



## Give teeth a chance!

Are there really so many hopeless teeth? Do we think enough before extracting a tooth? In this issue of *Quintessence International* we present a systematic review of the available tooth prognostics systems and it seems that the answer to both of the above questions is no!

The available prognostics systems usually present with low prognostic values, especially when assessing diseased teeth and excluding the good prognosis teeth from the statistical analysis. Moreover, can we consider teeth with 60 to 80% survival rates over 10 years “hopeless”? Looking carefully at some of the long-term tooth survival follow-ups, one could easily observe that some of the “hopeless” teeth (and in several studies, the majority of the “hopeless” teeth) were still in function after 10 years. Furthermore, recent literature reviews and meta-analyses comparing the longevities of teeth and implants have shown that dental implants when evaluated after 10 years of service do not surpass the longevity of even compromised but successfully treated natural teeth.

When considering periodontal disease, past classic research and experience have shown that adequately treated and well-maintained patients can maintain their teeth for years with even severely advanced bone loss.

So why do we rush so fast to extract teeth? Do we really have good evidence that replacing natural teeth with dental implants will be a better

long-term solution for our patients? No, we don't!

Even if we are afraid that a periodontally diseased tooth will jeopardize the adjacent dentition, data from the literature have shown that if treated and maintained carefully, even “hopeless” teeth will not cause deterioration of the adjacent bone level.

The key to long-term success in periodontal patients starts with elimination of the disease (not the dentition), first by preventive measures, and then by comprehensive periodontal treatment followed by a strict maintenance program individually tailored to the patient. Only after stability is achieved can we turn to the rebuilding part of the treatment, which includes dental implantation. Extractions should be postponed until after periodontal treatment unless the tooth is unrestorable or diagnosed with vertical root fracture. Postponing some of the non-urgent extractions might result in a pleasant surprise when the tooth is stabilized and seems more maintainable following proper periodontal management and oral hygiene practice.

As in all fields of medicine, our own organs, even when diseased, are far better than the greatest prosthetic replacement we can offer nowadays.

Liran Levin, DMD  
Associate Editor