

IMPLANTS INSERTED IN MANDIBLE: A CASE SERIES

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It is generally accepted that the mandible (especially in the interforaminal region) has better bone quality than the maxilla, and this fact is probably the reason why several reports are available regarding implants inserted into the mandible. Since no report is available on a new type of implants, a retrospective study was performed. A total of 185 two-piece implants (FMD srl, Rome, Italy) were inserted in mandible, 102 in female and 83 in males. The median age was 58 ± 13 (min-max 25-80 years). Implants replaced 14 incisors, 7 cuspids, 49 premolars and 115 molars. Implant' length was $x \leq 10$ mm, $10,30 \leq x \leq 12,30$, equal to 13 mm and $x \geq 14$ mm in 80, 90, 13 and 2 cases, respectively. Implant' diameter was narrower than 3.5 mm, equal to 3.8 mm and wider than 4.0 mm in 25, 17, 143 cases, respectively. There were 36, 41, 106 and 2 Elisir, I-fix, Shiner, and Storm implant types, respectively. One implant was lost, survival rate = 98.15%. Among the studies variables immediate loaded implants on single tooth rehabilitations ($p=0.017$) have a worse clinical outcome. Then peri-implant bone resorption (i.e. delta IAJ) was used to investigate SCR. Among the remaining 184 implants, 20 fixtures have a crestal bone resorption greater than 1.5 mm (SCR = 89.13). Statistical analysis demonstrated significance only for surgeon ($p=0.001$). In conclusion FMD implants are reliable devices for oral rehabilitation with a very high SCR and SVR.

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