

# 42<sup>nd</sup> international annual congress: DGZI stays on target

Author: Dr Georg Bach, Germany  
Translated by: Gladia Jahn, Germany



Not only was “quality-oriented implantology” the topic of this year’s annual congress of Europe’s oldest implantological society in Hamburg, Germany, but it is also a concept to which DGZI is committed.

This commitment showed especially during the press conference on Friday afternoon and continued to be the recurrent theme of the two congress days, starting 5 October 2012.



Prof Dr Frank Palm

By the end of the congress, the DGZI organisers were pleased to conclude that the dental society is well-positioned and ready for the future. “DGZI does differ!”, therefore was the appropriate welcome of DGZI president Prof Dr Dr Frank Palm for more than 500 participants from 18 countries, among them also visitors from partner societies from Japan and Arabia. DGZI vice president Dr Roland Hille proudly reported that more than forty expert speakers had agreed to participate in the congress and that each lecture was written exclusively for the DGZI congress.

## \_ Implantology called into question

With Prof Dr Jörg R. Straub, Freiburg, Germany, Prof Dr Thomas Weischer, Essen, Germany, and basic research Prof Dr Werner Götz, Bonn, Germany, with his co-speaker Dr Rolf Vollmer, three internationally renowned lecturers entered the podium. Dr Daniel Ferrari, Düsseldorf, Germany, complemented the sometimes critical tone of the previous speakers in an ideal fashion when he talked about minimising patient discomfort by effective surgical management. Dr Albert Mehl from the Federal Institute of Technology in Zurich inspired the audience with his speech on the opportunities CAD/CAM applications provide for implant restorations.

Dr H. P. Weber, Boston, USA, added to the speech by Dr Mehl with his talk on the digital process chain in implant prosthetics. Dr Kai-Olaf Henkel ("Complications and Failures in Implantology") and Prof Dr Herbert Deppe dealt with the less pleasant aspects of implantology. Prof Dr Deppe, associate professor for dental implantology and oral surgery from Munich, questioned the plausibility of implants in organ transplant patients. Prof Dr Deppe was followed by Prof Dr Anton Sculean, Bern, Switzerland, who took his audience to the world of innovative techniques and materials used in covering multiple recessions. Prof Dr Peter Rammelsberg from Heidelberg, Germany, gave his speech on the "Effects of simultaneous augmentation procedures on the implant prognosis", whereas PD Dr Torsten Mundt presented a multi-centre research on mini implants by 3M-Espe. Finally, Prof Dr Dr George Khoury, Hamburg, Germany, addressed the regenerative effects of hyaluronic acid.

### International Podium

Like in previous years, well-known speakers of fellow dental societies filled the large international audience of the DGZI annual congress. The speakers came mainly from Arabic and Asian areas and discussed current but also highly charged problems in implantology. The international podium therefore assembled a cornucopia of valuable speech items and insights from laser applications, over 3-D diagnosis and planning to immediate loading and risk patients. Mohamed Moataz Khamis, Egypt, reported on the advantages of uncovering the implant via Er:CR:YSGG laser by which the contouring of soft tissues can be achieved almost free of pain and without bleeding or scar formation.

Prof Suheil Boutros, USA, gave an account on how the new MTX trabecular implant by Zimmer dental helps to reduce treatment times, which is a real benefit for the patients. Dr Sami Sade from Lebanon spoke about life-threatening bleeding after implantation in the supposedly "safe" frontal areas of the mandible. His message: Never implant in the anterior mandible without lingual flap formation. Prof Shoji Jyaschi, Japan, proved that



countersinks need not be used in the maxilla on the basis of more than 1,000 follow-ups of implant patients (Periost values were identical in groups with and without countersink).

Dr Osamu Yamashita, Japan, reported on a significant decline in the oral germination rate by 40 per cent resulting from HOCl-solution. Finally, Dr Ramy Rezkallah, Egypt, stated that CBCT diagnosis had some advantages over conventional two-dimensional imaging techniques with regard to implantology, resulting from the higher dose of radiation. However, he also highlighted that a patient-specific estimate of costs and benefits is always necessary.

### Prosthetics Podium

Master dental technician Christian Müller is the first "non-dentist" to be a member of the executive board of Europe's oldest dental society, following the explicit request of both members of the executive board and last year's DGZI general meeting, which assigned the highest priority to the "intersection between dentistry and dental technology".

Another success of this pleasant development is the curriculum implant prosthetics, which is offered by DGZI in collaboration with the company Fundamental from Essen, Germany. More than 250 dental technicians



Prof Dr Dr Jörg R. Strub



Prof Dr Hans-Peter Weber



Prof Dr Herbert Deppe



Prof Dr Anton Sculean



have passed this curriculum last year and gained further qualification. Christian Müller's first task as a member of the executive board was therefore to organise the special podium "implant prosthetics". As chairman of this podium, he maintained a leading function together with Prof Dr Rammelsberg, Heidelberg, Germany.

Prof Dr Rammelsberg also contributed a speech to the prosthetics podium and discussed the controversial question, "Is the inclusion of the natural dentition in implant-supported bridges or prostheses a risk or a gain with regard to the preservation of tooth structures"? His almost Solomon-like résumé with regard to the areas around bridges: "Both of the two alternatives work, in detachable and fixed prostheses". Rammelsberg first compared solely implant-supported dentures to composite bridges. The two kinds of bridges show high survival rates with regard to fixed prostheses. However, ceramic-only restorations displayed more complications than restorations made of metal and ceramics. Prof Dr Rammelsberg encounters frequently occurring chipping with non-ceramicly veneered ceramic-only restorations. Implant-supported detachable prostheses showed a slightly but significantly increased success rate than those of combined anchorage. All in all, detachable prostheses showed only little failure rates with regard to both types of restoration. Failures were mostly technical, for example wear of the plastic. Prior to this, PD Dr Andreas Bindl, Switzerland, gave an overview on the high number of varieties in implant planning via 3-D technology and digital impression taking. The

"mount Olympe" of his elaborations was the virtual planning of prosthetics, "digital backward planning" at its best. The auditorium was highly interested in the possibility to produce drill templates in the dental practice via 3-D planning.

Master dental technician Tom Lassen, Germany, contributed his speech on passive fit as a fundamental requirement for the long-term success in prosthetics. He said that the ideal of the almost passive fit has to be pursued at any rate. However, mistakes in impression taking techniques and the production of the model can inhibit an ideal passive fit. Nevertheless, many dental technological processes have been clarified, fixation in the mouth, for example, has been a great relief. As Lassen stated, "Producing the model accurately is the crux of the matter". New member of the DGZI executive board Christian Müller of course also took the opportunity to pick up the microphone and discuss casting vs. milling as future techniques for implant-based restorations. Master dental technician Andreas Kunz, Berlin, Germany, raised the question of design and materials most suitable for implant abutments. Master dental technician Christian Müller and the author put forward their troubleshooting update, taking up their presentation from the previous annual congress and adding new troubleshooting cases in implantology.

### Special podium "Periimplantitis: Explanation or Therapy?"

Ever since the first annual congresses, the DGZI special podiums have been an inherent part of their scientific programme and are turning more and more to be among the highlights of these educational events. Hosted by DGZI president Prof Dr Dr Frank Palm, Prof Dr Herbert Deppe, Prof Dr Andrea Mombelli and Prof Dr Anton Sculean, the participants discussed the highly unpleasant topic periimplantitis. As a quasi-introduction, federal periodontologist Prof Dr Mombelli held his speech on the epidemiology of periimplantitis. Mombelli realised that "exactly 25 years ago, periimplantitis was born" when he spoke about the phenomenon periimplantitis for the first time in a publication in



Dr Tomohiro Ezak



Prof Dr Amr Abdel Azim



Dr Mazen Tamimi



Mohamed Moataz M. Khamis



Prof Dr Suheil Boutros

1987. An extensive literary research showed that ten per cent of the implants are affected by periimplantitis in 20 per cent of the patients after five or up to ten years. Mombelli also relativized the study by Zitzmann, which is often quoted by the layman press, since the patients examined were preselected and criteria such as BOP were evaluated. Mombelli highlighted that "Bleeding does not necessarily mean periimplantitis" and pointed out that nicotine abuse and the patient's "perio history" are factors which have to be taken into account.

Already in the beginning of the discussion, the dogma of "no probing in implants" was replaced by the overall opinion that probing in implants is an important diagnostic tool. Another view on which the members agreed was that it is important to diagnose periimplantitis as early as possible and then to immediately induce the respective therapeutic measures. The "tests" which are offered to evaluate the increased risk of periimplantitis were seen negatively by the participants. They agreed that a correct anamnesis and estimation of individual risk factors were more important. In order to avoid cementitis, which can be the starting point of periimplantitis, supraconstructions can be screwed on. The podium voiced a critical opinion on implant plastics as presented by Frank Schwarz and colleagues. In severe cases such as these, explantation was seen as the preferable choice. All agreed that an implant-specialised evaluation will become more important in the future.

**\_Corporate podium**

Another highly estimated tradition is the corporate podium, which gives DGZI members and registered doctors the opportunity to report on their practical experience and findings. Contributions from the realm of university research complement the podium, among them Prof Rother, Germany, who spoke about "CBCT today and in the future". All of the eight speakers dedicated their talks to the motto of the 42<sup>nd</sup> DGZI international annual congress "Sustainability and long-term success in quality-oriented implantology", among them topics such as augmentation procedures, aesthetics and sedation.



Concluding, the DGZI annual congress has successfully communicated the concern of Europe's oldest dental society regarding sustainability in implantology. Therefore, the overall tone during the congress can also be taken as its summary: DGZI is well positioned to face current and future challenges in implantology and takes responsibility with regard to both the education of members and colleagues ("Focus: Registered Practice") and patients ("Focus: Information").

**\_contact**

**implants**

**Dr Georg Bach**

Rathausgasse 36  
79098 Freiburg im Breisgau, Germany

doc.bach@t-online.de

**DGZI**

Zentrale Geschäftsstelle  
Paulusstraße 1  
40237 Düsseldorf, Germany

sekretariat@dgzi-info.de  
www.DGZI.de

