

## Gingival biotype: Clinical signification

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## Introduction

The success of esthetic restorations depends not only on teeth arrangement but also gingival biotype. This fact makes gingival thickness a subject of considerable interest and its evaluation essential in treatment planning. Therefore, when the clinician receives a new patient with aesthetic desire, he must be aware and have knowledge not only regarding teeth but also gingiva. Identifying each gingival biotype, using reliable methods, is important because they present different healing tendencies and it has been shown that differences in gingival and osseous architecture present a significant impact on the outcome of restorative [1,2].

Clinicians face difficulty associated with the correct identification and categorizing of the patient's gingival biotype because of several classifications that have been established. These classifications are depending on numerous observations and measurements, such as the height of keratinized tissue, the bucco lingual thickness and various invasive and non invasive methods are available to measure this thickness. In the same context, placing a periodontal probe in the gingival sulcus and observing the transparency seems to be the simplest method to evaluate/determine tissue thickness [3,4].

According to Seibert and Lindhe, the gingival biotype is classified as thin or thick. The gingiva with thickness of less than 1.5 mm was classified as a thin biotype whereas the gingiva with thickness  $\geq 1.5$  mm was classified as a thick biotype. In patients with thick flat biotype, a greater regaining of soft tissue occurs after crown lengthening procedures than in patients with thin biotype that shows higher prevalence of gingival recession. This observation is in line with Olsson and Lindhe findings. Moreover, these two tissue biotypes respond differently to inflammation, trauma and surgical procedures [5].

Understanding periodontal biotype is of importance in order to achieve an esthetically pleasant restoration which associates harmonization between the teeth and the surrounding tissue. For that, the clinician has to convert the thin biotype to thick as possible. Periodontal surgical techniques can improve the quality of this and there are various soft tissues augmentation techniques [5,6].

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