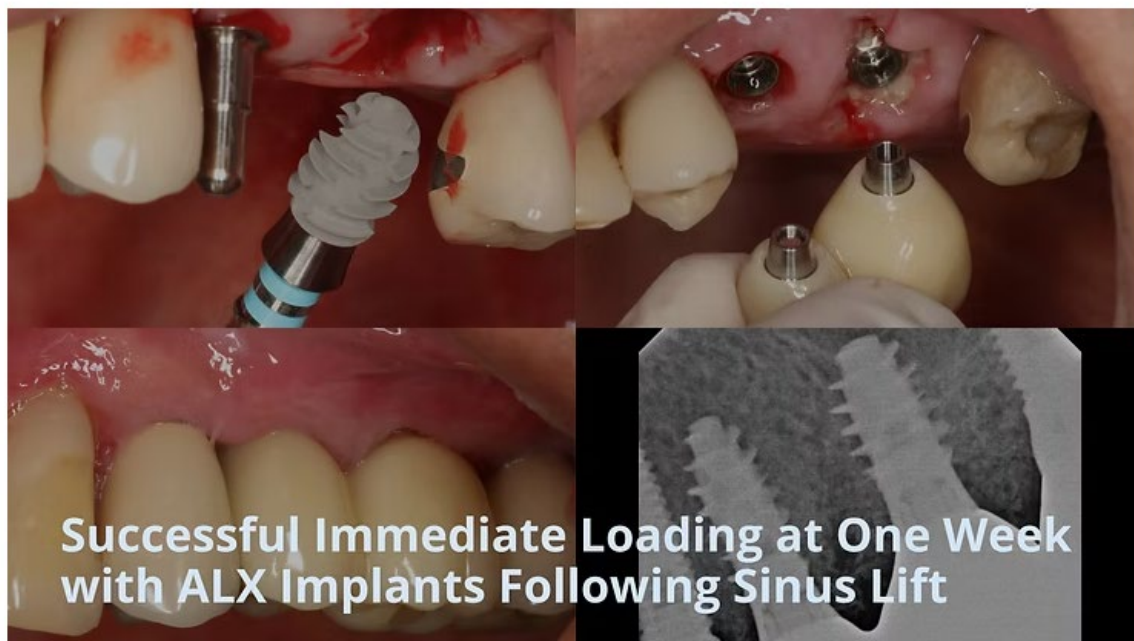


Successful Immediate Loading at One Week with ALX Implants Following Sinus Lift



✓ Case Summary 🔍

Tooth #26 was extracted and immediately replaced with an implant combined with a sinus graft, while tooth #25 underwent delayed implant placement following alveolar ridge preservation.

Using Neobiotech's new **ALX implant system**, high primary stability was achieved even in the compromised posterior maxilla, enabling immediate loading.

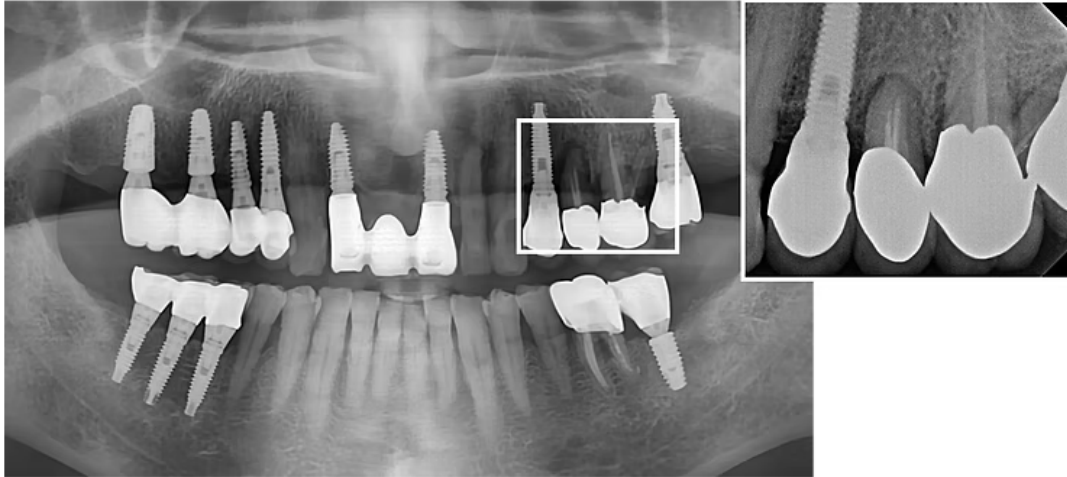
The final prosthesis was delivered one week after implant placement, and the 5-month follow-up demonstrated a stable and satisfactory clinical outcome.

Case Presentation

1 Diagnosis

Diagnosis

Teeth #25 and #26 were diagnosed with chronic periodontitis accompanied by noticeable mobility, indicating a poor long-term prognosis and the need for extraction.



Treatment Plan

The treatment plan was to first extract tooth #25 and perform alveolar ridge preservation using bone grafting materials, in order to maintain the site for future implant placement.

After a healing period of approximately 4 months, extraction of tooth #26 and simultaneous implant placement at both #25 and #26 sites were planned.

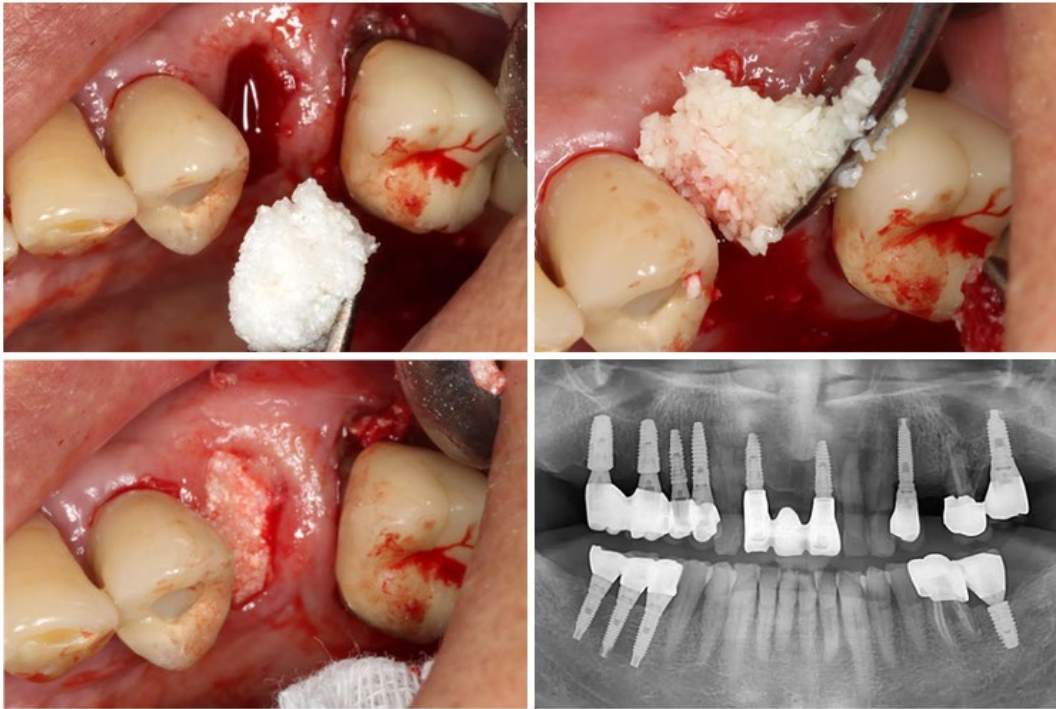
2 Surgical phase

[Extraction and Ridge Preservation]

- Tooth #25 was extracted, and granulation tissue was meticulously removed to eliminate residual infection and prepare a clean socket for grafting.

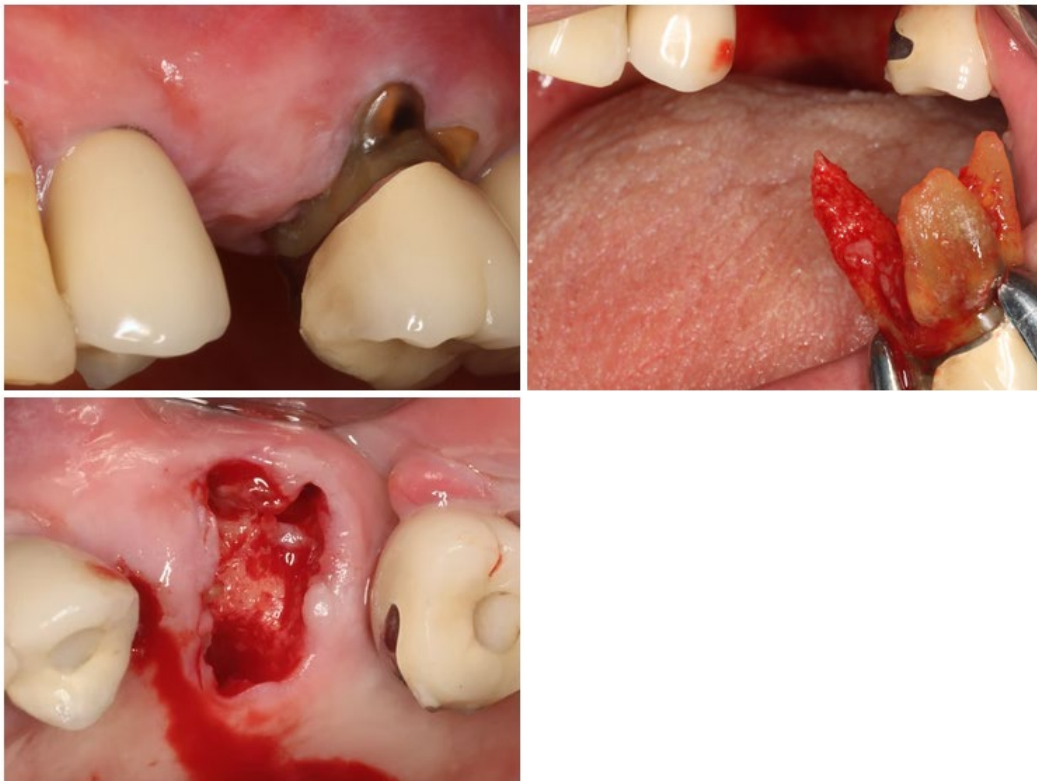


- Ridge preservation was performed using Neo Bone (100% cortical FDBA) to fill the socket, and a layer of bovine-derived S1 bone was placed over the graft to enhance stability and volume maintenance.

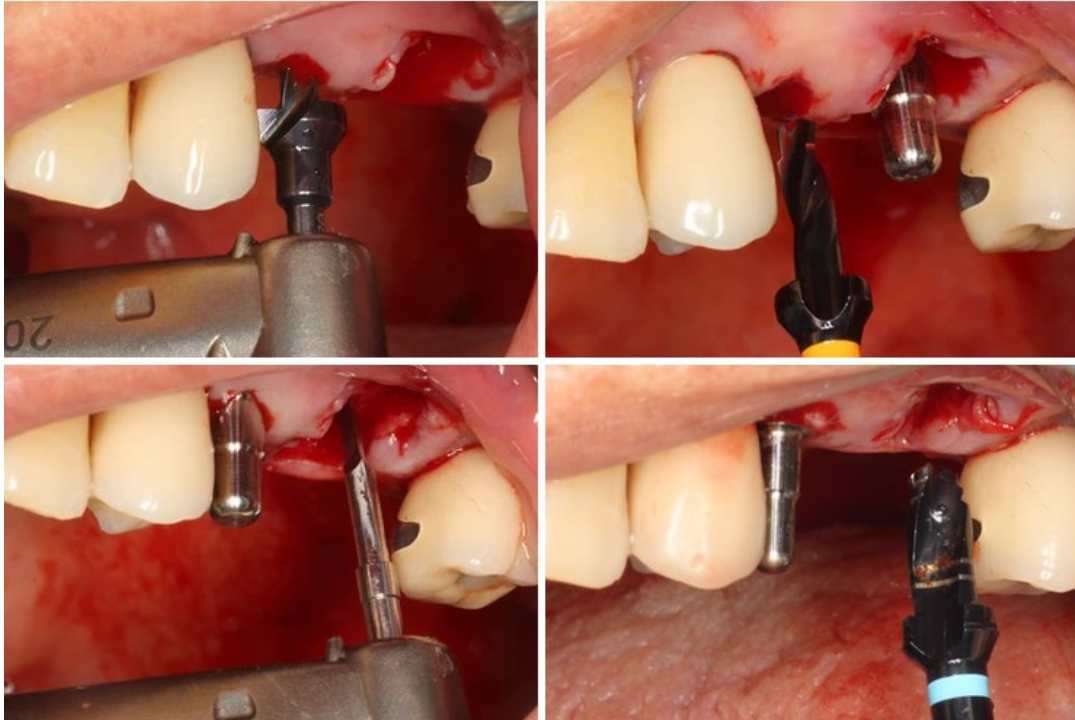


[Implant Placement and Sinus Lift]

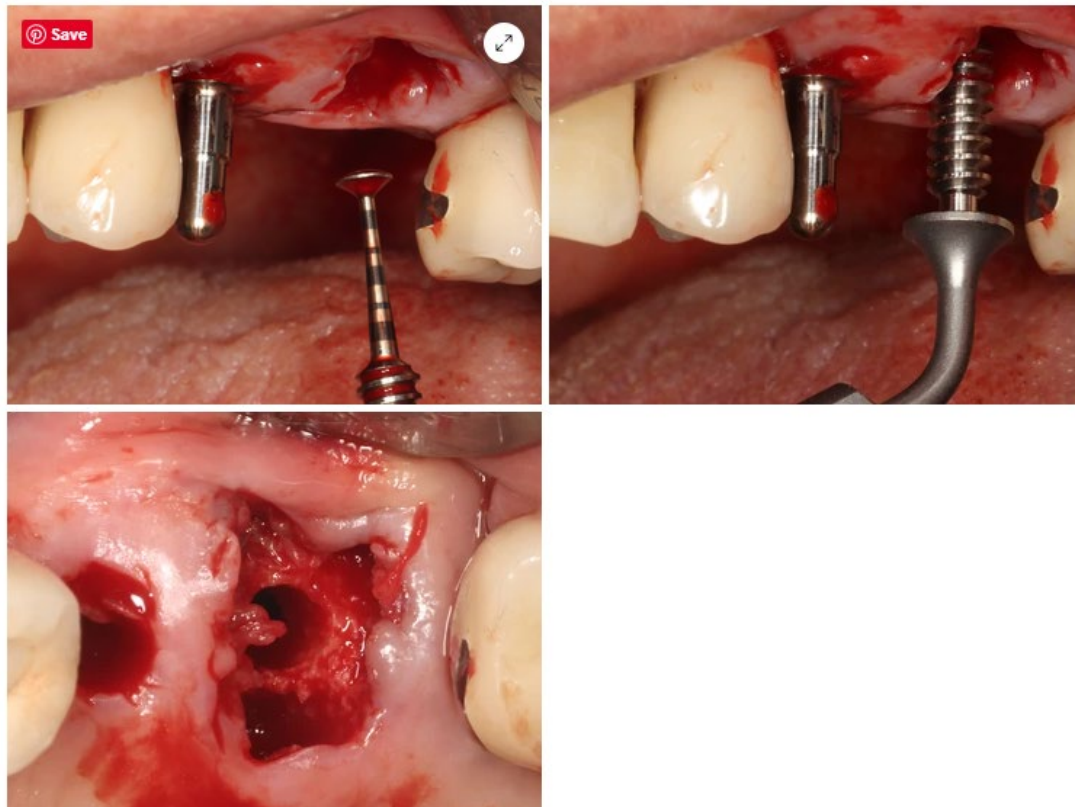
- At the 4-month re-entry, drilling for implant placement at site #25 was initiated. During the same visit, tooth #26 exhibited increased mobility and was therefore extracted for immediate implant placement.



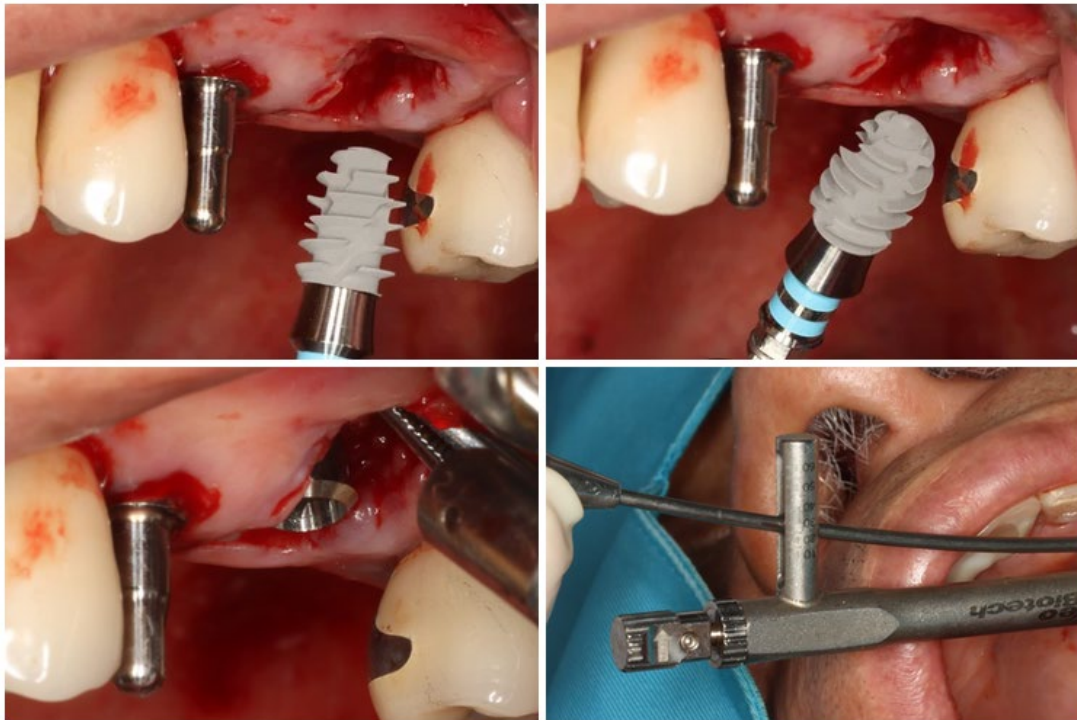
- Sequential drilling was performed for both implant sites, with final drilling completed to 3.5x10mm at site #25 and 4.0x10mm at site #26.



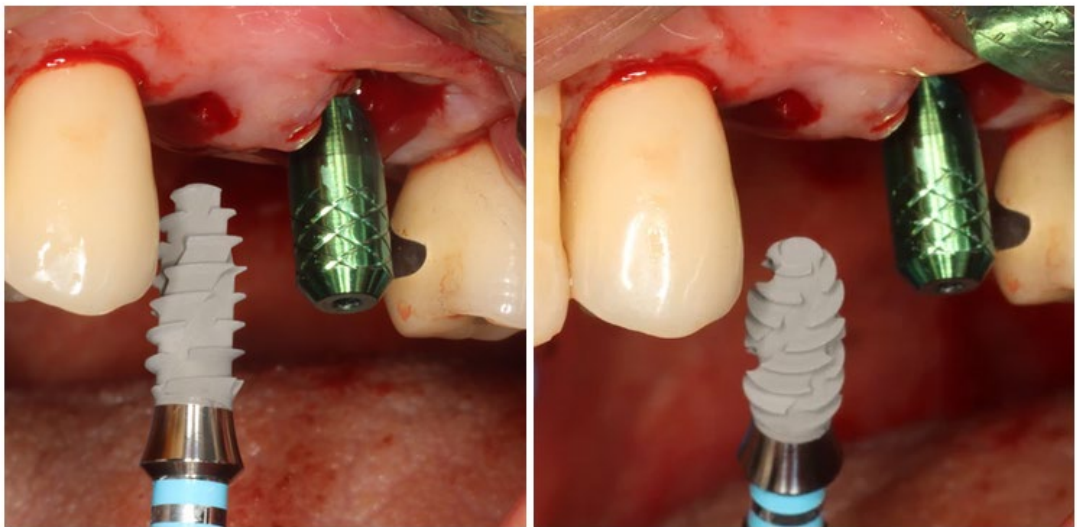
- At site #26, a crestal sinus lift was conducted due to insufficient vertical bone height, and the case was classified as Sinus Class II.



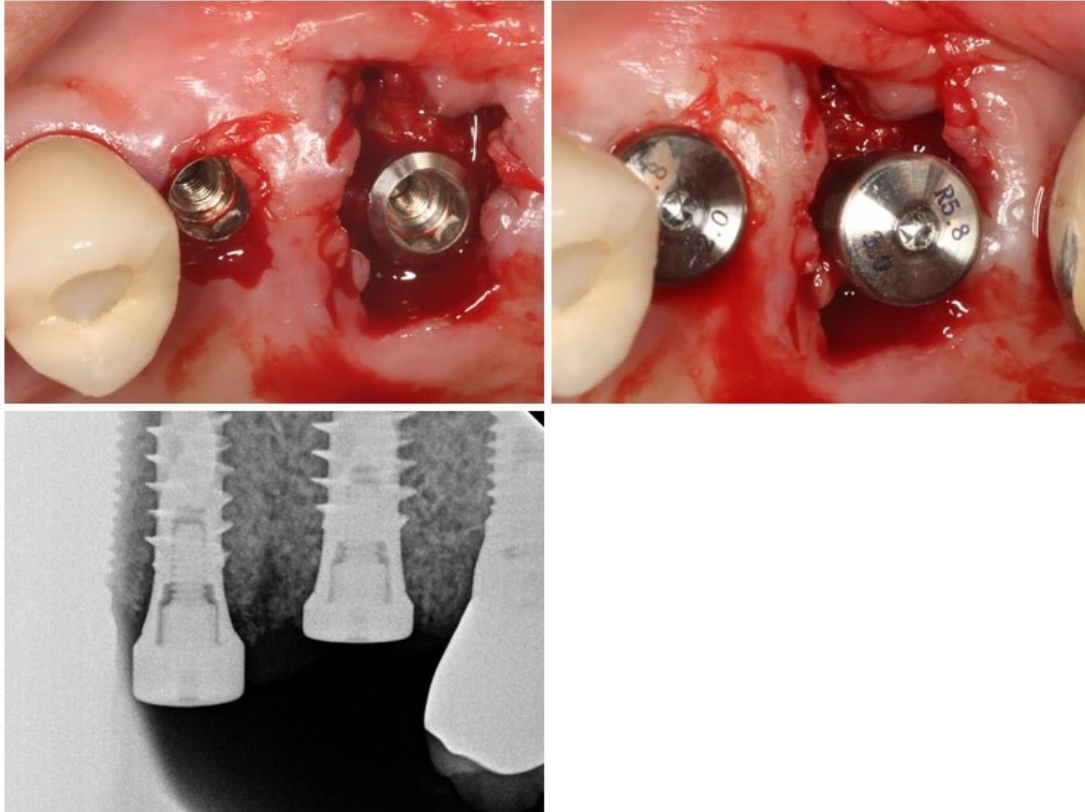
- At site #26, a D222 bone density was confirmed, and an ALX IT 5508 30WT implant was placed using a self-tapping technique with an insertion torque reduced from 80 to 40 Ncm for optimal control.



- At site #25, a D322 bone density was noted, and an ALX IT 4510 30 implant was inserted with self-tapping approach, with torque adjusted from 70 to 40 Ncm.

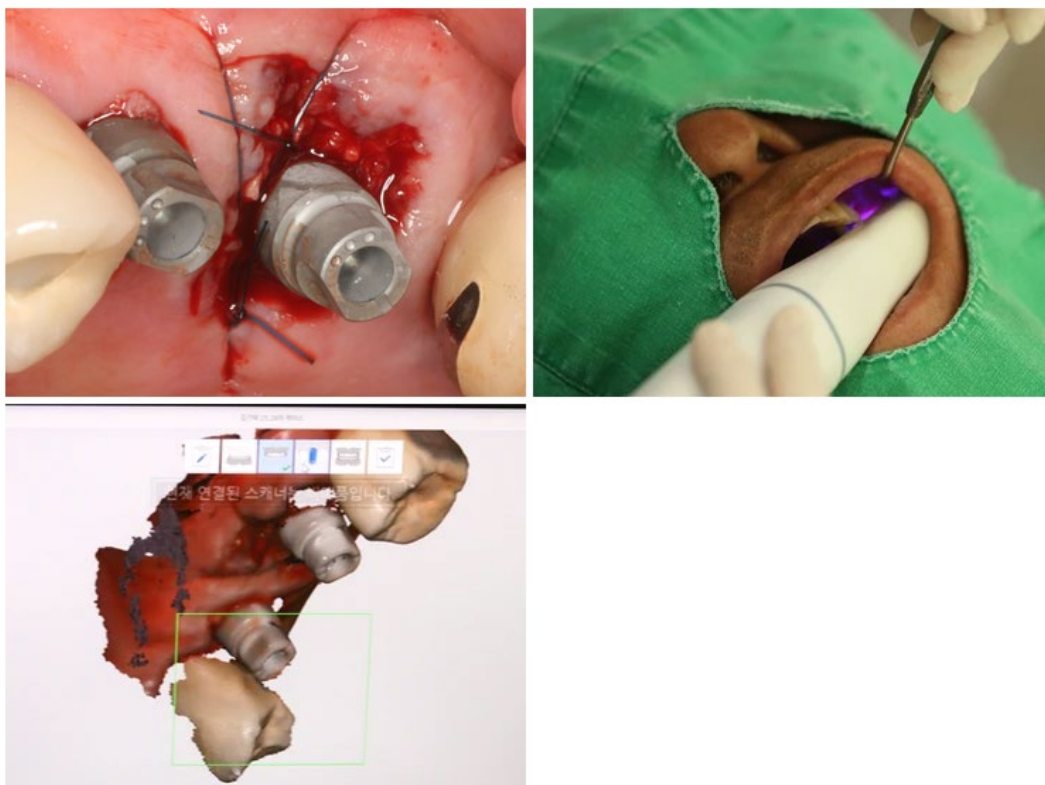


- Additional FDBA grafting (Neo Bone) was placed around the implant at site #26 to support the sinus area.



[Stability Check and Immediate Digital Workflow]

- Initial stability values (ISTV) were measured and adjusted as follows: #25 achieved 75, #26 achieved 86.
- Scan bodies were connected immediately after implant placement, and intraoral digital impressions were taken on the same day.



- A postoperative panoramic radiograph confirmed proper positioning of the implants.



3 Prosthetic phase - One Week Immediate Loading

- One week post-surgery, implant stability was re-evaluated using the **AnyCheck** device. Sufficient stability values (ISTV: #25 – 88, #26 – 88) allowed for immediate loading, and the final prosthesis was successfully delivered.

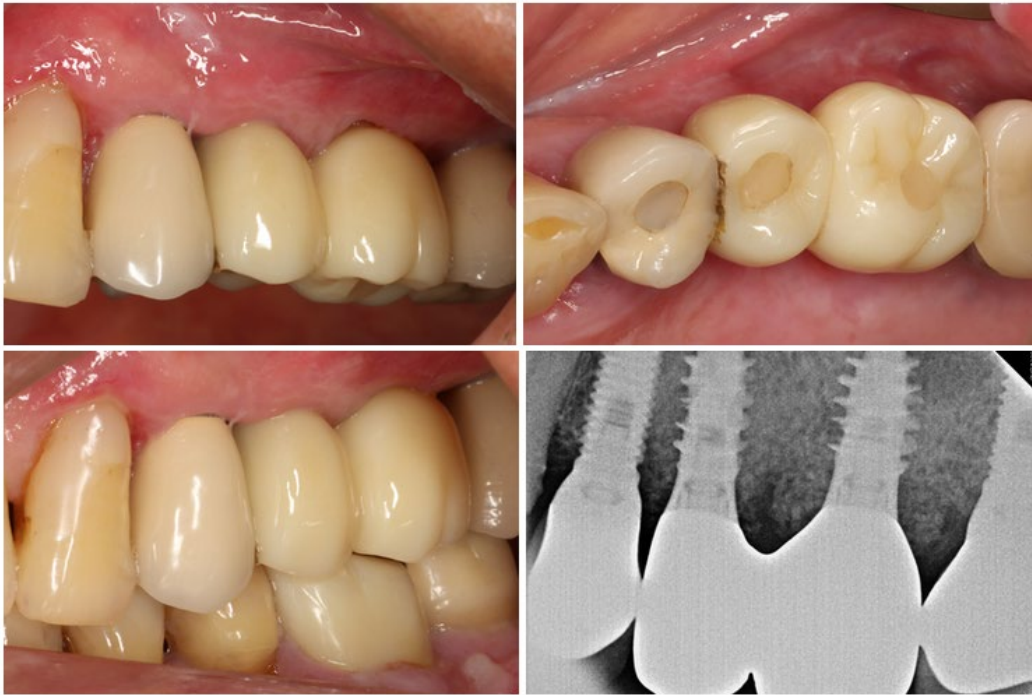


- Final occlusion was carefully adjusted to ensure even load distribution.

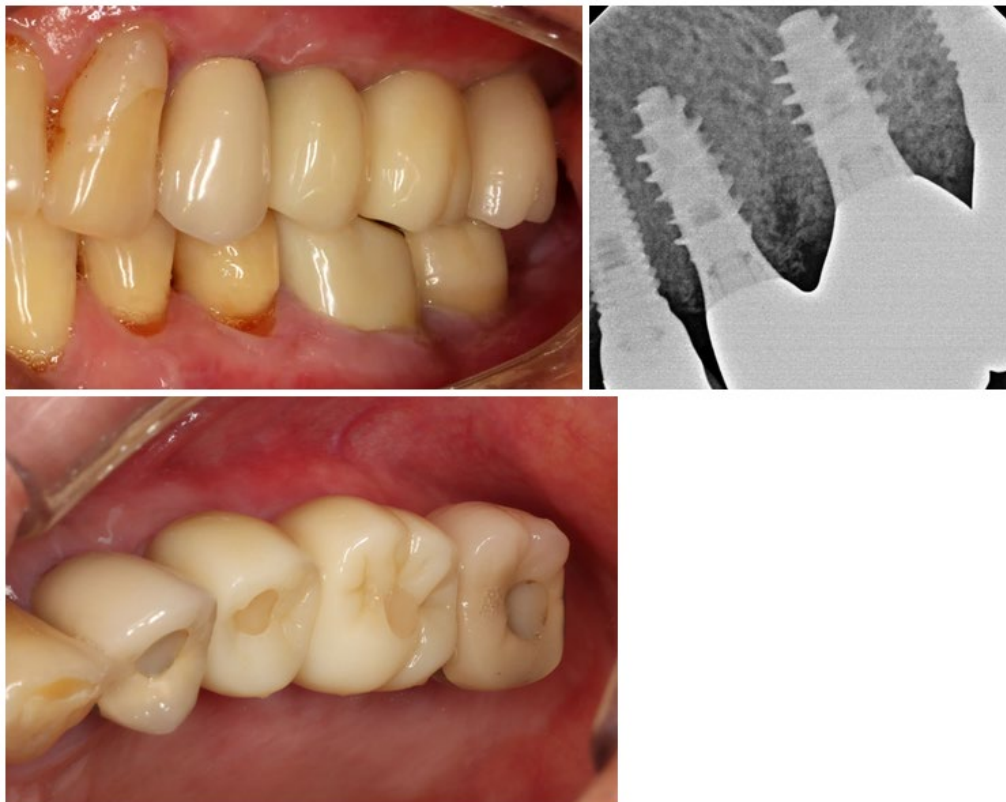


4 Follow-Up

- At the **5-week follow-up**, the patient reported no discomfort, and the implants showed good stability. ISTV measurements remained consistent: #25 – 83, #26 – 85, indicating continued osseointegration.



- The **5-month follow-up** confirmed a well-maintained, stable result, both clinically and radiographically.



Youtube [#25,26 Focus on sinus class II ALX placement with functional loading at 1 week](#)