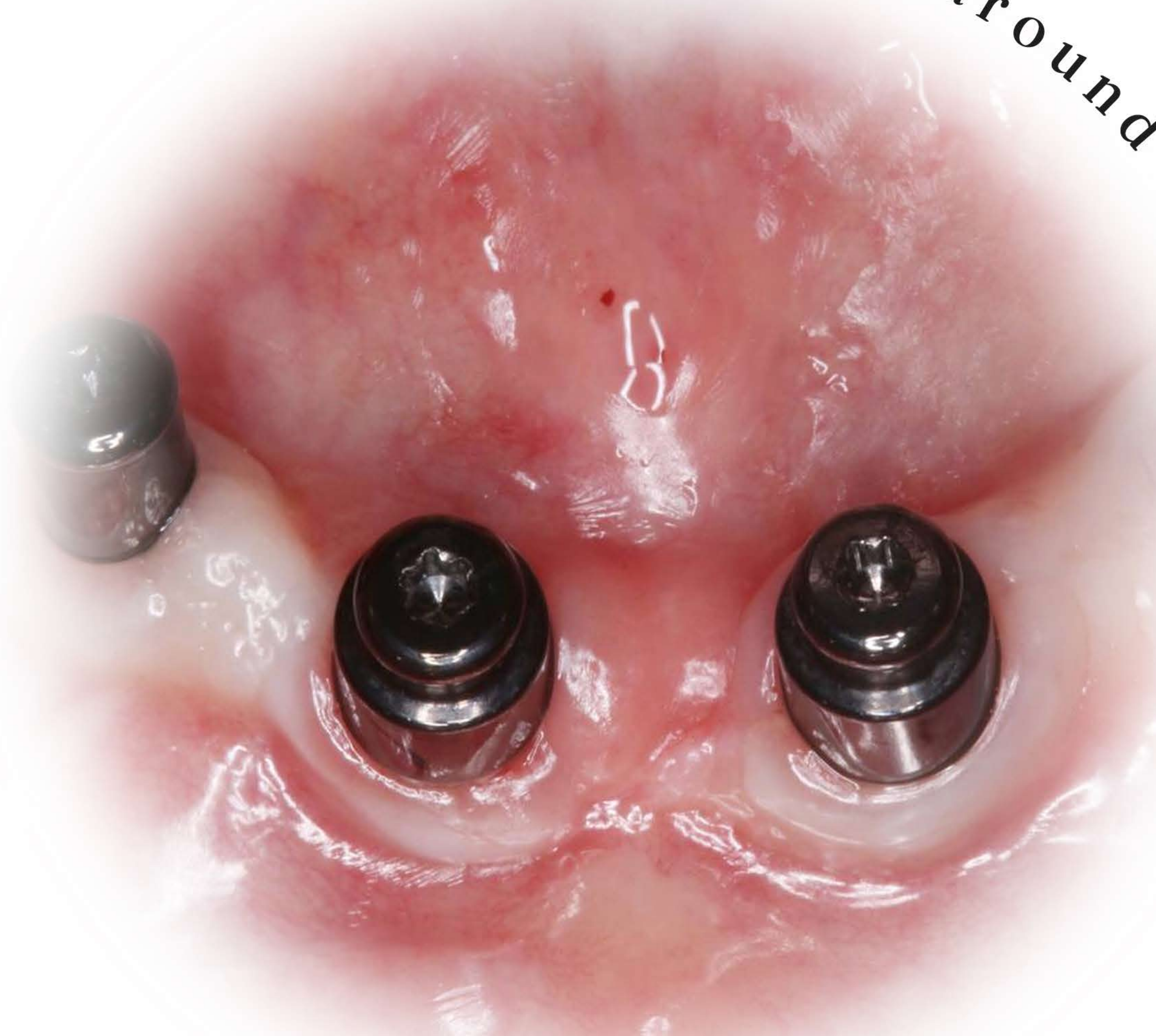


Part 2

Consensus report of group 1 of the DGI/SEPA/Osteology Workshop

Importance of keratinized mucosa

around dental implants



گزارش اجماع ورکشاپ DGI/SEPA/OSTEOLOGY
در خصوص اهمیت مخاط کراتینه اطراف ایمپلنت های دندانی



The influence of thin as compared to thick peri--implant soft tissues on esthetic outcomes. A SR and meta-analysis

8- Is inadequate PIKM associated with the level of the marginal bone?

A KT width of < 2 mm was shown to be significantly associated with bone loss, based on longitudinal ($n = 2$) and reduced MBL in cross-sectional studies ($n = 6$).

9-Is inadequate PIKM associated with increased mobility of the peri--implant mucosa?

The studies included in this systematic review have measured KT width rather than the presence of mucosal attachment. However, there is some evidence that associates $KT > 2$ mm with absence of mucosal mobility (Monje et al., 2019).

10- Is inadequate PIKM associated with increased pain and brushing discomfort?

The level of brushing discomfort and pain appears to be higher at implants lacking KT or presenting a KT width of <2 mm (n = 4 studies). This was particularly noted in the posterior regions of the mandible in one study.

11- Is inadequate PIKM associated with patient's oral health–related quality of life?

There is no evidence associating reduced KT and patient's oral health-related quality of life (n = 5 studies).

12- What is the association between vestibular depth and KT width?

Evidence from one cross--sectional study suggested a positive association between a deep vestibulum of >4 mm and an increased width of KT.

13- Is the lingual band of KT equally relevant as the buccal band in reducing the risk for peri--implant diseases?

None of the included studies specifically addressed the relevance of lingual KT on the occurrence of periimplant diseases. However, based on expert opinion there, is a suggestion that the presence of a band of KT on the lingual aspect is of equal clinical relevance.

14- Does the location of the implant correlate to the amount of keratinized tissue and occurrence of peri-implant diseases?

Evidence from the systematic review did not reveal any information on the implant location and preservation of peri--implant health. However, one cross--sectional study (Monje et al., 2019) suggested that posterior areas (i.e. molars and premolars) in the mandible lacking KT were more frequently associated with peri--implantitis compared to anterior sites.



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