|  |
| --- |
| **Name:** |
| Shuchi Patel |
| **Group:** |
| 10B-2 |
| **Pathology Question:** |
| What is periimplantitis and what leads to its onset?  |
| **Report:** |
| When implants are placed, there may be inflammation in the area which clinicians have categorized as either periimplant mucositis or periimplantitis. Periimplantitis is the inflammatory reaction that results from the “loss of supporting bone around a functioning implant” (Lee). It can lead to progressive bone loss and result in the failure of the implant. Periimplantitis has a lower occurrence rate than periimplant mucositis (Lee). Periimplantitis “can be diagnosed by radiographic alveolar bone level combined with or without clinical inflammation symptoms and/or probing depth of at least >4mm” (Lee). Alveolar bone loss is what determines the severity of periimplantitis; recently, 2mm of vertical bone loss has been the threshold for diagnosing periimplantitis if radiographic images are not available (Lee). Clinically, periimplantitis presents with inflammatory changes in the soft tissue with associated bleeding on probing, increasing pocket depths, progressive bone loss, and 3 mm of bone loss radiographically or a probing depth of 6 mm or more with profuse bleeding (Guentsch). Many studies have been conducted to determine if there are predisposed individuals who would more likely be diagnosed with periimplantitis. Though evidence found does not definitively suggest a certain condition to lead towards periimplantitis, there is correlation with certain health factors that clinicans and dentists should be aware of. “On a medium and medium high level of evidence, smoking, diabetes mellitus, lack of prophylaxis and history or presence of periodontitis were identified as risk factors for periimplantitis” (Dreyer). Studies also found that there is not enough evidence to correlate age, sex, and maxillary implants with periimplantitis (Dreyer).  |
| **References:** |
| Dreyer, H, Grischke, J, Tiede, C, et al. **Epidemiology and risk factors of peri‐implantitis: A systematic review**. *J Periodont Res*. 2018; 53: 657‐ 681. <https://0-doi-org.libus.csd.mu.edu/10.1111/jre.12562>Lee, C., Huang, Y., Zhu, L., & Weltman, R. (2017). *Journal of Dentistry,* *62*, 1-12. doi:https://0-doi-org.libus.csd.mu.edu/10.1016/j.jdent.2017.04.011 Guentsch, A. **Peri-Implant Diseases and Conditions.** *Marquette University School of Dentistry.* Class Presentation.  |