

The 2014 IJP/Karlsruhe Workshops for Young Prosthodontic Educators: The Edentulous Predicament



Participants and different faculty groups at the recent (top) Baden-Baden and (bottom) Beijing YPE Workshops, made possible by the Foundation for Oral Rehabilitation.

The historic 1982 Toronto Conference on Osseointegration in Clinical Dentistry introduced Dr Per-Ingvar Brånemark's unique dental implant protocol for managing edentulism via the biotechnological breakthrough of osseointegration. Since then, the technique evolved in ways that also addressed the needs of partially edentulous patients with impressive, documented results. Subsequent innovations in imaging and surgical site development for implant placement, together with novel developments in implant components and computer-aided design/computer-assisted manufacture (CAD/CAM) technology, now tempt both dentist and patient to seriously consider complete denture management of edentulism as virtually passé. And even more recently, implant therapy is also promoted as a virtual panacea for the benign neglect that has characterized so many about-to-be edentulous predicaments. It may now be opportune to regard a quasi-exclusive osseointegration treatment role as a contrived "implantocracy"—the promotion of an increasingly and frequently asserted therapeutic narrative driven by these convictions:

1. Implants rarely fail to osseointegrate and are infrequently accompanied by any consequential surgical morbidity. Moreover, any surgical failure is readily reversible through a repeat surgical intervention.
2. Most targeted host bone implant locations can now be readily "site improved" to ensure favorable prognoses similar to those encountered in native bone.
3. Numerous implant systems claim to have optimal microscopic and macroscopic design features, which are easily combined with correct clinical handling to permit routine immediate loading in most surgically suitable sites.
4. Routine implant therapy is the new standard of care for prosthodontic patients—a compelling, self-serving mantra for numerous circuit educators.

However, the need for viewing the edentulous predicament in a far broader health and social responsibility context is a strong reminder that our discipline's traditional axioms of professional skills and humanitarian commitment cannot be reduced to tidy formulas or rigidly ordered credos. It is time for a renewed discipline-driven ethos to identify and assert what might very well be unnecessary and misguided interventions.

These concerns underscored the educational focus of our recent IJP/Karlsruhe Workshop for Young Prosthodontic Educators (YPEs). Since their inception more than a decade ago, these biennial workshops on treating prosthodontic patients sought open and provocative debate among its selected participants from the

doi: 10.11607/ijp.2015.3.YPE

global community of YPEs and are guided by a unique pro bono faculty selected from the ranks of the IJP's editorial board. Each workshop's focus is driven by specifically selected case histories—patients' clinical narratives and needs—that need to be reconciled with diverse health, socioeconomic, and professional skill availability determinants. The IJP's editorial board, with its distinguished scholarly pedigree, provides academic guidance. The October 2014 workshop selected two patients whose clinical expectations and challenges included (1) the spectrum of advanced age, long-standing edentulism, and adverse morphologic changes in an edentulous female patient; and (2) a “would-be” edentulous male patient who interpreted current promotion of implant therapy success as being a few immediately loaded implants that would be the panacea for his current state of dental neglect.

The following program outline, the two selected case histories, plus abstracts of the background presentations are included in this journal issue as per past workshop published reports. We seek to share our workshop information with other clinical educators from around the world who may find it useful to recruit the material for their own teaching programs. They will also have the opportunity to modify their narrative choices so as to ensure the strongest resonance possible for their own graduate residents.

Scholarly endeavor such as these workshops cannot take place without the generosity and vision of sponsoring companies. All four past YPE workshops

held in Europe were the direct result of Nobel Biocare's enlightened and much-appreciated support; and the 2014 program was specifically expedited by the Foundation for Oral Rehabilitation (FOR), established by Nobel Biocare in 2012. Additional workshop support to cover selected participants' attendance expenses was again provided by the International College of Prosthodontists. This type of educational initiative could not occur without the invaluable endorsement and support of both organizations, plus the exceptional commitment of a pro bono faculty and the superb organizational assistance of the Karlsruhe Academy and its director, Winfried Walther.

It should also be noted that the YPE workshops were conceived of as a “moveable feast”—a synthesis of fact and information that offers much scope for intellectual provocation and ensuing debate in diverse global educational settings. Consequently, three additional workshops have also already been held in Asia—two in Beijing, China, in partnership with Professor Yongsheng Zhou, and one in Seoul, Korea, with Professor Sang Wan Shin. The most recent Beijing workshop took place immediately following the October Baden-Baden one and was also made possible by the FOR. It is hoped that this global scholarly initiative will be welcomed by more international colleagues willing to host a YPE workshop.

George Zarb
Editor-in-Chief

Copyright of International Journal of Prosthodontics is the property of Quintessence Publishing Company Inc. and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.