

## Looking for Mini Implants Training

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### Editorial

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## INTRODUCTION

Implant dentistry has drastically changes the concept of edentulism treatment. However, many techniques have been used these past decades to adapt the bone crest to the implant size. Bone grafts, split techniques, bovine bone, hydroxyl apatite... have demonstrated the possibilities and the limits as well of these treatments.

Instead of applying standard procedures to the patient, the most important thing is to understand the bone physiology. In fact, nowadays all the researchers agree to state that cortical and cancellous bone are critical in terms of implant survival.

Cortical bone is the first bulwark in bone preservation, and thus avoids the path of peri-implantitis. Cancellous bone allows the bone to adapt to occlusal forces.

Therefore, new techniques appear to protect these two elements. Flapless surgery is performed to diminish the cortical bone trauma, avoiding the periosteum reflection and the alteration of blood supply. The preservation of cancellous bone is also performed to maintain the potential of adaptation to occlusal forces.

The implant design has been reinvented to protect this cancellous bone during the implant placement, thanks to the shape of the implant body and the threads <sup>[1]</sup>.

But most of the elderly patients have lost a certain quantity of bone. The key issue is: do we have to adapt the patient to the implant system we have, or do we have to change the implant system in accordance with the patient situation?

Mini implants are designed to answer to this controversy. These are one piece implants, with self-tapping threads, placed with flapless surgery, and the diameter range from 2 to 3 mm are mainly suitable for thin ridges.

Thus, by using mini implant we are in accordance with all the requirements exposed above.

Mini implants were indicated at the beginning for denture stabilization, but now are also indicated for single unit prostheses or fixed partial restorations <sup>[2-4]</sup>.

Mini implants seem to be very easy to place, but we have to understand the bone physiology, the indications and the way to place them. It is a different procedure as we do with conventional implants.

A success factor in achieving high performance registered by evidences and the experience of the community of mini implants users, point out the role of the learning curve<sup>[5]</sup>.

Thousands of mini implants are placed each year with a similar success rate as reached with conventional implants [6,7].

In Europe the AEMID (European Academy of Mini Dental Implant) is the scientific referral center for clinicians, users or those who want to approach the mini implants philosophy. AEMID, through specific courses, trains dentists to this technique with an academic teaching (bone physiology, biomechanics, clinical cases and hands-on).

Effective training is important to ensure that the patients are treated efficiently.

A certification (Expert in Mini Dental Implant Dentistry), issued in collaboration with EIMS H.E.I., Graduate School Malta, is delivered after these courses and an examination.

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