

AESTHETIC OUTCOME FOLLOWING SURGICAL MANAGEMENT OF INFLAMMATORY GINGIVAL ENLARGEMENT : A ONE-YEAR FOLLOW UP CASE REPORT

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Introduction

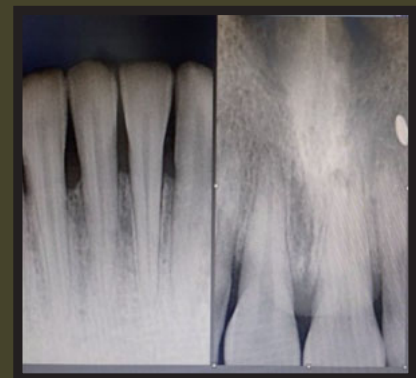
- Most common aetiology : -Dental plaque and calculus.
- Has potential to cause aesthetic, functional and masticatory disturbances.

Chief complaint

A 32-year-old female patient reported with a chief complaint of swollen gingiva for the past 6 months which bled while brushing. She refrained from brushing and the size increased further. No relevant drug history was reported. Patient was systemically healthy.

Clinical presentation

Gingival enlargement confined to interdental papilla and marginal gingiva on labial side of anterior region of both the arches presented with bluish red, smooth, shiny surface, and bleeding on slight provocation was observed. Inflammatory gingival enlargement was diagnosed. 100 percent of sites were BOP positive. Full mouth means of PI (1.67), GI (2.45), PPD (3.79) and CAL (1.95) were noted. Radiograph revealed bone loss in both arches.



Treatment

After completion of phase I therapy, flap surgery was performed in both the arches. Suture removal was done after one week, and patient was recalled after 1 month and later every 3 months for up to 1 year. Oral hygiene maintenance was reinforced at every visit.

Results

Knife edge margins with normal shape and size of gingiva were achieved after surgery. Interdental papilla receded creating a black triangle which was unaesthetic in maxillary central incisor region. Patient was motivated to strictly follow oral hygiene instructions. After one-year follow up, complete interdental papilla fill was observed as the distance from alveolar crest to contact point was ≤ 5 mm.

Conclusion

This report highlights the success of a surgical procedure and the importance of oral hygiene maintenance in gingival enlargement cases. There should be long term follow up to evaluate the tissue response and patient motivation in management of inflammatory gingival enlargement cases.