

How to optimize outcomes in implant therapy: Key treatment planning, surgical and prosthetics aspects.

Successful and predictable implant therapy starts with a systemic and local risk assessment, and continues with adequate gathering of 3D imaging, as well as intra- and extraoral surface scans. Computer aided planning software then allows the design and clinical execution of the final surgical and prosthetic results.

Implant site assessment must be part of this pre-operative assessment especially when implants are placed in fresh extraction sockets. Indeed, after tooth extraction, biological processes are initiated which lead to bone resorption, including the buccal wall and soft tissue, potentially resulting in peri-implant soft tissue recession unless the implant site is adequately preserved. This can be particularly challenging in sites with a thin tissue biotype, a lack of keratinized mucosa or soft tissue deficiencies. In these instances, additional soft tissue regeneration techniques are mandatory before implant placement or bone regeneration. While autogenous soft tissue grafts are considered the treatment of choice in such situations, they are associated with significant patient morbidity. Recent scientific research and clinical applications, aimed at developing collagenous compounds for functional and esthetic soft tissue augmentation, will be thoroughly described.

In addition to soft tissues management, the use of Guided Bone Regeneration during implant placement will be presented. Key factors governing the choice of barrier and graft materials as well as surgical techniques will be explained based on the anatomy of the recipient site and the planned augmentation

outcome. Data has indeed shown that dehiscence, fenestration and infra-bony-type defects can be successfully treated with resorbable barriers and xenograft, while a larger defect may necessitate a different approach.

Regardless of the supporting structures, complex clinical situations ultimately involve the design and fabrication of teeth- and implant-supported prostheses. In these cases, a digital workflow may replace the traditional steps necessary for the design and fabrication of the final reconstructions. While several materials and manufacturing workflows are available, the right choice is often elusive and poses a challenge to the clinician. This lecture will show how optimal results can be achieved, while explaining material, workflow and therapeutic decisions.

Education and Learning Objectives:

Following the discussion, participants will:

- A) Understand the importance of defining the treatment outcome before initiating treatment.
- B) Gain a greater insight into the productive and efficient use of digital planning procedures.
- C) Appreciate the best timing and techniques for preserving and regenerating hard and soft tissues at implant sites.
- D) Recognize advantages and disadvantages of different restorative materials and understand their indications for clinical use.

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