

Early and Immediate Loading Protocols in Dental Implantology: Pros and Cons

Bilodeau Casper*

Department of Dentistry, National Taiwan University Hospital, Taipei, Taiwan

ABOUT THE STUDY

A stress-free healing period of three to six months is currently accepted in oral implantology as a requirement to achieve bone apposition without the interposition of fibrous scar tissue. Brnemark and his colleagues first presented this approach in 1977.

Dental implants have become a popular choice for replacing missing teeth due to their high success rates and long-term durability. Traditionally, implant placement involved a multi-stage process that required a period of osseointegration, or healing of the implant within the jawbone, before the final restoration could be placed. However, in recent years, new loading protocols have been developed that allow for early and immediate loading of dental implants. In this essay, we will discuss the differences between early and immediate loading protocols in dental implantology and their potential benefits and drawbacks.

Early loading protocols involve placing a temporary restoration on the implant shortly after surgery, usually within a period of 2-3 weeks. The temporary restoration is designed to be non-functional and is used primarily for esthetic purposes. After a period of 2-3 months, the temporary restoration is replaced with a permanent restoration once the implant has fully integrated with the jawbone. Early loading protocols are typically used for implants that have high primary stability, or the ability to resist movement when placed in the jawbone.

Immediate loading protocols, on the other hand, involve placing a functional restoration on the implant immediately after surgery. This means that the patient can leave the dental office with a new set of teeth on the same day as their implant surgery. Immediate loading protocols require careful case selection and planning, as they are typically reserved for implants that have

high primary stability and are placed in areas with favorable bone density.

The benefits of early and immediate loading protocols are clear. Patients can receive functional teeth sooner, which can lead to improved quality of life, better esthetic outcomes, and increased patient satisfaction. Additionally, these loading protocols can reduce the overall treatment time and number of appointments required, which can be a significant advantage for patients with busy schedules or limited access to dental care.

However, there are also potential drawbacks to early and immediate loading protocols that must be carefully considered. One of the biggest concerns is implant failure, which can occur if the implant is overloaded or placed in an area with insufficient bone density. Additionally, early and immediate loading protocols may not be appropriate for all patients, particularly those with systemic conditions that may compromise the healing process.

It is also important to note that not all implant systems are designed for early or immediate loading. Clinicians must carefully consider the specific implant system being used and the manufacturer's recommended loading protocol before proceeding with early or immediate loading.

In conclusion, early and immediate loading protocols in dental implantology offer a range of potential benefits, including improved patient outcomes, reduced treatment time, and increased patient satisfaction. However, these loading protocols must be carefully considered and planned to ensure that they are appropriate for the patient's specific case and implant system. Clinicians should carefully evaluate the patient's individual needs and case-specific factors to determine whether early or immediate loading protocols are appropriate for their situation.

Correspondence to: Bilodeau Casper, Department of Dentistry, National Taiwan University Hospital, Taipei, Taiwan, E-mail: c.bilodeau@gmail.com

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