

# Papilla Retention Surgery

31 years Follow-up Post Surgery - Yes, Periodontal Therapy Does Work!

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(A) Palatal view at initial presentation. Note heavy calculus, gingival inflammation, rolled gingival margin and palatal gingival recession. (B) The palatal view three years following surgery. Note the improved gingival health and maintenance of the interproximal papillae with apical positioning of the palatal tissues.



A

B



C

D

(C) This patient presented with generalized severe periodontitis leading to mobility, diastema formation, and buccal flaring. (D) 50% attachment loss was present interproximally.



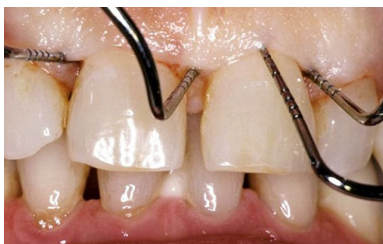
E

F

G

H

(E) Severe palatal probing (up to 7-8 mm) remained after non-surgical therapy. (F) The papillary retention procedure was performed in the maxillary anterior sextant. (G) Sling and horizontal mattress suturing methods were used. (H) Note the buccal tissue was not sutured.



**Left**

(I) Interproximal probing depths of 7-8 mm were detected after scaling and root planing (pre-surgery). (J) Thirty-one years later, periodontal stability was maintained, and the interproximal pocket depths probed 2-3 mm.



**Right**

Comparison of radiographs taken 31 years apart revealed the efficacy of periodontal therapy. Bone density and volume appeared to have improved following periodontal surgery despite no performance of guided tissue regeneration.

