ABSTRACT

BACKGROUND: Gingival recession is treated to reduce root sensitivity and to improve esthetics. Various surgical techniques have been proposed for treating gingival recession. Coronally advanced flap is one of the most widely used surgical technique for the treatment of Miller’s class I gingival recession. Various modifications of the coronally advanced flap have been proposed for treating gingival recession.

AIM: To evaluate the effectiveness of coronally advanced flap combined with orthodontic button application for the treatment of Miller’s class I multiple adjacent gingival recession.

MATERIALS AND METHODS: The study included 10 systemically healthy subjects of age ranging from 18 to 50 years with Miller’s class I multiple adjacent gingival recession in maxillary arch. Recession defects were treated by coronally advanced flap with orthodontic button. Clinical parameters like plaque index (PII), gingival index (GI), recession depth (RD), recession width (RW), relative attachment level (RAL), gingival thickness (GT), and keratinized tissue width (KTW) were evaluated at baseline, 1 month and 3 months. Percentage of root coverage was evaluated at 1 month and 3 months. The paired ‘t’ test was used to test the significance of the change.

RESULTS: In this study, clinical parameters like RD, RAL and GT showed a statistically significant value between baseline and 1 month and between baseline and
3 months. There was no significant difference in RW, KTW at baseline and 1 month and 3 months. Mean percentage of root coverage at 1 month was 76.82% and 3 month was 75.89%.

**CONCLUSION:** In the present study, results showed that coronally advanced flap with orthodontic button is effective for the treatment of Miller’s class I multiple adjacent gingival recession.

**KEY WORDS:**
coronally advanced flap, multiple gingival recession, orthodontic button, root coverage.