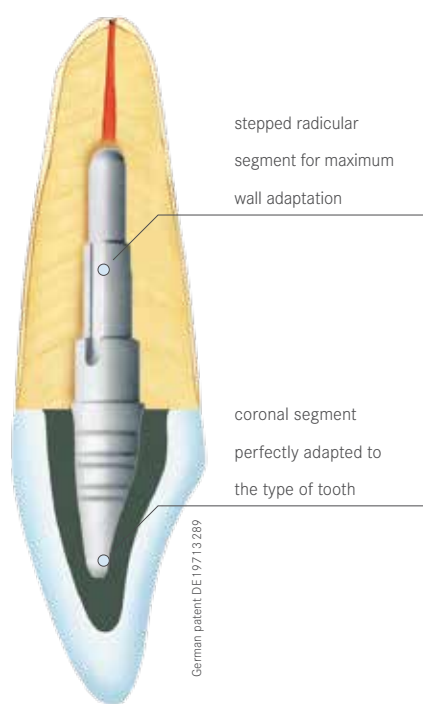




Root post system | OptiPost



OptiPost – the easy and safe root post system for the restoration of coronally destroyed anteriors, canines and premolars.

OptiPost combines the advantages of individually produced posts with the fast and easy application of prefabricated posts.

Optimal retention

Due to the pyramid design of the post shank OptiPost offers close adaptation to the wall throughout the root canal. The parallel post segments and the close wall adaptation permit good mechanical friction and thus optimal retention in the root canal.

Optimal shape

The anatomy was studied carefully and for each type of tooth a post shape was developed, which exactly corresponds to the coronal and radicular anatomy.

Optimized clinical sequence

With preparation instruments perfectly adapted to the respective post only few steps are needed to prepare the post canal in the root. The dentist saves time and money, yet providing safe treatment.

Optimal distribution of forces

With the aid of computer simulation we chose a post construction guaranteeing an optimal distribution of forces from restoration via the post to the root.



Clinical sequence of a restoration with OptiPost:

1. Preoperative radiological situation



2. Preoperative clinical situation.
Broken edge mesial, tooth 11.



3. Removal of palatal glass ionomer cement filling



4. Removal of root filling with OptiPost pilot drill 183LA.204.090

Recommended speed:

☞_{opt.} 1.000 – 5.000 rpm



5. Initial enlarging of the post canal with toothed OptiPost predrill 29A.204.1

Recommended speed:

☞_{opt.} 2.000 – 6.000 rpm



6. Definite enlargement of the post canal with diamond coated OptiPost placement drill 27D.204.1

Recommended speed:

☞_{opt.} 2.000 – 6.000 rpm



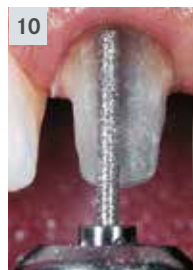
8. OptiPost 150.279.1 in situ.

9. Building up remaining tooth substance with composite material*
(*use composite with elasticity modulus of > 8,000 MPa)

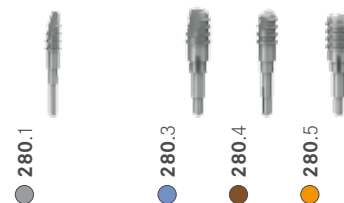
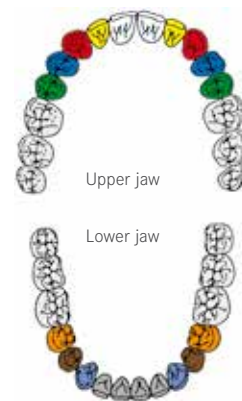
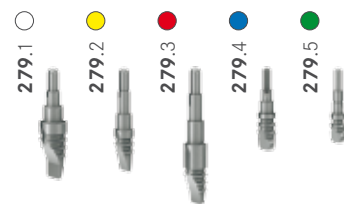


10. Preparing the crown core according to the crown to be placed.

11. Postoperative radiological situation



12. Postoperative clinical situation



Literature:

Marxkors, R., Marxkors, D.,
Neumeyer, S., Ahlers, H.;
OptiPost
Die Quintessenz, 2/97