

From the Editor's Desk

When you open this issue of Forum Implantologicum, you will immediately notice that something is different. The first issue of Forum Implantologicum came out in 2005 and since then only small adaptations have been made to its design. When the decision was taken to combine the ITI website, the ITInet and the ITI Online Academy in a single platform along with a full redesign, it was also decided to give the Forum Implantologicum a matching new look.

This is the result, a fresh and contemporary design to make reading each issue a real pleasure – we hope you like it!

In the present issue, the topic of implant placement post single tooth extraction in the esthetic zone is discussed with 4 papers. This is a very frequent clinical situation, and an important indication of implant therapy in daily practice. As clinical experience and studies have shown, the timing of implant placement post extraction is important for the predictability of successful outcomes in daily practice. This has been the most frequently discussed topic at ITI Consensus Conferences in the past 16 years. It was first discussed in 2003 in Gstaad/Switzerland with the definition of various treatment protocols providing a type I–IV classification, and the corresponding descriptive clinical terms with immediate, early, and

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late implant placement. The group of experts also agreed, after heated debates among participants, that the concept of immediate implant placement in regard to esthetic outcomes was not documented at all at that time. The corresponding proceedings triggered several clinical studies in the following years, which were included in a systematic review examining esthetic outcomes of immediate implant placement for the first time. This review paper was discussed at the ITI Consensus Conference 2008 in Stuttgart/Germany, and identified the most significant risk factors for the development of mucosal recessions, which is the most frequent complication.

In addition, the experts agreed that proper case selection is imperative to achieve successful outcomes, and that selection criteria need to be established. These selection criteria were then defined 5 years later at the ITI Consensus Conference 2013 in Bern/Switzerland. These selection criteria are still used in daily practice by the majority of leading ITI Speakers and build the basis for recommendations provided in corresponding learning modules in the ITI Online Academy. In the most recent ITI Consensus Conference 2018 in Amsterdam/The Netherlands, the series of review papers was completed by an additional review analyzing the scientific documentation of various placement and loading protocols.

The first 3 papers present the clinical aspects of immediate, early and late implant placement, the selection criteria used by the authors, and how the surgical and prosthetic treatment is done step by step. The various treatment options are documented

with case reports and the clinical data available at the current time.

The 4th paper presents an update of the “socket shield technique” (SST), which was first presented in 2010 with a proof-of-principle report. The present paper is written by the group who not only provided this first clinical paper, but recently also the first clinical study with true 5-year data. This technique is most interesting from a biologic point of view, since the surgeon leaves inside the socket a small and thin fragment of the root on the facial aspect to avoid the post extraction bone resorption on the facial aspect. Recently, this technique has been pushed by various groups under the term “partial extraction technique” (PET). In the mid- to long-term, the scientific community should define the selection criteria for this technique, the best surgical step-by-step technique (grafting vs. no-grafting of the gap, what bone filler, immediate loading yes/no etc.). In addition, the technique must be documented in prospective case series studies over at least 5 years, if not 10 years, to examine the risk for complications and failures. Today, SST cannot be considered well documented for broad application in daily practice. It should remain in the hands of master clinicians to establish the required evidence.

The same topic is also addressed in the ask-the-experts section, in which 4 prominent and experienced master clinicians were asked the question “Do you use the Socket Shield Technique and what is your opinion?” The answers are very interesting and reflect the current situation in the field!

We also have two articles in our long-running series on dental photography that will help you come to grips with video and portrait photography as well as reports from Scholars around the world.

Happy reading!

A handwritten signature in black ink, appearing to read 'D. Buser'.

Daniel Buser
Editor-in-Chief