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TITLE: Use of miniimplants for stabilization of totally mandibular dentures in geriatric patients

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Today, totally edentulism in older patients is delayed due to oral prevention. However, in the elderly, the physiological state reduces patient's ability to adapt to oral rehabilitation and gets worse the patient's oral control. Consequently, elderly edentulous subjects avoid many types of foods which can lead to substantial nutritional consequences. Actually, the treatment of reference in prosthodontic mandibular rehabilitation are complete dentures retained by implants. In fact, the symphyseal region generally allows implant treatment even when the mandibles are strongly resorbed. However, in geriatrics patients, a complex surgical procedure and its consequences could compromise standard implant rehabilitation. In addition, the high cost of implant use can be an additional barrier. In this context, the use of geriatric miniimplants could be an interesting treatment option. The surgical procedure was found to be less invasive, less expensive, and more simple than the conventional procedure. This protocol could be used systematically to treat full edentulism in geriatric patients. Long-term monitoring and the evaluation of the reliability of this type of rehabilitation should be undertaken.

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TITLE: Dental implants in patients with osteoporosis

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Life expectancy has increased considerably over the past 40 years due to the advance in medicine. Therefore, increasing the amount of elderly patients which demand an improvement in their quality of life as well as their oral health. Many of them request the possibility of restoring their dentition with osseointegrated implants and, in such cases, the advance age will not be an impediment for such treatment. The treatment success depends on the overall health status and good oral health of the patient. It is critical to have a complete comprehensive examination and treatment plan accordingly to the needs of the patient. The wide range of pathological situations that elderly people usually manifest, make us modify the implant rehabilitation planning, but currently, there is a reduced number of definitive contraindications. Numerous diseases can affect the bone metabolism such as, osteoporosis, specifically in postmenopausal women, oncologic patients, Paget disease, hormonal disturbance and drug adverse effects. As a consequence of all of these pathologies, the bone density and micro architectural bone structure have been seriously affected and will represent an important risk factor in our treatment planning. The presence of some of these pathologies can be even more dangerous when the patient has been or is still being treated with bisphosphonates. This might be one of the most risky situations that the provider might encounter. Even though bisphosphonates are not an absolute contraindication, this type of medication presents certain characteristics that could derivate into osteonecrosis of the jaw bone. Recent published studies showed favorable results regarding bone formation around dental implants in patients with osteoporosis. There was no difference between dental implants in normal bone and dental implants in osteoporotic bone.

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TITLE: Immediate loading in the treatment with implants of the geriatric patient

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Over the years, there have been major advances in the field of dentistry, because of the increased in life expectancy of patients, which has increased the demand for treatments aimed at improving the quality of geriatric