

Comparación entre dos técnicas de toma de injerto conectivo en cirugía de cobertura radicular.

Comparison between two techniques of harvesting connective tissue grafts in radicular coverage surgery.

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RESUMEN

Objetivo: Comparar los resultados de la cirugía de cobertura radicular utilizando injerto de tejido conectivo subepitelial (SCGT) e injerto gingival desepitelizado (DGG) en recesiones gingivales clase I y II de Miller.

Materiales y métodos: Se realizó una revisión de la literatura de artículos publicados en los últimos 5 años en las bases de datos PubMed y Google Scholar, se utilizó la llave de búsqueda “de epithelialized gingival graft AND subepithelial connective tissue graft”.

Resultados: Se obtuvo un total de 250 artículos. De los que, mediante un filtro manual, se excluyeron 245 publicaciones por encontrarse duplicadas o no cumplir con los criterios previamente descritos, obteniéndose, finalmente, 5 artículos incluidos en esta revisión.

Conclusión: Ambos procedimientos ofrecen resultados satisfactorios frente a la cobertura de recesiones radiculares. Sin embargo, no existe suficiente evidencia para afirmar que una técnica es superior a la otra.

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PALABRAS CLAVE:

Cobertura radicular; injerto de tejido conectivo;
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KEYWORDS:

Root coverage; connective tissue graft; de-epithelialization.

ABSTRACT

Objective: To compare root coverage surgery results using subepithelial connective tissue graft (SCGT) and de-epithelialized gingival graft (DGG) in Miller Class I and II gingival recessions.

Material and Methods: A review of the literature published in the last 5 years, with articles selected from PubMed and Google Scholar databases, using the search key "de epithelialized gingival graft AND subepithelial connective tissue graft."

Results: A total of 250 articles were obtained. 245 publications were excluded through a manual filter because they were duplicated or did not meet the established criteria, obtaining 5 articles included in this review.

Conclusion: Both harvesting techniques offer satisfactory results of coverage of root recessions. However, there is not enough evidence to state that one technique is superior to the other.

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