INDUSTRY CLINICAL

ICOI returns to Chicago

Chicago is the site for the ICOI’s 14th annual Implant Prosthetic Summer Symposium. (Photo/Christiane Ferret, Dental Tribune)

Windy City welcomes ICOI Implant Prosthetic Symposium in August

By Craig Johnson, ICOI Executive Director

The International Congress of Oral Implantologists (ICOI) will return to one of its favorite locales for its 14th annual Implant Prosthetic Summer Symposium. The dates to add to your calendar are Aug. 18-20, and the venue will be the Downtown Marriott Hotel on Michigan Avenue in the heart of Chicago. Just steps from the famous Navy Pier and the excitement of summer in the city, this meeting promises both educational enrichment and social opportunities.

The Chicago program’s goal is about education for everyone on the implant team. Formulated with the original vision of ICOI’s Implant Prosthetic Symposium, the mission is to highlight the restorative opportunities.

JOI: Gene combination identified as risk factor in success of dental implants

The health of the surrounding tissue affects the success of a dental implant. Identifying and reducing risk factors is therefore a key step in the implant process. Now a combination of genes has been identified as a possible indicator of greater tissue destruction leading to negative outcomes for implants.

The authors of an article in the Journal of Oral Implantology report on a study of individuals with the combination of interleukin (IL)-1 allele 2 at IL-1A–889 and IL-1B+3954. These people are “genotype positive” and susceptible to increased periodontal tissue destruction.

Peri-implantitis, or the process of tissue inflammation and destruction around failing implants, is very similar to periodontal disease. The researchers sought to find any association of these genotypes with the severity of peri-implantitis progression and the effect of this combination on treatment outcomes.

This study compared two groups of patients, all of whom had implants. The first group consisted of 25 patients with peri-implantitis, while the second group of 25 patients had healthy tissue. Seventeen patients from the first group and five from the second group were genotype positive.

Patients in the first group, those with peri-implantitis, took part in a treatment and maintenance program. The genotype-positive patients in this group experienced greater periodontal tissue destruction and increased discharge from tissues. The genotype-negative patients responded better to treatment. Statistically significant differences were noted between the groups.

The combination of these two alleles in patients with inflamed periodontal tissues denotes a risk factor that can lead to further tissue destruction. Patients with the specific genotype can have exaggerated local inflammation. Gene polymorphism may affect the outcomes of treatment for peri-implantitis in genotype-positive people and affect the long-term success of implants.


About the Journal of Oral Implantology

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