

Sterify Gel

Clinical Cases

Use Sterify Gel for the treatment of patients with periodontitis



**Dr. Tamara Volinska, PhD,
Periodontist, Ukraine**



HuFriedyGroup
The Best In Practice

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Executive Summary:

Patient A, 38 years old, female, non-smoker.

Complaints: bleeding gums, bad breath, teeth mobility. The front teeth have moved forward over the last three months. The patient complains of pain in the gums and severe bleeding when brushing her teeth.

Diagnosis: periodontitis stage 4, grade B. Secondary occlusal trauma in the front teeth.



BEFORE



AFTER



Expertise Behind the Case Dr. Tamara Volinska, PhD, Periodontist, Ukraine

PhD, periodontist, ITI Fellow, owner Perioschool (UA)

Co-founder Ukrainian Association of Periodontology and Osseointegration

30 years of clinical experience, author of the book «Fundamentals of Hand Scaling»,
privat clinic Kyiv, Ukraine

Step 1: Condition after SRP and Sterify Gel application

SRP with additional application of Sterify Gel to the front teeth of the upper jaw (1 syringe used) on the day of the procedure. Chlorhexidine 0.12% was prescribed for home hygiene for 2 weeks. In order not to traumatise the area where Sterify Gel was administered, interdental brushes began to be used in this area after a week. In all other areas, brushes were used on the 2nd day after SRP.



Step 2: Condition after 1 week

An examination was performed after one week. The patient noted a significant improvement. The gums stopped bleeding. The inflammation decreased significantly. After SRP, the gums hurt the least in the area where Sterify Gel was administered.



Step 3: Condition after 3 months

3 months later, an examination was performed and a periodontal chart was completed. The data was compared with the periodontal chart prior to treatment. mPD prior to treatment was -3.8 mm, and after 3 months, mPD was -2 mm. BOP prior to treatment was 56%, and after 3 months, BOP was 4%. PL prior to treatment was 74%, and after 3 months, PL was 27%. The patient has no complaints, and her gums do not bleed. Her teeth have become less mobile. The X-ray shows a noticeable improvement in bone tissue between teeth 11 and 21.



Step 4: Condition after 6 months

At the 6-month checkup, we observed stable results. Despite the deterioration in home hygiene, there is no visible inflammation in the area where Sterify Gel was applied, namely in the area of the upper front teeth, no bleeding during probing, and the attachment level has been almost completely restored. The X-ray also shows stable results.

The patient has no complaints. Her teeth have become less mobile. The patient has been referred for orthodontic treatment.



Step 5: Results

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Conclusion:




1. Sterify Gel should be injected into the pocket when there is no more bleeding after SRP. The needle should be inserted at a slight angle along the root. It is necessary to reach the bottom of the periodontal pocket and inject the gel in excess.
2. If the inflammation is active and there is pus coming from the pockets, I would recommend injecting the gel after a week. Otherwise, the pus will wash out the Sterify Gel.
3. The gel we can use during SPC when there are residual pockets of 5 mm or more and patients undergo repeated SRP.
4. During the first week after applying Sterify Gel, I would not recommend using interdental brushes in this area, so as not to traumatise the soft tissues allow the gel to exert its maximum wound-healing properties.
5. One syringe is sufficient for approximately 6-7 teeth.
6. Patients no pain in the area where the Sterify Gel was administered. They clearly felt the difference compared to the area where the gel was not administered.
7. Preliminary findings suggest that the gel greatly promotes attachment restoration, has an analgesic effect, does not cause side effects, and does not leak from the pocket after application.





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