



Lecture Abstract

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Oral Surgeon

Main implantological topics:

- Ridge augmentation & soft tissue management
- Linking implants, periodontics and esthetic restorative dentistry

Professional skills:

- Postgraduate study and graduation in oral surgery, dental resident at the Clinic for Implantology & Esthetic Dentistry Schellenstein, Olsberg (Chairman Prof. Dr. F. Khoury)
- Special degree in implantology and periodontology from the corresponding German scientific associations (DGI, DGP)
- Lecturer in several post graduation education and master programs for the German societies for implantology (DGI), periodontology (DGP) and esthetic dentistry (DGÄZ)

Management of challenging situations, complications and pitfalls with a micro-surgical soft tissue management approach in daily implant practice

Complications in implant and bone grafting surgery, such as inability to achieve sufficient soft tissue closure, dehiscence or flap necrosis often involve the soft tissue. Opening of the wound leads to exposure of the surgical site to the complex microbiological spectrum of the mouth. Infection can jeopardize the biological integration of implants, bone grafts and augmentation materials. Also during the second stage soft tissue management can make the difference between success and failure. Exposure of peri-implant bone by secondary intention e.g. leads to bone resorption and it is well known, that the absence of keratinized fixed mucosa has an impact on the long-term stability of peri-implant soft tissues.

Clinicians are frequently confronted with individually challenging situations during different treatment steps. A micro-surgical approach by using free or pedicled soft tissue grafts are a possibility to solve various problems. They can be used to achieve primary wound closure during immediate implant placement, increase tissue volume and quality and may achieve a double layer soft tissue closure. Soft tissue grafts are appropriate to close flap perforations and are also helpful in second stage soft tissue management.