Risk factors of peri-implant mucositis and its prevention

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Introduction

Nowadays dental endosseous implant is a widely recognized treatment option for replacing missing teeth. Dental implants have been reported to achieve long-term success in many clinical cases. However, 50% of patients experience some level of complications and peri-implant mucositis is a frequent finding.

Aim

The aim of the current research was to determine the main risk factors leading to periimplant mucositis and to develop guidelines on its prevention.

Materials

The objects of the research were 20 patients aged 35–44 years with peri-implant mucositis. The questionnaire comprised questions on medical and dental history, home care and oral hygiene skills. Recall peri-implant examination included OHI-S (Green, Vermillion, 1964), GI (Loe, Silness, 1963), bleeding on probing (BoP+%) and mucosal recession (mm). Clinical parameters were assessed at four surfaces (mesial, buccal, distal and lingual) of each implant. The obtained results were documented in special charts.

Results

The main factors leading to peri-implant mucositis are poor oral hygiene (98%), history of periodontitis (74%), uncontrolled diabetes mellitus (27%), smoking (79%), genetic profile (63%), and improper posttreatment maintenance therapy (96%). We have explored that bruxism (43%) and occlusal overload (57%) lead to inflammation around the implant surface. Nevertheless, the iatrogenic factors include non-parallel adjacent implants (35%), the presence of gap between the fixture and prosthetic components (54%), as well as the presence of residual cement (36%) subgingivally.

Conclusions

Periodontal maintenance protocol together with the improvement of oral hygiene play a key role in plaque-induced mucositis prevention. The informative brochure about oral hygiene in the area of dental implants was developed for patients with peri-implant mucositis.