Expert Panel Consensus Meeting on Monitoring, Diagnosis and Treatment of Peri-Implant Disease and AGM

Lectures by:
Professor Tord Berglundh
Professor Nikos Donos
Dr Maria Retzepi
Professor Mariano Sanz
Mrs Sally Simpson
Dr Simon Wright
DEAR COLLEAGUE,

In February 2010, the Association of Dental Implantology UK staged a Focus meeting entitled ‘Focus on Peri-implantitis’. The event, which gathered four of world’s most eminent periodontologists - Professors Lang, Mombelli, Berglundh and Renvert - explored the primary and secondary aetiological factors surrounding the pathogenesis of this increasingly common condition. Attracting over 350 of the UK’s prominent implantologists and periodontologists, it was the ADI’s most successful one-day educational event to date.

Despite much research into the aetiology of peri-implantitis, there is still lack of clinical consensus regarding the monitoring, diagnosis and treatment of different stages of peri-implant disease. It is therefore appropriate to structure a further event in order to examine the diagnosis and treatment of peri-implant diseases, by a panel of experts who have been asked to discuss and reach a consensus on the “best practice guidelines” on management of peri-implant disease.

I am delighted to announce this one-day event entitled ‘Expert Panel Consensus Meeting on Monitoring, Diagnosis and Treatment of Peri-implant Disease’. The invited expert panel of speakers includes Professors Tord Berglundh (Sweden), Mariano Sanz (Spain), Nikos Donos (Eastman, London), the President of the British Society of Dental Hygienists and Therapists Sally Simpson, Nicola West (Bristol) as well as a UK periodontologist Maria Retzepi.

The aims of the meeting will be:
- to present the best available evidence on monitoring, diagnosis and treatment of peri-implant disease
- to invite our panel of experts to debate the evidence and reach a consensus
- to issue best practice guidelines on how to monitor and treat peri-implant disease based on the expert panel’s conclusions/consensus

Please register early to take advantage of the early-bird fee. I look forward to seeing you at Savoy Place in November.

Cemal Ucer
ADI President

Dedicated to improving the standards of implant dentistry by encouraging continuing education and scientific research
SCHEDULE

08:00  Registration, Tea/Coffee and Exhibition

Session 1:  Moderator - Professor Cemal Ucer, ADI President

09:00  Welcome and Introductions

09:15  Professor Nikos Donos (UK)
Diagnosis of peri-implant disease and the impact of treated periodontitis

10:15  Professor Tord Berglundh (Sweden)
Peri-implantitis and periodontitis – two different entities?

11:15  Tea/Coffee and Exhibition

11:45  Dr Simon Wright (UK)
Monitoring and maintenance of implants – results of a survey of UK Implantologists

12:05  Mrs Sally Simpson (UK)
Hygienist and Therapist role in peri-implant monitoring/maintenance

12:35  Lunch and Exhibition

13:30  AGM

Session 2:  Moderator – Professor Edwin Scher, ADI Scientific Co-ordinator

14:00  Dr Maria Retzepi (UK)
Non-surgical treatment of peri-implant diseases

15:00  Tea/Coffee and Exhibition

15:30  Professor Mariano Sanz (Spain)
Surgical treatment of peri-implant disease

16:30  Panel discussion with the faculty: Tord Berglundh, Nikos Donos, Maria Retzepi, Mariano Sanz, Edwin Scher, Sally Simpson, Cemal Ucer, Nicola West, Simon Wright

17:00  Panel Consensus Statement: ADI Guidelines for Monitoring, Diagnosis and Treatment of Peri-Implant Disease

17:15  End
Peri-implantitis is a disease affecting peri-implant tissues. It is characterised by bleeding/suppuration on probing together with loss of supporting bone. Recent evaluations on the prevalence of the disease indicate that about 20% of implant-carrying patients present with significant peri-implantitis problems. In the presentation results from recent studies on peri-implantitis and periodontitis will be reported and important differences between the two conditions will be described. While subjects with a history of severe periodontitis have higher risk for the disease, the presentation will also bring up the role of implant surface characteristics in relation to peri-implantitis. Thus, results from pre-clinical in vivo studies will be presented and their relevance to clinical outcomes will be discussed.

Learning objectives:
- Human and preclinical documentation of peri-implantitis and periodontitis. What are the main differences between the two diseases?
- Influence of implant design and surfaces on progression of peri-implantitis
- Influence of implant design surfaces on treatment of peri-implantitis

Dr Berglundh graduated (LDS) 1978 in Gothenburg and received his certificate as specialist in Periodontics in 1992, the degree of Odont. Dr. (PhD) in 1993, the Docent (Associate Professor) degree in 1994 and the Professor degree in 2002 from the Department of Periodontology, The Sahlgrenska Academy at University of Gothenburg, where he has served since 1981. Presently, Dr. Berglundh is Professor at the Department of Periodontology and Head of the Periodontal Research Laboratory at University of Gothenburg. He is Associate Editor of Clinical Oral Implants Research and Journal of Clinical Periodontology and the textbook Clinical Periodontology and Implant Dentistry. Dr Berglundh has produced more than 170 scientific publications within the field of dental implants, periodontology, immunology, genetics, tissue integration and regeneration. Interactions between periodontitis and peri-implantitis represent one of the major fields of research and include translational systems of combinations of molecular biology techniques, experimental models and clinical trials.

Diagnosis of peri-implant disease and the impact of treated periodontitis

Current clinical evidence has positioned implants as one of the first choices of treatment modality for partially and edentulous patients. With the increasing use of titanium dental implants, it has been observed that biological complication in the form of peri-implant mucositis, peri-implantitis, and in some cases implant loss, are becoming increasingly prevalent. In this lecture, the current literature on the appropriate diagnostic procedures for peri-implant diseases will be reviewed, and the risks involved in the use of implants in the patients that have been previously treated for periodontal disease and the increased susceptibility that this type of patients might present for peri-implantitis will be discussed.
Learning objectives:

- Implant treatment and complications in periodontally compromised patients
- Diagnosis of peri-implant disease

Professor Donos is the Head & Chair of Periodontology and the Director of Clinical Research at the UCL- Eastman Dental Institute, London and the Lead of the Oral Health Theme at the UCLH/UCL Comprehensive Biomedical Centre. Professor Donos leads the Clinical Investigation Centre at the Eastman which specialises in the provision of RCT and clinically applicable translational research studies. His research track record is mainly on GTR, GBR, implant dentistry as well as in the correlation of periodontal disease with other chronic diseases. He has published extensively and he is member of the editorial board of the leading peer-reviewed journals.

MARIA RETZEPI  DipDS PhD MSc CertClinSpec(Perio) FHEA
Non-surgical treatment of peri-implant diseases

Peri-implant diseases present in two forms: peri-implant mucositis and peri-implantitis, which occur in up to 80% and 56% of patients with implants respectively. Hence, non-surgical and surgical treatment of peri-implantitis lesions has become a topic of growing research interest and its effectiveness has been evaluated in both experimental and clinical studies. Non-surgical therapeutic modalities include mechanical debridement, local application of antimicrobials, systemic administration of antibiotics and laser therapy. The aim of this presentation is to provide an overview of the various non-surgical treatment protocols implemented for the therapeutic management of peri-implant diseases and to discuss their success and predictability in arresting the progression of peri-implantitis lesions.

Learning objectives:

- Gain insight into the following non-surgical treatment modalities for peri-implant disease:
  a. Mechanical debridement
  b. Laser therapy
  c. Local application of antimicrobials
  d. Systemic administration of antibiotics

- Discuss the effectiveness and limitations of the various non-surgical treatment modalities

- Evaluate the clinical factors mitigating the outcome predictability of non-surgical therapy

Dr Retzepi is a registered specialist in Periodontics and honorary Clinical Lecturer in Periodontology at the UCL Eastman Dental Institute. She is the recipient of the most prestigious international awards in Dental Implantology, namely the 2009 European Association of Osseointegration Research Award and the 2010 Andre Schroeder Research Prize for her research on the effect of diabetes mellitus on osseointegration and on Guided Bone Regeneration. Dr Retzepi graduated as a Dental Surgeon from the University of Athens Dental School, where she also obtained her Master of Science degree in Oral Biology and Certificate of Clinical Specialisation in Periodontics with distinction. She then completed a clinical fellowship at the Department of Periodontology and Fixed Prosthodontics, University of Berne, Switzerland. Dr Retzepi has received her Doctor of Philosophy (PhD) degree in Clinical Dentistry from the UCL Eastman Dental Institute and she is a Fellow of the Higher Education Academy. She currently works in specialist private practice in Central London.
The routine use of implants in dentistry proved to be successful and predictable in restoring masticatory function, aesthetics and the comfort of the partially or fully edentulous patient. Nevertheless, a certain proportion of implants are lost even after years of successful osseointegration. This loss may be caused by peri-implantitis, i.e. an inflammatory lesion of the surrounding peri-implant tissues characterised by loss of supporting bone (Claffey et al. 2008). Therefore, the prevention and/or treatment of peri-implant diseases are of importance in clinical dentistry, and the available scientific evidence should help define adequate preventive and therapeutic approaches. The limited available literature suggests that mechanical non-surgical therapy could be effective in the treatment of peri-implant mucositis (Renvert et al. 2008b). Conversely, non-surgical approaches were not found to be effective in peri-implantitis, as unpredictable results were noticed (Renvert et al. 2008, Lindhe & Meyle 2008). Moreover, the available evidence for surgical therapy of peri-implantitis has been considered as "limited" (Claffey et al. 2008) since there are few controlled prospective studies evaluating this mode of therapy in the treatment of peri-implantitis. All tested surgical approaches appeared to determine some improvements of clinical conditions. However, complete resolution of peri-implantitis was never reported and, furthermore, significant differences among the different surgical therapies were rarely noted. Access surgery has been investigated reporting resolution in about 60% of the lesions. Different methods of surface decontamination have been tested in conjunction with the surgical therapy (implantoplasty, chemical agents, air abrasives and lasers), but none was found to be superior. The use of regenerative procedures has also been reported with various degrees of success.

Learning objectives:
- To assess the scientific evidence on the efficacy of the different surgical therapies in the treatment of peri-implantitis
- To assess the scientific evidence on the efficacy of the different surface decontamination methods used during the surgical therapy of peri-implantitis
- To assess the scientific evidence on the efficacy of the different regenerative techniques used during the surgical therapy of peri-implantitis
- To present representative cases illustrating the expected outcomes of this surgical procedure

Professor Sanz received his MD and DDS degree from the Universidad Complutense de Madrid. He then completed his graduate training in Periodontology at the University of California, Los Angeles (UCLA). Additionally, he is Doctor in Medicine (PhD Degree) from the University Complutense of Madrid. He is Professor of Periodontology, Dean of the Faculty of Odontology of the University Complutense of Madrid and Director of the graduate programme “Master in Periodontology” also at the University Complutense of Madrid. Currently he is the Chairman of the European Council of Deans of Faculties of Odontology. Professor Sanz is the author of more than 200 scientific articles and book chapters and participates extensively in international lectures, courses and seminars in Periodontology, Implant Dentistry and Dental Education.
Dental Hygienists and Therapists play an essential role in the ongoing assessment, prevention, treatment and monitoring of oral disease in a patient on their lifelong journey through the oral care pathway provided by our dental profession. This role is performed within their scope of working practice as part of a skill mixed dental team that can provide long term support to the special and individual needs of each patient. Dental Hygienists and Therapists are fully equipped to contribute considerably towards the care of the patient with dental implants and are perfectly placed to provide long term monitoring, prevention, maintenance and treatment as part of their skill set. This presentation will highlight how this role might be utilised.

Learning objectives:
- Discuss role of Hygienists and Therapists in monitoring of peri-implant disease
- Discuss recommendations for maintenance of implants

Mrs Simpson trained as a Dental Hygienist in 1995 and as a Dental Therapist in 2002. Qualified in further education, during her career she has taught undergraduates and worked as a staff member at King’s College London and the University of Manchester. She has also worked in NHS Community Clinics, General and Specialist Implant and Periodontal Practice. She is a British Society of Dental Hygiene and Therapy Executive Team Member and a Director of the Society, and became President in October 2010.

Dr Wright has been a principal partner of Glencairn Dental group of practices since 2002. He completed the Trafford One Year Implant Course in 2004, and has gone on to complete his Diploma in Implant Dentistry and his MSc in Dental Implantology. Dr Wright is a Senior Lecturer in Implantology at the University of Salford, but also lectures nationally and internationally for Astra Tech, Straumann, the ITI, Mersey Deanery, and on the MSc courses at Manchester, Cardiff and Sheffield. Dr Wright has won awards for his research papers and is a keen mentor. He also hosts study clubs in the North West and is the Director of Education for the Association of Dental Implantology. He is also proud to be a member of PEERS.
GUEST PANELIST

NICOLA WEST  BDS FDSRCS PhD FDS(Rest Dent)

Professor West is an Honorary Consultant in Periodontology at the Bristol Dental Hospital and School. She is a graduate of the Cardiff University School of Medicine. After attaining her FDS from the Royal College of Surgeons of England, she gained her PhD from the University of Wales (Cardiff) in 1995, on dentine hypersensitivity and tooth surface loss. Currently Professor West leads the Clinical Trials Unit at the Bristol Dental Hospital and School attracting substantial industrial funding over many years, furthering research in the field and publishing widely in peer-reviewed journals. Current research interests involve periodontology, bone augmentation and implantology, evaluating oral health-care products, tooth wear, dentine hypersensitivity, whitening and stain removal. Professor West lectures regularly in the international forum, is a committee member of the British Society of Periodontology as well as the postgraduate tutor for the British Society of Periodontology in the South West Region and committee member of the BSI British Standards, UK National Standards Body (NSB).
2013 Team Congress

25th ANNIVERSARY

ADI
Association of Dental Implantology UK

How long do implants last?
Complications, risk management and prognosis

- PLENARY PROGRAMME, TECHNICIANS’ PROGRAMME and TEAM PROGRAMME
- TRADE EXHIBITION
- PRE-CONGRESS SESSIONS
- SOCIAL EVENT: ADI OSCARS BASH

Speakers include:

Tomas Albrektsson SWEDEN  Zeev Ormanier ISRAEL
Urs Braegger SWITZERLAND  Franck Renouard FRANCE
Christian Coachman BRAZIL  Tara Renton UK
Andrew Dawood UK  Maria Retzepi UK
Nikos Donos UK  Ashok Sethi UK
German Gallucci USA  Jon Suzuki USA
Nikos Mardas UK  Hom-Lay Wang USA
Peter Moy USA  ...with more to be confirmed.

REGISTRATIONS OPEN AUGUST 2012
GENERAL INFORMATION

How to Register:
• Secure online registration is available at www.adi.org.uk/consensus2012
• Alternatively please complete the attached application form and post/fax to ADI, 98 South Worple Way, London SW14 8ND. Fax no. 020 8487 5566. Cheques to be made payable to ‘ADI’.

Fees:

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CPD:
6 hours of verifiable CPD. Certificates of Attendance will be available to download after the event.

Cancellation:
Cancellations will be accepted in writing until Monday 5 November 2012 and are subject to an administration charge of £40. After this no refunds can be guaranteed.

Exhibition:
A small exhibition showcasing the latest trends in the implant market will be accessible during delegate registration and catering breaks.

Catering:
A buffet lunch will be served in the exhibition areas.

Venue:
Savoy Place, 2 Savoy Place, London WC2R 0BL.
The venue is adjacent to the Strand and Waterloo Bridge and is within walking distance from Waterloo main line station. A map will be sent with registration confirmation.

Accommodation:
Nearby hotels include: Strand Palace Hotel – 020 7379 4737/www.strandpalacehotel.co.uk
Waldorf Hilton – 020 7836 2400/www.hilton.co.uk/waldorf
APPLICATION FORM

CONSENSUS MEETING
MONDAY 19 NOVEMBER

To apply now simply visit www.adi.org.uk/consensus2012
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Please return or fax (both sides if necessary) to:

ASSOCIATION OF DENTAL IMPLANTOLOGY UK
98 SOUTH WORPLE WAY
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[www.adi.org.uk](http://www.adi.org.uk)