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## Dr. Andrei Mark

The benefits of collaborative implant dentistry

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# Dr. Andrei Mark

One of the most respected and experienced dental implantologists discusses the real advantages of collaborative dental implant surgery in growing a general dental practice.

by Mark Ellis

The ever-increasing popularity of dental implants today has seen more general dentists and other specialists adding implants to their list of patient services. After all, dental implants, when performed safely and properly, can be very lucrative.

Along with the potential financial rewards associated with dental implants come potential risks. One poorly executed implant procedure can result in patient harm along with litigation and financial penalties that can ruin a successful practice. The goal of this article is to provide some practical advice and cautions that can help dentists place implants while minimizing any potential risks.

## Look for land mines

You wouldn't walk through a live mine field without an experienced guide or mine sweeper. Likewise, looking for any potential hazards or complications before placing implants can save you from financial trauma. Commenting on the matter, Dr. Mark had this to say: "Considerable care and caution must be exercised when placing implants near vital structures, such as the inferior alveolar nerve, maxillary sinus or the nasal cavity. You need to know what could go wrong before beginning the procedure." He continues: "Placing

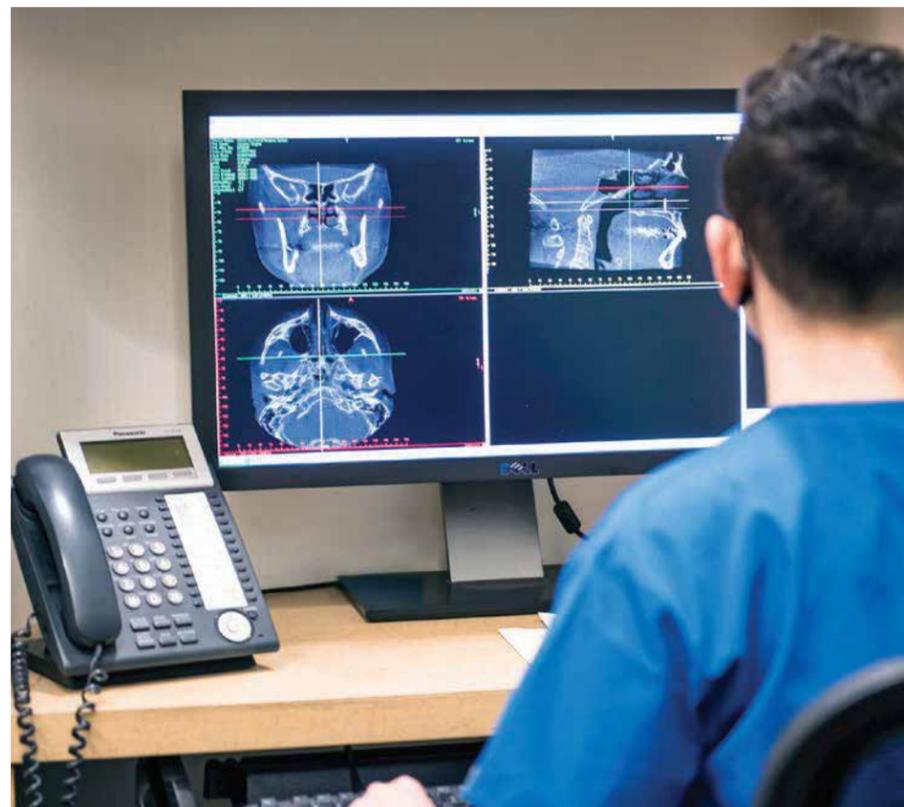
implants in these instances requires considerable knowledge and skill that only comes with years of education and practice."

## Standing still in a mine field

While hiking through open country you suddenly discover you are in a live minefield, what would you do? You certainly wouldn't keep walking. Likewise, the same is true of implant dentistry. If while performing a "routine" implant procedure you find yourself in a mine field, it is best to stop and reassess your situation immediately. "You have to know how to bail out when you run into trouble,"

says Dr. Mark. "You have to explore your options and act decisively. For example, 'Do I stop the procedure, bone graft, wait for the healing and then finish the case later. Or, do I stop the case, call for advice and then complete the procedure? Or, do I stop the procedure and make arrangements for the patient to see a surgeon to complete the case?'" says Dr. Mark.

Having a bailout plan in advance of a difficult case can make the difference between running a successful dental practice or becoming cannon fodder for a malpractice attorney in a legal mine field.



**Photo opposite page.** With 3D CT scanning Dr. Mark is able to view the oral cavity from a variety of angles. He is also able to highlight or isolate specific structures for greater precision when planning implant placement. **Photo this page.** Dr. Mark reviews a post surgical CT scan of a patient to confirm proper placement of implants.

## Navigating the mine field

In the world of dental implantology, there really is no "routine" procedure. Every procedure has the potential to become a potential mine field. "Collaborative implant dentistry is one of the best ways to help navigate around the potential pitfalls associated with dental implantology," suggests Dr. Mark. To help illustrate the point Dr. Mark highlights the important role that proper implant selection plays in the success of a case. "Different situations require the use of different implants, if not from the same manufacturer then from other vendors. For instance, an immediate extraction, immediate load situation will require an aggressive thread implant that will provide initial stability," says Dr. Mark. "This same implant would not but suitable for use in D1 density bone since it would

not penetrate such hard tissue. On the other hand, this aggressive thread pattern would be well suited for bone grafted areas and sinus lift or soft bone in the maxilla. The AnyRidge<sup>®</sup> dental implant from MegaGen, with its wide flutes, offers greater osseointegration for increased stability in soft or in bone with minimal height."

When you consider the wide array of dental implants to choose from, making the right selection for each case can become a real challenge. "Understanding the various strengths and weaknesses of different implant systems is a major learning curve," comments Dr. Mark. He continues, "For example, if you are using one type of implant from a single manufacturer, you will be greatly limited in the number cases you will be able to successfully complete."

In addition to proper implant

selection, there are a number of other instances where collaborating with a highly-experienced implantologist can be a real asset.

"There are many instances in implant dentistry where collaborating with a surgical expert can have huge advantages," recommends Dr. Mark. "For example, what do you do when the implant is spinning in the bone? Is the case suitable for immediate loading? Is there sufficient bone for a wide diameter implant? These are questions that only an expert with many years of experience and who has successfully resolved these problems can address.

"The ability to begin a case from the planning stage to the final restoration under the guidance of an implant expert with over 30 years of experience can yield real benefits to both the dentist and the patient."



### Avoiding land mines

What advice does Dr. Mark offer to dentists performing placement of dental implants? "The best way to avoid trouble is to know and respect your limitations," says Dr. Mark. "This will help you to avoid situations that might be outside your comfort zone that could put the patient, and your practice, at risk.

How would a dentist use the collaborative approach to placing dental implants in their practice? "There are several options open to dentists who want to use this team approach to placing implants. For example, a dentist with a potentially difficult case could send the patient to me for a CT scan. I would review the scans and make a recommendation on how to proceed with the case."

What option is available to dentists with difficult cases but are looking to learn how to tackle them themselves? "Mentoring is another example of collaboration that I offer dentists with difficult implant cases," says Dr. Mark. "In this instance I would perform the surgery in my practice while walking dentists through the entire procedure from start to finish."

"Another way that dentists can learn how to handle more complicated implant cases is to join a dental study club," suggests Dr. Mark. "It's a great way to find out about new implant products and techniques as well as getting suggestions on how to place implants in tricky or more challenging locations." ■



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Come and witness the latest technology and techniques that's helping to shape the future of modern dentistry while accumulating CE credits\* in a relaxed setting. For more information and to join DSCNY please email Dr. Andrei Mark at: [amark@cpoms.com](mailto:amark@cpoms.com).

Location:  
**Princeton Club**  
 15 W. 43rd St,  
 New York, NY 10036

Cocktails:  
 6:30 - 7:00 pm  
 Dinner & Presentation  
 7:00 - 9:30 pm

Membership Fees: \$600 (for all 9 meetings including meals)  
 Guest Fee: \$125 (Limited to 2 presentations per academic year).

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\*Approved for CE credits by the Academy of General Dentistry and sanctioned by the State of New York.

### Dental implant failure rates higher among general practices and by less experienced dentists

Research findings from several independent studies find that dental implants placed in general practices have a higher failure rate than those placed in academic or specialty settings. One research study conducted by Practitioners Engaged in Applied Research and Learning (PEARL) found 7% of the implants placed were classified as failures when excessive bone loss was excluded from the analysis. This number jumped to 18.7% when excessive bone was included in the analysis. The study group comprised 922 implants and patients from 87 practices with a follow-up of 4.2 years.

A study by Loma Lima University School of Dentistry revealed that the failure rate of implant supported fixed complete dentures (ISFCDs) was higher among surgeons with ≤5 years of experience. This retrospective study evaluated the implant success rates of immediately loaded maxillary and/or mandibular ISFCD. The study group consisted of 50 full-arch maxillary and/or mandibular implant-supported fixed complete dentures. The failure rate among less-experienced surgeons (≤5 years) was 12.2% vs. 2.4% by surgeons with more experience.