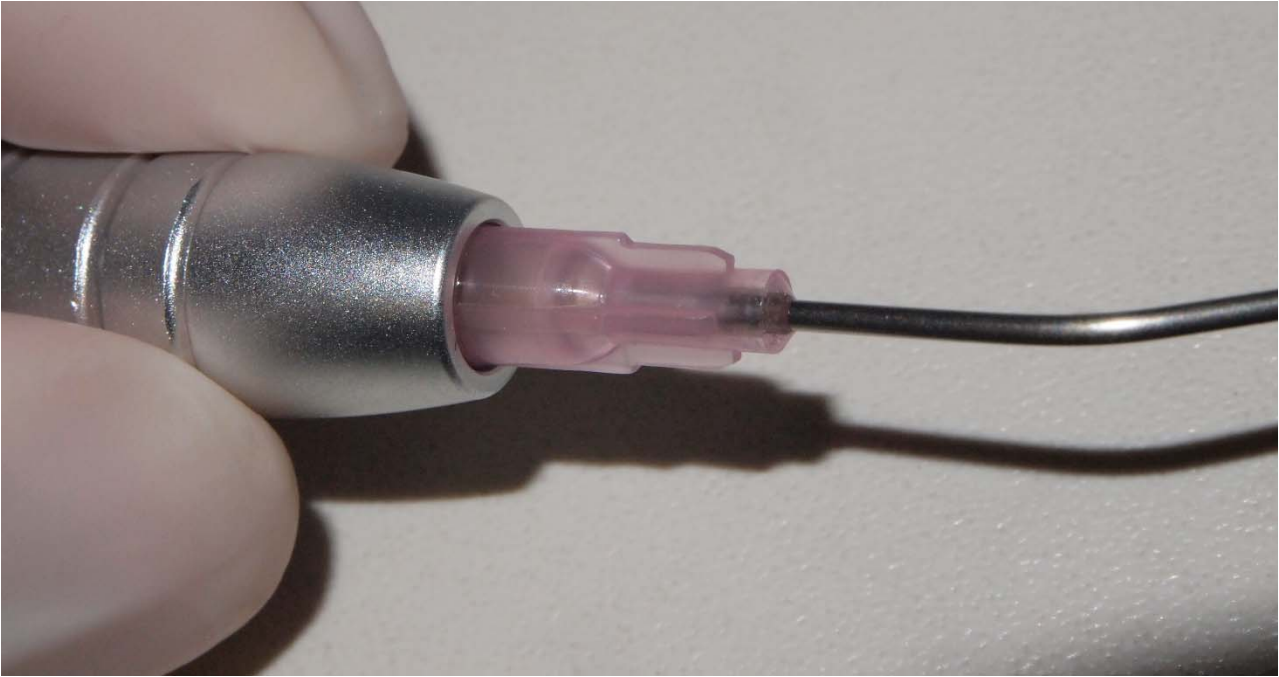


Figure 4: The tips are firmly retained thanks to a screwable ferrule.

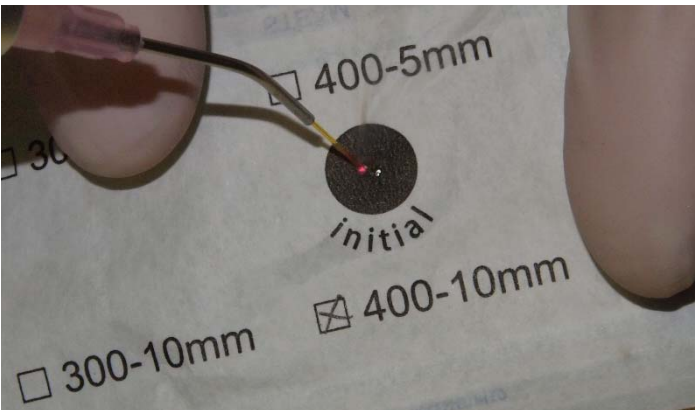


Figure 5: On the rear of package that holds the tip it is possible to find diameter and specifics of the fiber as well as a specific area to activate the fiber.



Figure 6: After administering ¼ vial of local anesthesia (Mepivacaine 3% without vasoconstrictor), a laser assisted gingivoplasty has been performed using a 300 µm activated fiber. At the end of the intervention the cloth stabilization was noticed.



Figure 7: After the use, the connection of the ORANGE handpiece is protected by means of a sealing device. The tip might be cleaned, disinfected, packed and sterilized and reused.





Figure 8: The sample have been collected and preserved in a buffered formalin. The histological exam confirmed the diagnosis of epulidis.



Figure 9: Healing at 7 days. Periodontal dressing were not applied and the patient was able to brush the area with soft bristles 5 days after surgery.

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