

INTISARI

Lebar gingiva cekat dapat dikoreksi dengan vestibuloplasti. Pasca *secondary epithelial vestibuloplasty*, periosteum akan terbuka sehingga diperlukan *dressings* yang mengandung faktor pertumbuhan untuk mengoptimalkan hasil perawatan. Membran amnion merupakan *dressings* yang ideal pasca vestibuloplasti namun rapuh dan tipis sehingga sulit diaplikasikan. Membran PRF memiliki dimensi yang kuat dan stabil. *Releasate* sebagai hasil samping pembuatan membran juga digunakan karena mengandung faktor pertumbuhan. Salah satu indeks yang digunakan untuk menilai hasil perawatan adalah *Healing Index* (HI) menurut Landry, Tumbull dan Howley. Penelitian ini bertujuan untuk mengetahui perbedaan hasil perawatan pasca vestibuloplasti antara *dressings* membran PRF *releasate* dan membran amnion bila dikaji dari HI dan lebar gingiva cekat.

Penelitian eksperimental semu ini menggunakan desain *split mouth*. Subjek adalah 7 orang pasien di klinik Periodonsia RSGM UGM Prof. Soedomo yang memenuhi kriteria inklusi. Pasca vestibuloplasti, membran PRF *releasate* digunakan sebagai *dressings* di sisi kanan sedangkan membran amnion di sisi kiri. Pengukuran HI dilakukan pada hari ke-7, 14 dan 30 sedangkan lebar gingiva cekat pada hari ke-0 dan 30. Data HI dianalisis dengan Uji *Mann-Whitney* sedangkan lebar gingiva cekat diuji dengan *Paired T-Test* (intragrup) dan *Independent T-Test* (antar grup).

Hasil penelitian menunjukkan bahwa HI dan lebar gingiva cekat pasca vestibuloplasti dengan *dressings* kedua membran tidak berbeda bermakna ($p > 0,05$) sehingga dapat disimpulkan bahwa tidak ada perbedaan hasil perawatan pasca vestibuloplasti antara *dressings* membran PRF *releasate* dan membran amnion.

Kata kunci: vestibuloplasti, amnion, PRF *releasate*, *Healing Index*, gingiva cekat

ABSTRACT

The width of attached gingiva can be corrected by vestibuloplasty. Post-secondary epithelial vestibuloplasty, the periosteum will be exposed so a dressing containing growth factors is needed to optimize the treatment outcome. Amniotic membrane is an ideal dressing after vestibuloplasty but is fragile, thin, and difficult to apply. PRF membranes have strong and stable dimensions. Releasate as a by-product of membrane can be used because of its growth factors. Healing Index (HI) according to Landry, Tumbull, and Howley is commonly used to asses the post-surgery healing. This study aimed to determine the differences of treatment outcome after vestibuloplasty with PRF releasate membrane and amniotic membrane.

It was a quasi-experimental study with a split-mouth design. Seven subjects were patients at the Periodontology clinic of Prof. Soedomo dental hospital who fulfilled the inclusion criteria. Post vestibuloplasty, PRF releasate membrane was used as a dressing on the right side while the amniotic membrane was on the left. HI measurements were carried out on days 7, 14 and 30 while the width of attached gingiva was measured on days 0 and 30. HI data were analyzed by Mann-Whitney test while the width of attached gingiva was tested by Paired T-Test (intragroup) and Independent T-Test (between groups).

The results showed that HI and width of attached gingiva after vestibuloplasty with both membrane were not significantly different ($p>0.05$). It can be concluded that there were no differences in post vestibuloplasty treatment outcomes between PRF releasate membrane and amniotic membrane.

Keywords: vestibuloplasty, amniotic, PRF releasate, Healing Index, attached gingiva