

Dr Rolf Vollmer

First Vice President and Treasurer of DGZI



We are ready for the future

Dear colleagues,

Our last Annual Congress, which took place under the motto "Visions in Implantology", has shown that there is an ongoing development and significant progress in the field of dental implantology, in particular when it comes to digitalisation. For instance, the accuracy of bone-supported drill templates is constantly improving, whereas the amount of planning deviations is decreasing. Yet, we would be well advised to maintain a critical stance towards our own ambitions. In addition, we should always reassess the large amount of available information, obtained through modern radiology for example, in a critical and realistic fashion. The number of medical mistreatment cases does not decrease as a mere consequence of having a large amount of information and scientific data at our disposal and it would be unwise to believe that. Specialists working in the field of dental implantology, as well as courts are currently dealing with an increasing number of malpractice cases and bad treatment results, which is obviously a global issue. A couple of years ago, Dr Dennis Tarnow complained about the fact that sixty per cent of his new patients, already having implants, were attending his clinic to receive follow-up treatments. It is not without reason that we are facing an increasing number of patients suffering from peri-implantitis today.

So-called peri-implantitis classifications are being introduced at the moment and respective new treatment methods are being proposed by the various scientific associations. Our colleagues who are working in this field deserve the highest praise and our utmost respect. Let's have a closer look at various cases that are being published.

I personally believe that many cases of peri-implantitis are home-grown or lie within the responsibility of the implantologists. To show all of these different cases in their

entirety would go far beyond the scope of this editorial, so let's just name some of the main causes of peri-implantitis: risky implantations in regions with low bone volume, disregard of both the periodontal conditions and underlying general illnesses, disregard of the therapeutic indication or inaccurate positioning, disregard of already established principles and guidelines, inadequate prosthetic care, remaining excess cement, and insufficient education of the implantologist, only to name a few. With regard to aetiology, there are no statistically significant studies yet, and thus further research is urgently needed.

Please consider that there is no technology capable of replacing the human brain and of considering all the vital factors that are necessary to achieve the best possible treatment results for our patients. The fact remains that medical mistreatment has to be avoided by all possible means. In addition, I would argue that a good medical education is the key to preventing mistakes and thus the key to success.

There is a new DGZI educational programme for the entire practice team, which is about to be launched. It features a modern training for dental technicians and can be requested at our office in Düsseldorf, Germany. We will be happy to provide you with personal advice and to forward special requests to the respective heads of department.

With this in mind, I remain with best regards and wish you a Merry Christmas and a peaceful new year.

Yours,

Dr Rolf Vollmer