ABSTRACT

BACKGROUND: Gingival recession is the most common mucogingival deformity and are more likely to develop root sensitivity and root caries and pose esthetic problems. Laterally positioned pedicle graft is used to cover denuded roots that have adequate donor tissue laterally and adequate vestibular depth. A carefully planned surgery needs proper immobilization of grafted area and this can be achieved by proper wound closure technique with appropriate material such as sutures or tissue adhesives.

AIM: The purpose of the present study was to evaluate the clinical outcomes of lateral pedicle graft stabilized with cyanoacrylate and resorbable sutures.

MATERIALS AND METHODS: Twenty-two patients with miller’s class I and class II gingival recession were divided into two groups: Lateral pedicle graft stabilized with cyanoacrylate tissue adhesive (test) and lateral pedicle graft stabilized with resorbable sutures (control). Plaque index, gingival index, probing pocket depth, clinical attachment level, recession depth and width, and height and thickness of keratinized gingiva were evaluated at baseline, 1st month and 3rd month post-operatively. The percentage of root coverage was evaluated at the end of 3rd month post-operatively.

RESULTS: The mean plaque index and gingival index at the first month and third month were found to be statistically significant and did not present any significant influence over other clinical parameters evaluated. A partial root coverage was observed in both the groups (71.97% for test group and 61.36% for control group)

CONCLUSION: Cyanoacrylate tissue adhesive is clinically effective in stabilization of lateral pedicle flap and can be used as an excellent alternative to resorbable sutures.

KEY WORDS: Gingival recession, Lateral pedicle graft, Cyanoacrylates, Resorbable sutures