

I. Stephen Brown, D.D.S.

"Philadelphia's Periodontist"

CENTER FOR
LASER PERIODONTICS
AND IMPLANTS



PerioDontaLetter

I. Stephen Brown, D.D.S. *"Excellence in Non-Surgical Periodontics, Implants & Laser Treatment"*

Introducing a Breakthrough Treatment for Gingival Recession: Dr. John Chao's Pinhole Gum Rejuvenation Technique®

Often Eliminates the Need for the Cutting, Suturing and Downtime of Traditional Gingival Grafting

According to *The Journal of the American Dental Association*, the prevalence of gingival recession in the United States includes 50 percent of people 18 to 64 years of age and 88 percent of individuals 65 years of age and older. And, with an aging population, the number of recession cases in the U.S. is certain to soar.

Why Should Gum Recession Be Taken Seriously?

When gum recession occurs, unsightly root structure of the tooth becomes exposed. This means that tooth decay and sensitivity can affect the teeth along the gumline and appearance is often compromised. Bone

loss occurs on the facial of the affected tooth leading to increased mobility and possible loss of the tooth.

Currently, the most common and predictable treatment for gingival recession is the connective tissue graft (CTG) in which the patient's own connective tissue is taken from

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BEFORE



Case #1

AFTER



I. Stephen Brown, D.D.S.

"Philadelphia's Periodontist"

Brown Center for Laser Periodontics and Implants

220 S. 16th Street, Suite 300, Philadelphia, Pennsylvania, 19102

215-735-3660

www.theperigroup.com • theperigroup@gmail.com

the palate and used to cover the area of recession. Another treatment option involves using allograft material such as Alloderm® or freeze-dried donor tissue to cover the recessed areas. While both CTG and allograft procedures tend to be highly successful, Dr. Stephen Brown has now been trained and certified to use a new technique called Chao Pinhole Gum Rejuvenation.

Chao Pinhole Gum Rejuvenation was patented by Dr. John Chao after years of development and trials. This technique, used along with a set of specially designed and patented dental instruments, offers a number of advantages for patients.

Chao Pinhole Gum Rejuvenation

Chao Pinhole Gum Rejuvenation is a sophisticated way to move receding gingiva back into place without grafting surgery. Rather than transferring gingival tissue from the palate to the area of recession, the new technique can be completed with virtually no discomfort and no downtime.

The procedure consists of the following steps: The affected teeth are cleaned and prepared, and the

gingival tissue is anesthetized. A small entry point is made in the gingiva above the tooth or teeth to be treated. A series of specialized dental instruments are inserted into the entry point and moved to free the gingival tissue. Then the gingival tissue is gently guided apically or coronally to the proper position for a normal gingival margin.

Next, a small angled instrument is used to pass several collagen strips through the entry point and place them under the gingiva. The collagen helps to keep the gingival tissue in place and stimulates the body to generate more collagen. Pinhole Gum Rejuvenation can treat as many as ten teeth at the same time. The small entry point quickly heals and is virtually undetectable the next day.

The primary purpose of Pinhole Gum Rejuvenation is to save the tooth by stopping additional recession and bone loss. Additionally, an attempt is made to cover the exposed root surface. This is a breakthrough in treating recessions, when applicable. A research study published by Dr. Chao in the *International Journal of Periodontics and Restorative Dentistry* **found 90%**

coverage in 90% of the teeth treated with Chao Pinhole Gum Rejuvenation.

Until the invention of Pinhole Gum Rejuvenation, connective tissue grafting surgery was the standard treatment for recession. However, connective tissue grafting requires tissue to be taken from the palate or a donor tissue must be used in order to complete the treatment. Because these procedures generally require cutting and suturing, the amount of teeth that can be treated at one time is sometimes limited. Pinhole Gum Rejuvenation can address several teeth through just one tiny entry point and, unlike connective tissue grafting, multiple teeth can be treated in one session.

Etiology of Gingival Recession

- An anatomical condition with a pre-existing or acquired alveolar bone dehiscence combined with localized prominent tooth malposition, inadequate keratinized gingival dimensions in quality and quantity, high muscle attachment, and frenum pull.

The Pinhole Technique vs. The Graft Technique



- Occlusal disturbances and para-functional habits.
- Traumatic, overzealous tooth brushing techniques (i.e., forceful, horizontal) frequently associated with a pre-existing lack of cortical bone, or acquired bone dehiscence
- Uncontrolled marginal inflammation with

accumulation of dental plaque due to improper brushing techniques.

- Iatrogenic factors related to periodontal, orthodontic, and periodontal/restorative procedures on thin biotype (i.e., gingivectomy, apically positioned flap, tooth over preparation violating the biologic width, incorrect fitting

of the restoration with over-contouring or a gap between the margin of the crown and the tooth structure).

Criteria for Patients

- Healthy or mild systemic disease
- No contraindications for periodontal surgery.

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BEFORE

Case #2

AFTER



BEFORE

Case #3

AFTER



BEFORE

Case #4

AFTER



continued on the next page

- Absence of previous peri-odontal surgery at the involved sites
- History of compliance with oral hygiene instructions and periodontal recall
- Absence of plaque and bleeding on probing at surgical sites
- Presence of bone and papilla height between the teeth
- Faster recovery for the patient than traditional grafting
- Usually no need for uncomfortable sutures
- No need for scalpels
- No need to take donor tissue from the patient's palate
- Excellent, natural-looking, long-lasting results
- One appointment
- Possible tooth loss is avoided
- **A more attractive smile!**

What Are the Benefits of Pinhole Gum Rejuvenation?

- Less discomfort for the patient after treatment and minimal downtime

Conclusion

Pinhole Gum Rejuvenation offers patients an alternative to connective tissue graft surgery to treat gingival recession.

While both procedures are highly successful, Chao Pinhole Gum Rejuvenation offers many advantages for patients as noted earlier in this article. For the fearful patient, this procedure could be the difference between possible tooth loss and continuing discomfort or tooth retention, comfort, and improved appearance.

We are pleased to offer this new technique for your patients with recession. If you have questions about Chao Pinhole Gum Rejuvenation or a particular case to discuss, give us a call. As always, we welcome your comments and suggestions.

Did you know?

Dr. Brown is the first and only periodontist in the Philadelphia area to be certified to use the revolutionary Chao Pinhole Gum Rejuvenation Technique.

Dr. Brown has long been recognized as an "Opinion Leader," seeking out the latest technologies for the benefit of his patients. He was also the first periodontist in the Philadelphia region to be certified to deliver the LANAP Protocol. He is a nationally recognized pioneer in the use of this Laser Assisted New Attachment Procedure, a ground breaking alternative to conventional surgery for the treatment of gum disease. He recently published an important article on the subject in the journal, *Current Advances in Periodontics*.

Dr. Brown offers his patients and colleagues the Carestream Cone Beam CT, a state-of-the-art 3D Imaging System, which produces low radiation CAT Scans to enhance treatment planning and surgical success.

Dr. Brown lectures nationally and internationally, and is Professor of Periodontics at The University of Pennsylvania School of Dental Medicine and Temple University School of Dentistry. He is Director of the Dental Implant Division at Albert Einstein Medical Center and is an Examiner for the American Board of Periodontology (ABP). The ABP is the organization that certifies all periodontists in the United States.



Dr. Brown and Dr. Chao at the Pinhole Academy in California.