

**PET-partial extraction therapy and SS-socket shield: Modern technique for ridge preservation**

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**B**uccopalatal collapse of the post-extraction ridge is a significant challenge in restorative and implant dentistry and still challenging to restore multiple-tooth defects with implant-supported prostheses that resemble the natural dentition. Various techniques in past have been proposed at different forum for the preservation of ridge with different material. Guided bone-regeneration techniques and the use of bone-replacement materials have been shown to enhance socket healing and potentially modify the resorption process. The prime indication for socket preservation is the prevention of alveolar-bone and soft-tissue collapse, which would cause unacceptable prosthesis esthetics. Root submergence has been reported in the literature for more than four decades. A little different technique is to use the tooth itself and it has been demonstrated that the submerged tooth root retains the periodontal tissues and preserves the bone. The socket-shield technique entails preparing a tooth root section simultaneous to immediate implant placement and has demonstrated histologic and clinical results that are highly

promising to esthetic implant treatment. A retrospective five-patient case series treated seven partial extraction sites at private practise demonstrates how a modification of the socket-shield technique can successfully develop pontic sites and preserve the ridge. Maxillary four central incisors and mandibular, three-pre-molar were hemisected and the buccal fragment of the root were retained approximately 1 mm coronal to the buccal bone plate. A titanium implant was placed lingual to that tooth fragment either with or without contact to the buccal tooth fragment and a healing abutment was connected. All seven implants were osseointegrated without any inflammatory reaction and the tooth fragment was devoid of any resorptional processes. On the buccal side, the tooth fragment was attached to the buccal bone plate by a physiologic periodontal ligament. Retaining the buccal part of the root (socket shield) during implant placement does not appear to interfere with osseointegration and may be beneficial in preserving the buccal bone plate.

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