

## Critically Appraised Topic (CAT)

<b>Project Team:</b>
3A-5
<b>Project Team Participants:</b>
Nolan Frisch, Jiovannah Campbell, Tyler Grisar, and Ine Suh
<b>Clinical Question:</b>
In patients who require maxillary sinus augmentation, how does the long term prognosis of an endosseous implant placement differ when comparing 1-stage vs. 2-stage procedures?
<b>PICO Format:</b>
<b>P:</b>
Patients who require maxillary sinus augmentation before placement of endosseous implant
<b>I:</b>
1-stage sinus augmentation
<b>C:</b>
2-stage sinus augmentation
<b>O:</b>
Long-term prognosis
<b>PICO Formatted Question:</b>
In patients who require maxillary sinus augmentation before placement of an endosseous implant, how does the long term prognosis of the implant placement differ when comparing 1-stage vs. 2-stage procedures?
<b>Clinical Bottom Line:</b>
<i>Study conclusion:</i> No statistically significant differences were observed between implants placed according to 1- or 2-stage sinus lift procedures. However this study may suggest that in patients having residual bone height between 1 to 3 mm below the maxillary sinus, there might be a slightly higher risk for implant failures when performing a 1-stage lateral sinus lift procedure.
<b>Date(s) of Search:</b>
9/27/2020
<b>Database(s) Used:</b>
PubMed
<b>Search Strategy/Keywords:</b>
Dental implants, dental implantation, endosseous implant, maxilla/surgery, osseointegration, sinus floor augmentation
<b>MESH terms used:</b>
Sinus augmentation, 1 stage, 2 stage
<b>Article(s) Cited:</b>
Felice P, Pistilli R, Piattelli M, Soardi E, Barausse C, Esposito M. 1-stage versus 2-stage lateral sinus lift procedures: <b>1-year post-loading</b> results of a multicentre randomised controlled trial. Eur J Oral Implantol. 2014 Spring;7(1):65-75. PMID: 24892114.
<b>Study Design(s):</b>
Multicenter, comparative randomized controlled trial
<b>Reason for Article Selection:</b>
<b>Article(s) Synopsis:</b>

<b>Level of Evidence:</b> (For Therapy/Prevention, Etiology/Harm)
<b>Levels of Evidence:</b> (For Therapy/Prevention, Etiology/Harm) See <a href="http://www.cebm.net/index.aspx?o=1025">http://www.cebm.net/index.aspx?o=1025</a> <input type="checkbox"/> <b>1a</b> – Clinical Practice Guideline, Meta-Analysis, Systematic Review of Randomized Control Trials (RCTs) <input type="checkbox"/> <b>1b</b> – Individual RCT <input type="checkbox"/> <b>2a</b> – Systematic Review of Cohort Studies <input type="checkbox"/> <b>2b</b> – Individual Cohort Study <input type="checkbox"/> <b>3</b> – Cross-sectional Studies, Ecologic Studies, “Outcomes” Research <input type="checkbox"/> <b>4a</b> – Systematic Review of Case Control Studies <input type="checkbox"/> <b>4b</b> – Individual Case Control Study <input type="checkbox"/> <b>5</b> – Case Series, Case Reports <input type="checkbox"/> <b>6</b> – Expert Opinion without explicit critical appraisal, Narrative Review <input type="checkbox"/> <b>7</b> – Animal Research <input type="checkbox"/> <b>8</b> – In Vitro Research
<b>Strength of Recommendation Taxonomy (SORT) For Guidelines and Systematic Reviews</b> See article <b>J Evid Base Dent Pract 2007;147-150</b> <input type="checkbox"/> <b>A</b> – Consistent, good quality patient oriented evidence <input type="checkbox"/> <b>B</b> – Inconsistent or limited quality patient oriented evidence <input type="checkbox"/> <b>C</b> – Consensus, disease oriented evidence, usual practice, expert opinion, or case series for studies of diagnosis, treatment, prevention, or screening
<b>Conclusion(s):</b>
<b>Article Cited:</b>
Kim HJ, Yea S, Kim KH, Lee YM, Ku Y, Rhyu IC, Seol YJ. <b>A retrospective study of implants placed following 1-stage or 2-stage maxillary sinus floor augmentation by the lateral window technique performed on residual bone of &lt;4 mm: Results up to 10 years of follow-up.</b> J Periodontol. 2020 Feb;91(2):183-193. doi: 10.1002/JPER.19-0066. Epub 2019 Aug 2. PMID: 31372997.
<b>Study Design(s):</b>
<b>Reason for Article Selection:</b>
<b>Article(s) Synopsis:</b>
<b>Level of Evidence:</b> (For Therapy/Prevention, Etiology/Harm)

**Levels of Evidence:** (For Therapy/Prevention, Etiology/Harm)

See <http://www.cebm.net/index.aspx?o=1025>

☐ **1a** – Clinical Practice Guideline, Meta-Analysis, Systematic Review of Randomized Control Trials (RCTs)

☐ **1b** – Individual RCT

☐ **2a** – Systematic Review of Cohort Studies

☐ **2b** – Individual Cohort Study

☐ **3** – Cross-sectional Studies, Ecologic Studies, “Outcomes” Research

☐ **4a** – Systematic Review of Case Control Studies

☐ **4b** – Individual Case Control Study

☐ **5** – Case Series, Case Reports

☐ **6** – Expert Opinion without explicit critical appraisal, Narrative Review

☐ **7** – Animal Research

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**Strength of Recommendation Taxonomy (SORT) For Guidelines and Systematic Reviews**

See article *J Evid Base Dent Pract* 2007;147-150

☐ **A** – Consistent, good quality patient oriented evidence

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**Conclusion(s):**

**Article(s) Cited:**

Raghoobar, GM, Onclin, P, Boven, GC, et al. Long-term effectiveness of maxillary [sinus](#) floor augmentation: A systematic review and meta-analysis. *J Clin Periodontol*. 2019; 46(Suppl. 21): 307– 318. <https://doi.org/10.1111/jcpe.13055>

**Study Design(s):**

**Reason for Article Selection:**

**Article(s) Synopsis:**

**Level of Evidence:** (For Therapy/Prevention, Etiology/Harm)

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