

SHORT DENTAL IMPLANTS

The use of short dental implants has proven achievable in patients which are apprehensive in undergoing augmentation procedures of sorts. Several studies have shown that the use of short implants is easier to insert into the patient's posterior (back) regions and simpler placement method.

The evidence indicates that given the complicated nature of grafting and bone augmentation and success rates seem to be similar as with simpler procedures.

Therefore, according to Chiapasco et al 2009 systemic review "the priority should be given to simpler procedures"

Implant Length

In general, today less than 10mm is regarded as short implant. However, we feel it is more appropriate to say with 8.5mm or less is a short implant according to recent published literature

Short implants are preferable choice to bone augmentation (assessment case by case only), since the treatment is faster, and associated with less morbidity and decreased surgical complications and postoperative patient discomfort. We do have more than 5yr data but 10-year data is scarce.

Situations that limit placement of longer implants

1. Maxillary sinus
2. Mandibular canal
3. History of maxillary chronic sinusitis, allergic rhinitis or any pathology (ENT referral will be indicated an overall management)
4. Patients in many ways prefer not to have adjunct surgical procedures for maxillary sinus lift

Advantages of short implants where indicated in reducing additional procedure for grafting

1. Less surgical procedures
2. Lower costs
3. Fewer complications
4. Quicker rehabilitation time

Implant width

Wider implants are defined as diameter with 4.5mm or more

Narrow implant is defined with 3.5mm or less

What contributes to the success of short implants?

1. New modified surface texture (increased surface area) to provide faster, predictable osseointegration
2. surface geometry for better initial -bone stability: primary stability
3. Improved surgical techniques maintaining bone vitality such as piezosurgery
4. Smokers always will have problems irrespective of type of implants
5. Dr Nalbandian looks at the occlusion (bite) load distribution to reduce heavy forces as although research shows that crown/root ratio is not significant, nevertheless by designing correct bite platform to redistribute load helps to have stable bone levels, combined with good oral hygiene and maintenance program.