

It retains its own blood supply and is not dependent on the bed of recipient blood vessels

*** This is **false**; It retains none of its own blood supply and is totally dependent on the bed of recipient blood vessels.

In some instances, it can be used to cover a root surface with a narrow denudation. The procedure yields a high degree of successful results when used for increasing the width of the attached gingiva. The free gingival graft may be used **therapeutically** to widen the gingiva after recession has occurred. It may be used **prophylactically** to prevent recession where the band of gingiva is narrow and of a thin, delicate consistency.

The free gingival graft is an **autogenous graft** of gingiva that is placed on a viable connective tissue bed where initially buccal or labial mucosa was present. In most cases, the donor site from which the graft is taken is an **edentulous region** or the **palatal area**. The graft epithelium undergoes degeneration after it is placed. Then it sloughs, the epithelium is reconstructed in about a week by the adjacent epithelium and proliferation of surviving donor basal cells. In two weeks' time, the tissue appears to have reformed, but maturation is not completed until 10 to 16 weeks. The time required is proportional to the thickness of the graft. **Note:** The free gingival graft receives its nutrients from the **viable connective tissue bed**.

The procedure **may or may not yield** a successful result when used to obtain root coverage; the result is not highly predictable in such cases. The graft may be used to correct localized narrow recessions or clefts **but not deep, wide recessions**. In these instances, **the laterally repositioned flap** (*a pedicle graft*) or a **subepithelial connective tissue graft** has a greater predictability. The free gingival graft is rarely used on the facial or lingual surfaces of mandibular third molars (*especially facial*).

Miller classification system for recession:

- **Class I:** marginal tissue recession **does not** extend to the mucogingival junction. There is **no loss of bone or soft tissue** in the interdental area. It can be narrow or wide.
- **Class II:** marginal tissue recession **extends to or beyond** the mucogingival junction. There is **no loss** of bone or soft tissue in the interdental areas. It can be wide or narrow.
- **Class III:** marginal tissue recession **extends to or beyond** the mucogingival junction. There is bone and soft tissue loss interdentally **or** malpositioning of the tooth.
- **Class IV:** marginal tissue recession **extends to or beyond** the mucogingival junction. There is **severe** bone and soft tissue loss interdentally **or** severe tooth malposition.

In general, the **prognosis** for classes I and II is good to excellent; whereas class III, only partial coverage can be expected. Class IV has a very poor prognosis.