IMPLANTES ENTIALS IN THE BIG QUESTION?

## The Big **Question?**

with

**Emil Svoboda** 

PhD, DDS



In this issue of Spectrum Implants, we would like to welcome Dr. Emil Svoboda, PhD, DDS, a highly respected member of the global dental community as the new editor/moderator of the Implant Essentials – The Big Question feature. At the same time we would like to thank Dr. Murray Arlin for his work in starting and managing the Implant Essentials feature for the past year.

The goal of the Implant Essentials - The Big Question feature is to tap into our Advisory Board expertise to answer questions that arise from the articles that appear in Spectrum Implants to create a communication forum.

Readers can also make comments and send additional implant queries they would like to address. As this feature continues to develop, it will be expanded and delivered via additional social media channels to establish an integrated approach for our community to share concepts, ideas, and concerns.

entists appear to have different answers to their BIG Questions. What is the reason for that? Are their patients or the oral conditions so different? Are their experiences so different? Are they reading different research material with different conclusions? Are these conclusions based on the merits of the research presented, or is the reader being misled by the author(s) bias? Are the authors biased in favour of the implant industry that supports them? Do we understand the root causes of the risk factors of treatment complications? Do we even have the language necessary to discuss those root causes? Do you have some effective means of mitigating them?

In this column, I would like to address the questions that interest you. Perhaps, we can talk about whether you think misfit implant parts and subgingival cement should continue to be the standard of care? If you are using the screw-in technique perhaps you can tell us how you are optimizing the fit of parts? Do you think optimizing the fit of parts is important? Do you think it can be done?

If you are treating your patients with All-on-X type prosthetics, perhaps you can tell us how you are providing access to care, or why you do not segment the final prosthesis to reduce the consequences of implant failure?

If you are cementing your prostheses, tell us how you are preventing subgingival cement and open, overhanging, and overextended

margins. Tell us how accurately you can control the position of your margins relative to the adjacent gingiva.

You may feel that the screw-in technique is superior to the cementin technique for the installation of implant-retained prosthetics, because of all the problems related to intra-oral cementation. How are you managing intra-oral cementation of prosthetics onto natural teeth? How are you managing those margins that follow caries below the gingiva?

Do you know what the root causes of misfit parts, poor margins, and residual subgingival cement are? How do you manage those problems? Please share your expertise with our readers.

I encourage you to visit www.ReverseMargin.com and challenge my thoughts about these important issues. My articles are presented for free download and open for your perusal and questions. Perhaps I can suggest an overview of my thoughts in a Toronto Implant Academy (TIA) video "The Chamfer Margin Showdown; Bringing a New Standard of Care to Town". (1 our 30 minutes) It is also available for viewing on my website.

I look forward to our many great collegial discussions about making dental treatment better for dentists and their patients.

Yours truly, Emil