



Implant Maintenance and Home-Care: Titanium and Ceramic Implants Susan S. Wingrove BS, RDH

Highlights of ACP Clinical practice guidelines for Implant borne restorations

- Use **glycine powder air polishing system or powder streaming device.**
- Use instruments **compatible with the type & material of the implants**, abutments, restorations.
- When clinical signs indicate need for occlusal devise, educate & fabricate an occlusal devise to protect fixed restorations and Implants.
- Patients with restorations should be advised to use oral hygiene aids; dental floss, water flosser, air flossers, interdental cleaners, and electric toothbrushes.
- Recall provided **at least every 6 months-**

*Bidra A., Daubert D., Garcia L., Kosinski T., Nenn C., Olsen J., Platt J., **Wingrove S.**, Chandler N. & Curtis D. **Clinical Practice Guidelines for Recall & Maintenance** of Patients with Tooth-Borne & Implant Borne Dental Restorations. 2016

Wingrove 5 Step Implant Assessment*

1. **Visual Soft Tissue** - Assess the tissue that surrounds the implant referred to as the perimucosal seal for any inflammation. Record intra-oral image & **gingival index 1-3**; Mild, Mod, Severe
2. **Probe & Palpate for Signs of Infection. Probe-** Use a plastic, metal, or titanium probe, 1mm markings, gently **with 0.25 Newtons (N) of pressure**, BOP '0' healthy & "1" for bleeding.
Base-line measurement at one year, after loaded, in-function restoration/ prosthesis.
Palpate - Place a finger on buccal & lingual sides of the ridge. Keep pressure on the tissue, move toward restoration in a milking action, record pus or blood, inflammation, or infection present.
3. **Assess for Residue (Calculus, Cement, or Instrument)-** Use implant specific floss or dental tape. Insert mesial, distal, and crisscross. Move in a shoeshine motion in the peri-implant crevice. Check the floss, if frayed or blood on the floss, the implant will need debridement.
4. **Assess for Mobility, Pain, and/or Occlusion-**Place two mirror handles on either side of the implant restoration & check for any mobility present. If present ask the patient if they are experiencing any pain, VAS scale of 1-10. **Note-**Doctors check occlusion at every prophylaxis visit.
5. **Assess Bone Level** -Radiographic Image to assess health of the implant, measure crestal bone level around the implant(s) at least once a year. Compare to **One-year base-line after loaded.**

Wingrove Recommended Professional Maintenance Protocol

- ✓ Place retraction/ Identify biofilm
- ✓ Remove any biofilm. Use powder streaming device on all dentition or polish first
- ✓ Assess the area for calculus. If calculus is present, **debride titanium scaler (28-30 RWH)**
- ✓ Lavage to the peri-implant area with an ultrasonic to remove any excess oral debris,
 - **use only Titanium, PEEK or PEI ultrasonic tips if need to use an ultrasonic to debride**
- ✓ Polish the restoration/ prosthesis with non-abrasive prophylaxis paste (i.e., Silica) to remove stain.
- ✓ Apply antimicrobial Varnish (Ex: Cervitec® Plus Ivoclar) implant cervical area, last up to 3 months.
- ✓ Schedule in-office implant maintenance every 3 mon. first year & recare at **least every 6 months.**

Wingrove Protocol for Debridement Based on Implant Design, Access, & Prosthesis

Ex: Wingrove Titanium Implant Scalers (PDT). RWH 28-30. **Use short horizontal strokes to debride**

Narrow- Diameter Implants: Scale with **Wingrove L3-4**

Wide-Diameter Implants: Scale with **Wingrove B5-6**

Specialty Areas - Exposed implant threads: select a shorter radius blade tip of **Wingrove Ti L5 mini** and use horizontal side-to-side motion strokes one thread at a time with gentle pressure.

Under Hadar bar: use short sweeping strokes with **Wingrove Ti N128**.

Cement or residue: select **Wingrove Ti N128** and use short horizontal strokes to remove residue.

Cervitec Plus Varnish – Cervitec® Plus (Ivoclar)- Bio-compatible implants.

1% Chlorhexidine **Diacetate & Thymol**, application clear, **effective bacterial control up to 3 months.**

Application Steps: Rinse & dry, apply varnish, leave to dry 30 seconds. Do not rinse after application, ask the **patient to wait 1 hour to eat or drink.**

IMPLANT HOME-CARE

Healthy Implant Home Care Protocol

- **Brush** with low-abrasive neutral pH dentifrice –Recommended electric toothbrush with Implant specific heads (i.e., Oral-B Targeted Clean) and neutral pH dentifrice **twice daily.**
- **Use a Water flosser twice daily.**
- **Use rubber tip stimulator once daily** for keratinized tissue **once daily**
- **Rinse non-alcohol antimicrobial rinse** or 1:10 parts water in water flosser unit **twice daily.**

*Wingrove S. Peri-Implant Therapy for the Dental Hygienist: Second Edition 2022

Peri-Implant Mucositis- Reversible inflammation, affects only the soft tissues, no sign of bone loss.

Detect and Diagnose: -Record image & BOP 1 **Treat:**

- Use powder streaming device with erythritol or glycine powder subgingivally.
- Debride with proper titanium tools for implant design or prosthesis if calculus present.
- Apply antimicrobial gel or varnish
- OHI: power toothbrush, water flosser, and anti-microbial mouth rinse 2x daily,
- Re-evaluation is critical in 3-6 weeks.

Peri-Implantitis- Inflammatory reaction w/bone loss affects soft tissue & bone around implants.

Assessment	Classification of Peri-Implantitis	SW Comments
Early	BOP and/or exudate Bone loss < 25% of the implant length**	Monitor and maintain
Moderate	BOP and/ or exudate* Bone loss 25% -50% of the implant length**	Regenerative TX
Advanced	BOP and/or exudate* Bone loss > 50% of the implant length**	Regenerative TX
<small>Note: *Bleeding and/or exudate on two or more aspects of the implant.**Measure on radiographs ideally from baseline radiograph and at time of prosthesis loading to current radiograph. IF baseline not available, the earliest available radiograph following loading.</small>		

* *Modified by SW/ Froum SJ, Rosen PS. 2012 A proposed classification for peri-implantitis Int. J Perio Res Dent

Please visit Susan’s Website: Wingrovedynamics.com Download: Articles, Calendar, and Videos.

Textbook: Wingrove Implant Maintenance **Textbook: Peri-implant Therapy for the Dental Hygienist Second Edition (2022)** Amazon or Wiley.com/ Link for more information on ordering Second Edition www.wiley.com/buy/9781119766186.

© Susan Wingrove / Wingrove Dynamics LLC

Susan S. Wingrove • sswinrdh@gmail.com / Wingrovedynamics.com