

Short communication

On May 24–25, 2002, a Symposium was held at McGill University in Montreal, Quebec, Canada, during which scientists and expert clinicians presented 15 papers on the efficacy of overdentures for the treatment of edentulous patients. Strong emphasis was given to evidence from randomized controlled trials in which mandibular 2-implant overdentures were compared to conventional dentures.

A draft consensus statement was circulated to all presenters, as well as to subjects who participated in some of the clinical trials other edentulous individuals who attended the Symposium. The statement was modified during the meeting in light of their comments.

We hope that the final version of the consensus statement will serve as a guideline for clinicians and patients, and that it will stimulate discussion within and between professional organizations, health authorities and third party payers.

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The McGill consensus statement on overdentures;

Mandibular 2-Implant overdentures as first choice standard of care for Edentulous Patients; A panel of experts who work in areas relevant to the consensus question, as well as patients and clinical trial participants who have experience with dental prostheses, prepared this Consensus Statement.

It is based on (1) presentations given by these experts during a 1.5-day session; (2) available scientific knowledge on this topic; and (3) personal experience of the patients/participants.

This statement is an independent report

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Introduction

Most industrialized countries are experiencing a rapid decline in tooth-loss. However, tooth loss increases with age, so the number of edentulous people within these societies will continue to increase for several decades because of the increase in mean age. Complete maxillary and mandibular dentures have been the traditional standard of care for edentulous patients for more than a century. Complete denture wearers are usually able to wear an upper* denture without problems, but many struggle to eat with the complete lower denture because it is too mobile. Scientific studies have been carried out over the past decade to determine if the benefit of a mandibular 2-implant overdenture is large enough to propose it, rather than the conventional denture, as the first treatment option.

- It has already been established through longitudinal clinical studies, structured reviews and consensus conferences, that the survival of root form titanium implants is very high in the anterior mandible and that the incidence of surgical complications is very low. Furthermore, it has been shown that implants reduce the rate of resorption of the residual ridge in the anterior mandible.

• Patient perspective;

- Conventional dentures rely upon the residual alveolar ridge and mucosa for sup-

port and retention. Many patients have problems adapting to their completedentures, and especially to the mandibular prosthesis. The widespread use of denture adhesives is one indication that these prostheses are inadequate for many denture wearers. Numerous people wearing conventional dentures report that they cannot eat many foods, particular those that are hard or tough. This forces them to change their diets in unhealthy ways and causestheir nutrition to be poorer than that of people with natural teeth.

- Mandibular 2-implant overdentures have been shown to be superior to conventional dentures in randomized and nonrandomized clinical trials that ranged in duration from 6 months to 9 years. Regardless of the type of attachment system used (bar, ball, magnet), participants are significantly more satisfied with 2-implant overdentures than with new conventional dentures. Patients find the implant overdentures significantly more stable, and they rate their ability to chew various foods as significantly easier. In addition, they are more comfortable and speak more easily with implant overdentures.

- Studies of several populations have shown that ratings of quality of life are significantly higher for patients who receive 2-implant overdentures (opposing complete maxillary conventional dentures) than for those with new conventional dentures.

- There is emerging evidence that people who receive mandibular 2-implant overdentures modify their diets, while

those who wear new conventional dentures do not. There is also preliminary evidence that this improves their nutritional state. Such improvements may have a strong positive impact on general health, particularly for senior adults who are vulnerable to malnutrition.

• Cost;

- Moreover, there is now conclusive evidence that oral implants may be placed in a single-stage procedure, which reduces cost. Nevertheless, the total cost of providing mandibular 2-implant overdentures is certainly greater than conventional dentures. However, the difference is not as large as one might expect and should be made affordable to everyone who is edentate.

• Conclusions;

- The evidence currently available suggests that the restoration of the edentulous mandible with a conventional denture is no longer the most appropriate first choice prosthodontic treatment. There is now overwhelming evidence that a 2-implant overdenture should become the first choice of treatment for the edentulous mandible.

- This statement is supported by published studies which form the basis of the material to be published in *Mandibular 2-Implant Overdentures as Minimum Standard of Care for Edentulous Patients*, JS Feine and GE Carlsson, Eds., Quintessence Publishing Chicago, In Press.