- Moynihan PJ. The relationship between nutrition and systemic and oral well-being in older people. J Am Dent Assoc 2007; 138:493–497.
- Ellis JS, Thomason JM, Jepson NJ, Nohl F, Smith DG, Allen PF. A randomized-controlled trial of food choices made by edentulous adults. Clin Oral Implants Res 2008;19:356–361.
- Allen F, McMillan A. Food selection and perceptions of chewing ability following provision of implant and conventional prostheses in complete denture wearers. Clin Oral Implants Res 2002;13:320–326.
- Sebring NG, Guckes AD, Li SH, McCarthy GR. Nutritional adequacy of reported intake of edentulous subjects treated with new conventional or implant-supported mandibular dentures. J Prosthet Dent 1995;74:358–363.
- Roumanas ED, Garrett NR, Hamada MO, Kapur KK. Comparisons of chewing difficulty of consumed foods with mandibular conventional dentures and implant-supported overdentures in diabetic denture wearers. Int J Prosthodont 2003:16:609–615.
- Hamada MO, Garrett NR, Roumanas ED, et al. A randomized clinical trial comparing the efficacy of mandibular implantsupported overdentures and conventional dentures in diabetic patients. Part IV: Comparisons of dietary intake. J Prosthet Dent 2001;85:53-60.
- Roumanas ED, Garrett NR, Hamada MO, Diener RM, Kapur KK. A randomized clinical trial comparing the efficacy of mandibular implant-supported overdentures and conventional dentures in diabetic patients. Part V: Food preference comparisons. J Prosthet Dent 2002;87:62-73.
- Emami E, Heydecke G, Rompré PH, de Grandmont P, Feine JS. Impact of implant support for mandibular dentures on satisfaction, oral and general health-related quality of life: A meta-analysis of randomized-controlled trials. Clin Oral Implants Res 2009:20:533–544.

- Sun Y, Roth DL, Ritchie CS, Burgio KL, Locher JL. Reliability and predictive validity of energy intake measures from the 24-hour dietary recalls of homebound older adults. J Am Diet Assoc 2010;110:773–778.
- Gjengedal H, Berg E, Bøe OE, Trovik TA. Self-reported oral health and denture satisfaction in partially and completely edentulous patients. Int J Prosthodont 2011;24:9–15.
- MTV-06. Food composition table, 2006. http://matportalen.no/ matvaretabellen. Accessed 11 June 2007.
- MPD. Food on data. http://matportalen.no/Emner/matpadata. Accessed 11 June 2007.
- Becker WLN, Pedersen AN, Aro A, et al. Nordic Nutrition Recommendations 2004. Integrating nutrition and physical activity. Nord 2004;13.
- Johansson L, Solvoll K, Bjørneboe GE, Drevon CA. Under- and overreporting of energy intake related to weight status and lifestyle in a nationwide sample. Am J Clin Nutr 1998;68:266–274.
- Bartali B, Turrini A, Salvini S, et al. Dietary intake estimated using different methods in two Italian older populations. Arch Gerontol Geriatr 2004;38:51–60.
- Lee JS, Weyant RJ, Corby P, et al. Edentulism and nutritional status in a biracial sample of well-functioning, communitydwelling elderly: The health, aging, and body composition study. Am J Clin Nutr 2004;79:295–302.
- Bradbury J, Thomason JM, Jepson NJ, Walls AW, Allen PF, Moynihan PJ. Nutrition counseling increases fruit and vegetable intake in the edentulous. J Dent Res 2006;85:463–468.
- Gunji A, Kimoto S, Koide H, et al. Investigation on how renewal of complete dentures impact on dietary and nutrient adequacy in edentulous patients. J Prosthodont Res 2009;53:180–184.
- Locher JL, Ritchie CS, Roth DL, Sen B, Vickers KS, Vailas LI.
 Food choice among homebound older adults: Motivations and perceived barriers. J Nutr Health Aging 2009;13:659–664.

Literature Abstract

Long-term results of mandibular implants supporting an overdenture: Implant survival, failures, and crestal bone level changes

The objective of this study was to summarize the long-term clinical observations of edentulous patients treated with two or three mandibular implant-supported overdentures. From 1984 to 1997, edentulous patients were consecutively admitted for treatment with mandibular implant overdentures. The treatment plan was to connect the dentures to only two implants by means of single ball anchors or bars; in patients with special oral conditions, three implants would be placed. Implant failures were described according to clinical signs at the time of removal and related to the patient's specific history. Crestal bone measurements were obtained using computer software (Dimaxis Pro version 4.3.2, Planmeca). The results showed that 147 completely edentulous patients (45 men and 102 women) with 314 implants were evaluated for 10 to 24 years. Of these, 101 patients were still available for clinical review. Thirteen implants failed during the observation period, resulting in a cumulative survival rate of 85.9% after 24 years. The reasons for removal of implants were peri-implantitis (2 implants) and mobility (11 implants). Mean crestal bone loss was 0.54 ± 0.7 mm per implant site after a mean observation period of 16.5 ± 3.9 years. The duration of loading had a statistically significant effect on crestal bone loss. The authors concluded that the data exhibited a satisfactory survival rate for interforaminal implants. An individual analysis of implants with late failures did not show a typical failure pattern, but loss of implants without signs of infection was more frequent than loss of implants with signs of peri-implantitis.

Ueda T, Kremer U, Katsoulis J, Mericske-Stern R. *Int J Oral Maxillofac Implants* 2011:26:365–372. **References:** 37. **Reprints:** Prof Dr Regina Mericske-Stern, Department of Prosthodontics, School of Dental Medicine, Freiburgstrasse 7, CH-3010 Bern, Switzerland. Email: regina.mericske@zmk.unibe.ch—*Arthur S. Sham, Hong Kong*

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