

# Single rehabilitation on Shelta implant using a XA abutment

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Fig. 1



Fig. 2

Pre-op clinical images: the general situation is unfavourable, several caries lesions can be noticed and the element 1.2 is clearly hopeless



Fig. 3

Detail of the pre-op situation



Fig. 4

Occlusal view of element 1.2



Fig. 5

The implant site is prepared, and a parallelism post is used to check the correct insertion axis



Fig. 6

A Shelta tapered implant is placed, and a XA abutment for screw-retained prosthesis is connected to the implant



Fig. 7  
Occlusal view of XA abutment: the gap is grafted with some biomaterial

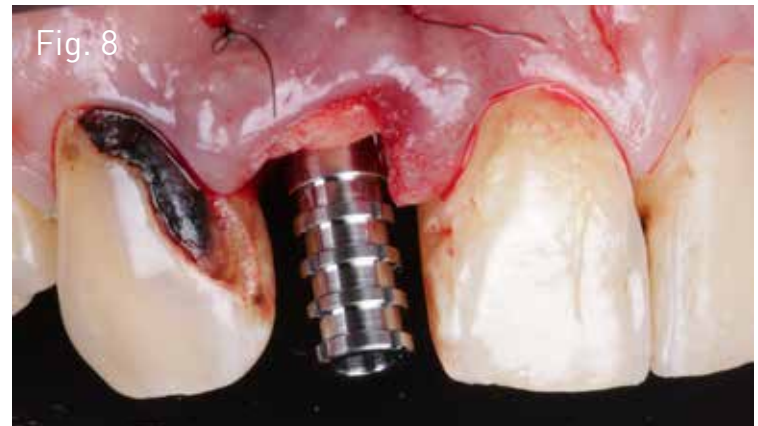


Fig. 8  
Graft with connective tissue taken from the hard palate and disepithelized; a titanium sleeve for immediate loading is placed on the XA abutment



Fig. 9  
The temporary crown is placed



Fig. 10  
At the same time, a restorative therapy on the decayed elements is performed, with the application of direct veneers in composite



Fig. 11  
By removing the temporary crown, the correct development of the emergence profile around the rehabilitation can be noticed



Fig. 12  
Impression is taken using the dedicated Pick-up transfer directly on the XA abutment, following the principles of One Abutment - One Time technique



Final clinical images: the rehabilitation on Shelta implant and XA abutment is completed with success, the final result is absolutely good-looking



Detail of the post-op situation



Nine months RX follow-up