

Effective implant maintenance and cleaning protocols

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There is a significant body of work regarding the complexities of dental implants and their maintenance. The intent of this article is to provide a brief overview of the implant protocols we have found to be most effective in our practice.

Dental implants and their abutments are made of titanium and are integrated directly into bone with no intervening periodontal ligament. Unlike natural teeth, they cannot attach to gingival fibers, but instead possess circular fibers known as the perimucosal seal, which acts as a barrier against plaque and bacteria.

Tissues around the implant are similar to that of natural teeth, may be keratinized or nonkeratinized and lined by crevicular epithelium. As a result, probing must be done gently so that the probe does not penetrate the connective tissue and reach the bone.



The first step in maintenance of the dental implant is to develop an office protocol that includes:

- Probing after placement to establish a baseline pocket depths.
- Taking an X-ray to establish baseline bone level.

Prior to beginning instrumentation:

- Evaluate tone, color, and texture of the tissue surrounding the implant.
- Gently probe, looking for pathology such as swelling, bleeding, or exudate. *Note: the patient should be referred back to the specialist for evaluation when inflammation is present.*
- Take an annual X-ray; compare bone height from the baseline radiograph.
- Check for mobility.
- Evaluate plaque levels and deposits.
- Review OHI and behavior modification

Ultrasonic instrumentation around implant abutments may be used on a low to moderate amplitude. The water acts as a lavage and gently flushes debris from the implant sulcus. Calculus that forms on the abutment is typically not firmly adhered and can be removed using light pressure. A polishing agent may be used post-instrumentation using a soft rubber cup and low-abrasive dentifrice.

In conclusion, implant maintenance plays a key role in the success of dental implants via assessment and debridement through maintenance appointments scheduled every three months.

