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## Modified Minimally Invasive Transcrestal Sinus Augmentation (Mitsa) for Restoration of Atrophic Posterior Maxilla with Residual Bone Height Less Than 4 Mm – Case Report

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### ABSTRACT

Bone atrophy and pneumatization of the maxillary sinus associated with low bone density in the region, often provide inadequate quantity and quality for the installation of osseointegrated implants in posterior maxilla. The procedure of choice to restore this anatomic limitation is maxillary sinus floor elevation and augmentation using direct (lateral window) or indirect (transcrestal) sinus augmentation techniques.

As a consensus, it has been established that the transcrestal sinus augmentation should be reserved for patients who have a minimum of 5 mm residual alveolar bone in the posterior maxilla to achieve primary implant stability. This case report describes rehabilitation of posterior maxillary region with 1 to 3 mm of residual bone height using a novel modified minimally invasive transcrestal sinus augmentation (MITSA) approach for maxillary sinus lift, without using surgical drills for osteotomy. The sinus lift is followed by augmentation utilizing xenograft material and simultaneous implant placement.

The MITSA approach offers advantages like conservative surgery, localized sinus augmentation, low rate of postoperative morbidity, and high survival rates.

**Key-words:** atrophic posterior maxilla, maxillary sinus augmentation, decortication, osteotome, xenograft.

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