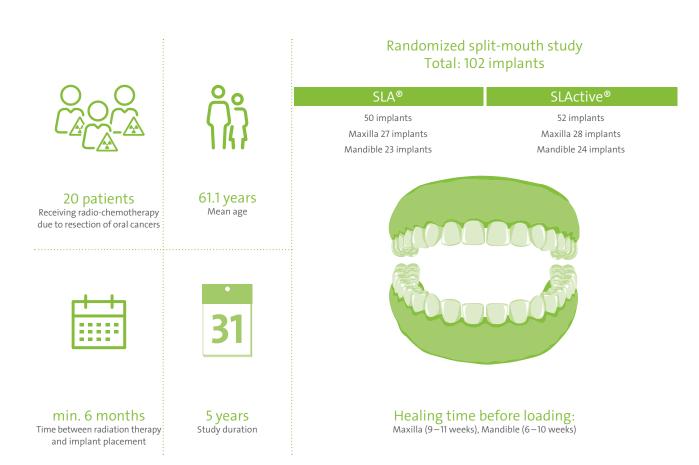
Study design¹

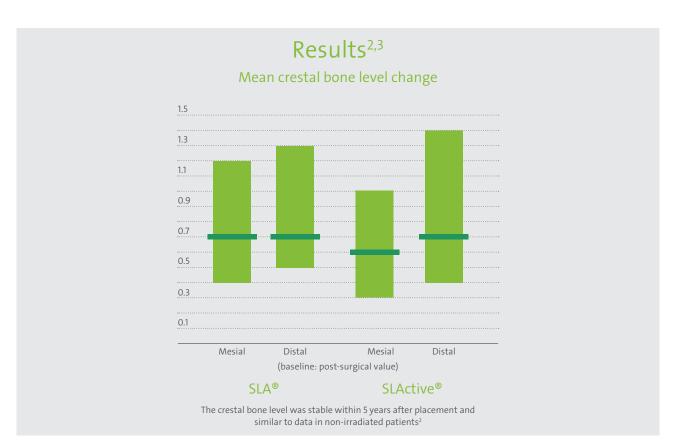


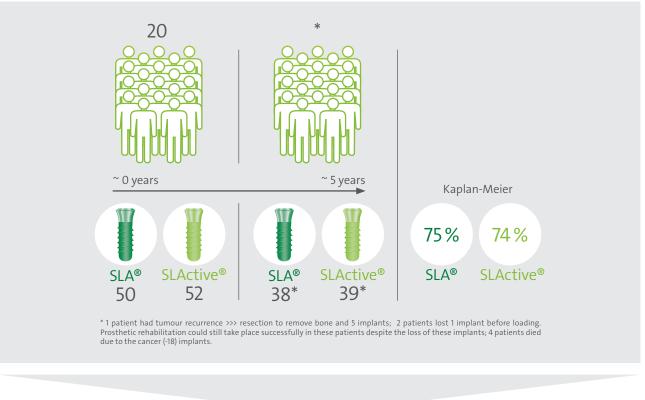
Aim

months

after the initial 12-month loading period up to 5 years.

years





Clinical considerations^{2,3}

- SLActive® Implants can be used in irradiated patients with a high predictability of success. • At the time of the patients' deaths, all the remaining implants were still in place in these patients
- and considered successful according the Buser success criteria4.
- Taking into account that the clinical performance and longevity of their implants would not be any different to the other implants in the study, had the patients survived, the implant survival rate would be: 96% for SLA® | 100% SLActive®.
- The crestal bone level was stable within 5 years after placement.
- Lower implant survival rates in patients with oral cancer may be associated with a higher mortality rate rather than a lack of osseointegration.



^{1.} Heberer S, Kilic S, Hossamo J, Raguse JD, Nelson K. Rehabilitation of irradiated patients with modified and conventional sandblasted acid-etched implants: preliminary results of a split-

mouth study. Clin Oral Implants Res. 2011 May;22(5):546-51. doi: 10.1111/j.1600-0501.2010.02050.x.

Nack C, Raguse JD, Stricker A, Nelson K, Nahles S. Rehabilitation of irradiated patients with chemically modified and conventional SLA® implants: five-year follow-up. J Oral Rehabil. 2015 Jan;42(1):57-64. doi: 10.1111/joor.12231. Nelson K. Rehabilitation of irradiated patients with chemically modified and conventional SLA® implants: a clinical clarification. Letter to the editor. J Oral Rehabil. 2016 Submitted.
 Buser D, Weber HP, Braegger U. The treatment of partially edentulous patients with ITI hollow-screw implants; presurgical evaluation and surgical procedures. Int J Oral Maxillofac Implants. 1990;5:165–174.