The present clinical study evaluated the stability of soft tissue around a rough implant surface, if certain criteria are fulfilled.

**Follow Up And Examination**

Soft tissue sounding was performed at three months after placement; at one year after placement and at two years after placement.

**Results**

One of the 40 implants failed during the clinical evaluation phase, probably due to the fact that the one-piece implant was not completely osseointegrated, which is a common problem during the first year after placement. Measurements were taken at the site of the implant, at a depth of 2 mm. A periodontal probe was used to measure the thickness of the mucosa, the thicker the mucosa, the better the healing.

**Discussion**

The present clinical study evaluated the stabilization of soft tissue around a rough implant surface, if certain criteria are fulfilled.

**Conclusion**

The study demonstrated that there is no absolute need of a polished neck in order to achieve good tissue healing around an implant with a rough surface. However, the clinician must be aware that only minor changes in implant insertion axis can occur in time is that in the case of implant loss, the loosening of the implant can lead to a high incidence of periapical lesions. Therefore, the use of one piece implants with a polished neck is beneficial.

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Soft Tissue Healing Around One Piece Implants: A Two Years Retrospective Clinical Study

Olimpiu L. Karancsi¹, Radu Stîla², Emanuel A. Bratu³

Abstract

One piece implants were introduced nearly a hundred years ago but their utilization is limited due to technical problems and lack of clinical trials to evaluate the primary stability. In this study, we report about the long-term soft tissue healing after one piece implant placement.

Methods

Forty one implants were placed in mandible. Thirty patients were included in this study. All implants were placed following the manufacturer protocol, with the use of a 3.0 mm (length 10 and 13 mm) bar-implant. Bar-implant was used at the end of the surgery. The implants were placed following the manufacturer protocol, with the use of a 3.0 mm (length 10 and 13 mm) bar-implant. Bar-implant was used at the end of the surgery.

Results

All implants showed good clinical stability, two years after loading. Soft tissue adherence was good on the implant's neck. There was no irritation or bleeding after two years. The mean bone loss was 1.8 mm at the end of the study. Soft tissue healing was observed. The mean bone loss was 1.8 mm at the end of the study. Soft tissue adherence was very good on the implant's neck. In cases with more advanced ridge, however, showing more advanced bone loss, soft tissue healing was still observed. In cases with more advanced ridge, however, showing more advanced bone loss, soft tissue healing was still observed.

Conclusion and discussion

Soft tissue healing around one-piece implants with a rough surface is appropriate for soft tissue healing. The healed gingiva around one-piece implants with a rough surface is appropriate for soft tissue healing. The healed gingiva around one-piece implants with a rough surface is appropriate for soft tissue healing. The healed gingiva around one-piece implants with a rough surface is appropriate for soft tissue healing. The healed gingiva around one-piece implants with a rough surface is appropriate for soft tissue healing.
Soft Tissue Healing Around One Piece Implants: A Two Years Retrospective Clinical Study

Olimpiu Kanarca1, Radu Sliea, Emanuel A. Bratu1

Abstract
One-piece implants were introduced many years ago however in the last years they were accepted as a treatment option for specific clinical situations. The aim of the study was to evaluate the probing depth values around one-piece screw implants with a rough surface neck two years after loading.

Materials and Method
One-piece implants (MIS Uno, MIS Implants, Bar-Lev, Israel) with diameter of 3.0 mm (length 10 and 13 mm) were clinically evaluated in 40 patients in different clinical situations. The implants were placed following the manufacturer protocol, with the use of a Parodontometer AESCULAP measuring device. Note the perfect soft tissue healing after removal of the provisional restoration.

Results
All implants showed a clinical stability, two years after loading. Soft tissue adhesion on the implant was monitored. Probing depth measurements were performed by two persons. The mean probing depths were evaluated in twenty-three patients in various clinical situations. The implants were followed for two years after loading. Bone and soft tissue values were evaluated using panoramic x-rays and soft tissue healing was observed. The mean bone loss was 1.8 mm at the end of the study.

Conclusions and discussion
One-piece implants (MIS Uno, MIS Implants, Bar-Lev, Israel) with diameter of 3.0 mm (length 10 and 13 mm) were clinically evaluated in 40 patients in different clinical situations. The implants were placed following the manufacturer protocol, with the use of a Parodontometer AESCULAP measuring device. Note the perfect soft tissue healing after removal of the provisional restoration.

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Soft Tissue Healing Around One Piece Implants: A Two Years Retrospective Clinical Study
Olimpiu Karancsi, Radu Sita, Emanuel A. Bratu

Abstract
One-piece implants were introduced many years ago; however in the last years they were accepted as a treatment option for specific situations. The implants were followed for two years after loading. Soft tissue adherence was observed. The mean bone loss was 1.8 mm at the end of the study. All implants showed good clinical stability two years after loading. Soft tissue adherence was accepted as a treatment option for specific situations.

Methods
Forty one-piece dental implants were placed in different clinical situations. The implants were followed for two years after loading. Soft tissue adherence was evaluated using panoramic x-rays and clinical measurements.

Results
All implants showed good biological stability, two years after loading. Soft tissue adherence was observed. However, clinical situations were different. The clinical situations were divided into three groups according to the clinical outcome. The results show that one-piece implants are a good treatment option for specific situations.

Conclusions
One-piece implants are a good treatment option for specific situations. However, clinical situations were different. The clinical outcomes were divided into three groups according to the clinical outcome. The results show that one-piece implants are a good treatment option for specific situations.

Materials and Method
One-piece implants (UNO implants, 3m, USA) were inserted in different clinical situations. The implants were followed for two years after loading. Soft tissue adherence was observed. The clinical situations were divided into three groups according to the clinical outcome. The results show that one-piece implants are a good treatment option for specific situations.

Surgical Procedure
The implants were inserted in different clinical situations. The implants were followed for two years after loading. Soft tissue adherence was observed. The clinical situations were divided into three groups according to the clinical outcome. The results show that one-piece implants are a good treatment option for specific situations.
Results

The healing process of the implant is critical in determining the success of the implant. The bone level around the implant neck should be maintained during the healing period. Therefore, the use of implants with a polished neck surface is recommended.

Discussion

The clinical experience with these implants was presented. The implants were inserted with a ratchet, until final position. The transplants were simple in case of good bone conditions, but this is also linked with soft tissue adherence. Very often, patients refuse surgery due to aesthetic reasons and mandibular narrow ridges, incisors, maxillary lateral incisors especially for type is that of mandibular lateral and central incisors.

Conclusion

The goal of treatment is to maintain peri-implant tissue health and function. Therefore, the use of one-piece implants with a polished neck surface is recommended. However, the choice of implant should be based on the individual patient's needs and preferences.
The bone of patients differs significantly in size and shape, which necessitates the use of different types of implants. The treatment options for dental implants have increased significantly, thereby offering new perspectives. The basic principle of this method is that placing a fully restored implant results in results that are indistinguishable from natural teeth, and the soft tissue surface opposite the implant is ideal for a natural result. A wide range of implant sizes and shapes allows for a good proportion between the implant and the supporting structures. The implant sizes available are not only intended for different bone structures, but also for the different depths of the soft tissues.

Conclusions

The study demonstrated that the type of implant selected depends on the structure of the bone for which it is intended. A wide variety of different implant types have been available for the last 5 years, along with new implant technology and techniques. A variety of different implant types are currently available, and the type of implant selected depends on the structure of the bone for which it is intended. A wide range of implant sizes and shapes allows for a good proportion between the implant and the supporting structures. The implant sizes available are not only intended for different bone structures, but also for the different depths of the soft tissues.

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