

## **Treatment of peri-implant mucositis and peri-implantitis.**

**Walid M. Elebiary**

Private practice, Saudi Arabia

The use of oral implants to support fixed and removable prostheses is a widely accepted treatment modality of high success and predictability. Despite the high success and survival rates of oral implants, failures do occur, and implant supported prostheses may require substantial periodontal and prosthodontic maintenance over time. Implant failures have been traditionally described as early or late. Early failures occur before implant loading and could be caused by surgery-, implant-, or host-related factors. Late failures, on the other hand, occur after prosthodontic rehabilitation as a result of peri-implant disease or biomechanical overload.

Peri-implant disease is thought to result in bone loss around the implants and subsequent loss of osseointegration.

There are two stages of peri-implant disease: whereas mucositis is a reversible inflammation of the peri-implant soft tissue without any bone loss, peri-implantitis affects the soft and hard tissue, resulting in the loss of supporting peri-implant bone. There are prevalence of up to 63% for mucositis and up to 43% for peri-implantitis. However, it is not quite clear yet which factors influence the inflammation of the peri-implant tissue. Existing or previous periodontal disease may affect peri-implant infection, particularly in patients with aggressive periodontitis who have genetically undermined immune defenses to oral pathogens.

### **Biography**

Walid M. Elebiary graduated from the faculty of Dentistry, Alexandria University 1992. He had Diploma of Restorative Dentistry and Fixed Prosthodontics 1995 and Master degree of Oral Medicine and Periodontology 1999. He worked as a resident at the faculty of Dentistry, Alexandria University Department of Periodontology. He is working in private practice since 1992 and lecture in many international conferences.