

SOCKET PRESERVATION AND PROVISIONALIZATION OF POST-EXTRACTIONAL SITES

4th year, 8th semester

The timing of the extraction is a key factor with a direct impact on future therapeutic procedures. The success or failure of the final restoration will depend on how the extraction itself is planned and, more importantly, on the management of the post-extraction socket.

A correctly managed post-extraction socket from the very beginning will become a suitable bony and mucogingival substrate for any type of restoration in the future. Conversely, a poorly and insufficiently managed post-extraction socket will only become an aggravating and limiting factor for future restorations.

For more than two decades, research has focused on developing materials and preparations aimed at substituting various tissues in the body. But what synthetic material can have superior characteristics to those derived directly from the body?

Most of the time, we have the answer in our forceps, because no material currently available has better properties and more favorable results than the extracted tooth itself, ground up and placed back into the socket.

This procedure, of introducing the ground tooth into the post-extraction socket, is internationally recognized as the gold standard in post-extraction socket management.

Blood derivatives also play a crucial role in the healing process cascade and can be used both in combination with the ground tooth and as standalone elements in cases where the extracted tooth cannot be used as an additive material.

However, in any situation, whether we use autologous or synthetic materials, the primary goal of the extraction should be the preservation of the post-extraction socket and, along with it, the adjacent mucogingival substrate.