OUTCOME OF DENTAL IMPLANTS PLACED IN TERTIARY CARE HOSPITAL

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DENTAL IMPLANTS

 A dental implant (also known as an endosseous implant or fixture) is a surgical component that interfaces with the bone of the jaw to support a dental prosthesis.



Palmer R. Introduction to dental implants. Br Dent J. 1999 Aug 14;187(3):127-32.

SUCCESS CRITERIA FOR DENAL IMPLANT

- Immobile when tested clinically.
- Radiographically- no peri-implant radiolucency.
- After first year in function, radiographic vertical bone loss of <0.2 mm per annum.
- Absence of signs and symptoms.
- Implant fully functioning according to its intended prosthodontic purpose

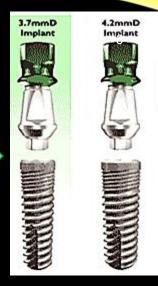
Esposito, M.; Grusovin, M. G.; Talati, M.; Coulthard, P.; Oliver, R.; Worthington, H. V. (2008). "Interventions for replacing missing teeth: antibiotics at dental implant placement to prevent complications" *Cochrane Database of Systematic Reviews*.

Javed, F.; Romanos, G. E. (2010). "The role of primary stability for successful immediate loading of dental implants. A literature review". *Journal of Dentistry* **38** (8): 612–620

CLASSIFICATION OF DENTAL IMPLANTS

IMPLANT SIZES

Mini/ Narrow Body dental implants



Standard Implant Platform





Wide Implant Platform

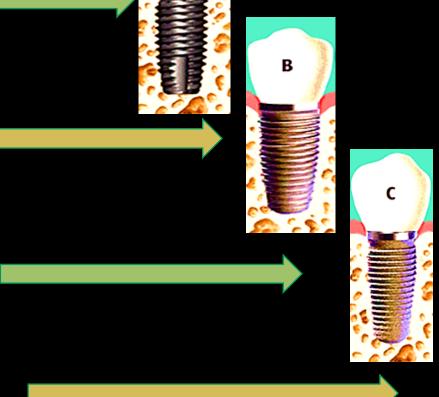
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Machined Titanium

Acid Etched
Titanium

Plasma Spray
Coated

HA Coated Titanium





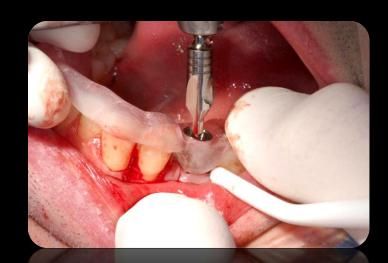
TIME OF INSTALLATION

Immediate implants

Delayed implants

TIME OF PROSTHETIC LOADING

- ➤ Immediate loading: Application of functional or nonfunctional load to an implant at the time of placement or within 48 hours
- ► Early loading: 4 8 weeks.
- ➤ Delayed loading implant: after 3-6 months.



IMPLANT PLACEMENT



3 million people in the US have implants placed. Approximately 1 million dental implants placed annually.

Crest® Oral-B® at dentalcare.com Continuing Education Course, Revised March 6, 2013. Moldovan S, Lyle DM. The Failing Implant: Reducing Risk- Addressing modifiable risk factors to help avoid complications. Inside Dentistry June 2014, Volume 10, Issue 6.

RATIONALE

 Since local data is lacking on success of this treatment modality, therefore we wanted to explore the outcome of implant service in our center.

STUDY

OBJECTIVE

To assess the outcome of dental implant placement at AKUH.



MATERIALS AND METHODS

Study design: Retrospective charts review

• Study duration : 2010-2014

Setting: AKUH dental clinics

Inclusion criteria:

- Patients receiving implants since 2010 under local anesthesia
- Patients who received dental implants with all surgical and prosthetic work done within AKUH.

• Exclusion criteria:

- Patients whose data was missing.
- Implant procedure done by other faculty.

DATA ANALYSIS

- SPSS version 19.0
- Descriptive statistics & frequency distribution were computed.
- Chi square test was applied to explore association of implant success with other factors such as jaw type, dentate status, need for grafting.
- P-value of 0.05 was taken as statistically significant.

RESULTS

Study duration: 2010-2014 Total number of implants placed at AKU n ≈ 300 Placed by other consultants 173 165 Failed to osseointegrate n=6 159 **Surgically successful but** Yet to be loaded prosthetically n=55 Successful cases Prosthetic data available n= 104

Implants placement acc to Gender

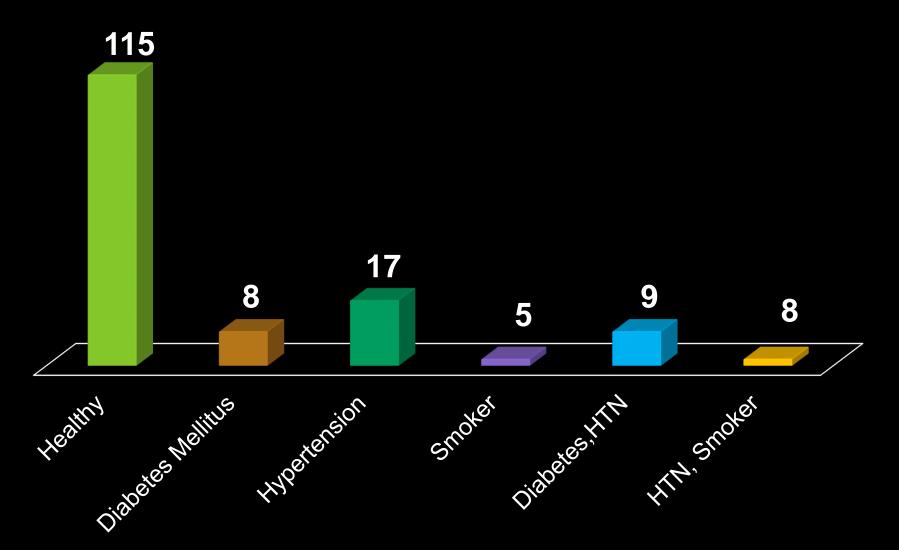
Females n=97

Males n=68

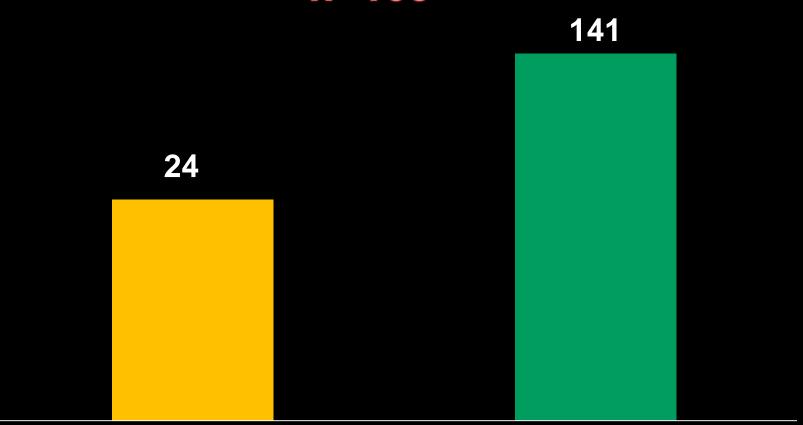
MEAN AGE OF THE PATIENTS

	n	Minimum	maximum	mean	Std. deviation
Age (years)	165	17	73		

MEDICAL STATUS n=165



PATIENT DENTAL STATUS n=165



Fully Edentulous

Partially Dentate

OSSEOINTEGRATION OUTCOME n=165



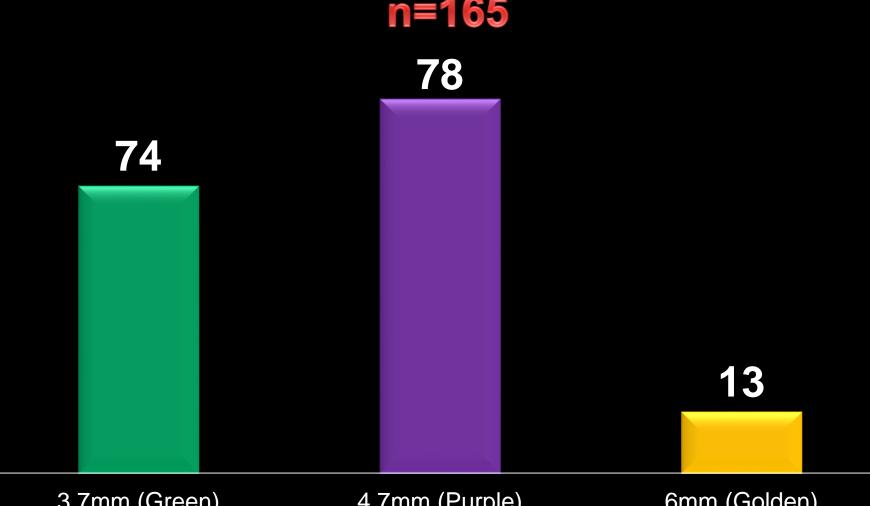
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3.6%

Failed to Osseointegrate

Osseo-integration Achieved

IMPLANT DIAMETER n=165



3.7mm (Green)

4.7mm (Purple)

6mm (Golden)

IMPLANT LENGTH n=165



TYPE OF ABUTMENT n=165

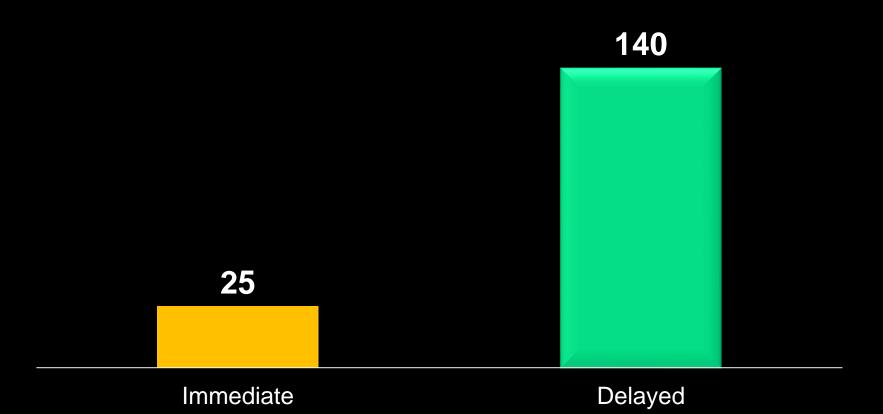
155

10

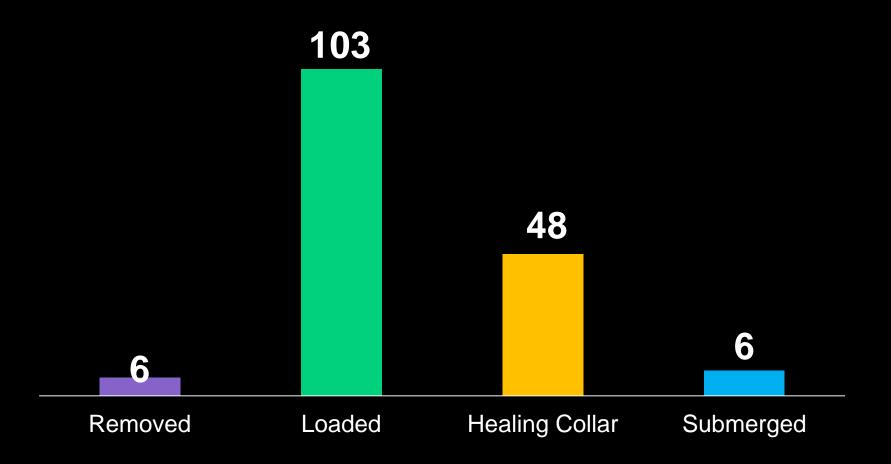
Straight Abutment

Angled Abutment

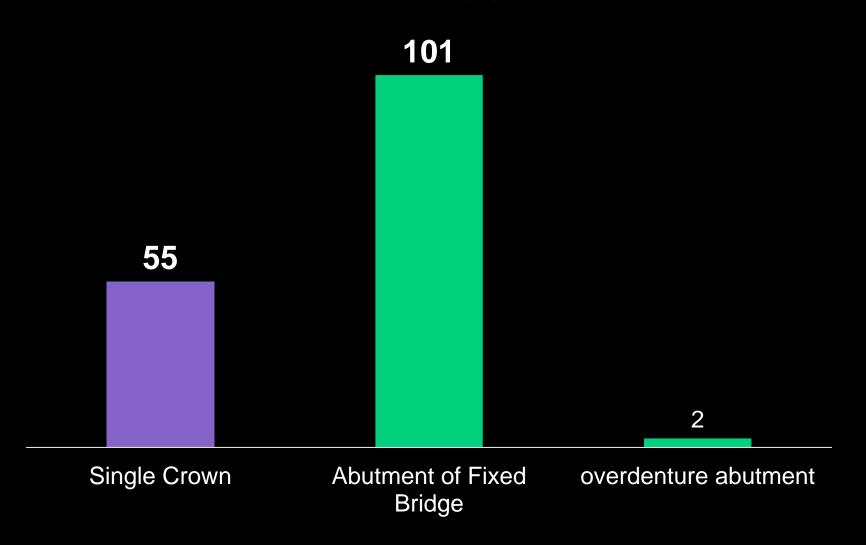
TIME OF LOADING n=165



LOADING OF IMPLANT n=127



FINAL PROSTHESIS n=159



OSSEO-INTEGRATION OUTCOME

OSSEOINTEGRATION	PATIENT'S STAT		TOTAL	P value
OUTCOME	Fully edentulous	Partially dentate		
Failed to integrate	4	2	6	
Osseo-integration achieved	61	98	159	0.364
Total	65	100	165	

Osseo-integration outcome (Grafting)		Patient's D	Total	30 p value	
		Fully edentulous	Partially dentate	n= 165	p rando
No graft	Failed to integrate	4	1	5	
	Osseo-int achieved	44	70	114	
Minimal graft	Osseo-int achieved	10	20	30	
Considerable grafting	Failed to integrate	0	1	1	0.09
	Osseo-int achieved	1	2	3	
Total	Failed to integrate	4	2	6	
	Osseo-int achieved	50	86	159	

DISCUSSION

- Dental implants are considered as a predictable treatment option for replacement of missing dentition.
- With the achievement of high success rates, frequency of dental implant placement is increasing worldwide.

COMPARISONEM HECTHER

SI	TUDIE	S	AAIILI			32
Other studies	n, Age	Study	Implant type, Placement	Width, Length, Site	Restoration, Follow up	Success of implants
Min-Su Bae (Korea) 2011	294 implants 27-71 years	2 years Retrospective	MIS Self Tapping	3.75 mm 11.5-13 mm Maxillary/ Mandibular molars	Single abutment, FPD, Over denture. 4 years	97.3%
Renzo Guanieri (Italy) 2014	46 implants 2 failed 26-60 years	2 years Retrospective, multicenter	BioHorizon Immediate	3.8-4.6 mm 9-15 mm	- 24 months	95.6%
AKUH (Pakistan) 2014	165 implants 6 failed 17-70 years	5 years Retrospective Single center	Zimmer Immediate + delayed	4.7 mm 11.5 mm All sites	Single crown, FPD Overdenture. Upto 5 years	96.3%

COMPARISON WITH OTHER STUDIES

33

Other studies	n, Age	Study	Implant type, Placement	Width, Length, Site	Restoration, Follow up	Success of implants
Alejandro Pachos (Spain) 2005	415 implants, 22 failed 21-89 years	7 years Retrospective Multicenter	Klockner. Delayed	3.2-5.5 mm 10-18 mm Posterior maxilla	Single, FPD, Over denture 5 years	95.38%
Zeev Omrainer (Israel) 2012	173 implants 1 failed 18-75 years	10 years Retrospective	Zimmer Immediate+ delayed	3.7 mm 13 mm	- 10 years	99.0%
AKUH (Pakistan) 2014	127 implants 5 failed 17-70 years	4 years Retrospective	Zimmer tapered screw vent. Immediate + delayed	4.7 mm 11.5 mm All sites	Single crown, FPD Overdenture Upto 4 years	96.1%

CONCLUSIONS

- Most common length: 11.5mm
- Most common diameter: 4.7mm (purple)
- Most common site: LR6
- Prosthesis for more than half of the implants were fixed bridges.

- Our results are comparable to other centers of the world in terms of success achieved in osseointegration of dental implants i.e. 96%
- Previous studies have demonstrated a decrease in the success rate of implants in patients with medical co-morbids.

FAILURES OF IMPLANTS

- The most probable cause for the failure of 5 implants in our study group:
- <u>Case 1:</u> 46 Male, maxillary premolar. Atrophic maxilla, Significant deficiency in bone+ bone grafting
- <u>Case2</u>: Edentulous atrophic maxilla: 80 years female, diabetic, hypertensive, early loading with interim prosthesis.

FAILURES OF IMPLANTS

- <u>Case 3, 4</u>: 55 years male. Diabetic, atrophic edentulous maxilla, early loading with interim prosthesis. Failure on left and right maxilla.
- <u>Case 5</u>: 22 years male, significant bone loss in anterior maxilla, premature loading.
- Case 6: 55 female, implant failure during removal of prosthesis.

STRENGTHS

- Baseline statistics on current outcome of implant placement in our center.
- Complete data available on both clinical and radiographic aspects.
- Surgical and prosthetic aspects were covered.
- Rigid criteria of implant success was used.

LIMITATIONS

- No comparison group
- Single clinician
- Single center study
- Single arm study
- No data on patient satisfaction/ esthetic aspects

RECOMMENDATIONS

- Cases with atrophic maxilla, significant bone loss and those subjected to interim prosthesis loading should be dealt with caution.
- Multicentre studies on implants with a larger sample size should be commenced.
- For the clinicians; is to form an archive to store data for research and study purposes.

