Obligation for Dentists to Inform Patients of MIMI® Treatment

The Minimally Invasive Method of Implantation (MIMI®) has become routine in dental offices as a preferred alternative to the classical method of implantation. We will present the two-piece Champions® implants for the first time at the IDS 2011 in Cologne in Germany. Recently, these high-quality, easy-to-use and cost-efficient implants have attracted a lot of attention and interest. As dentists, we must inform our patients of the MIMI® dental implant treatment, which is comparable to earlier revolutionary endoscopic and "keyhole" surgery methods. In fact, the MIMI® method has proven successful in the field of Dental Implantology for over 30 years.

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All our patients are legally entitled to safe, atraumatic minimallyinvasive surgery. The Federal Court of Justice in Germany rules that any medical intervention by the dentist fulfills the legal criteria for the charge of battery, according to the Penal Code § 223.

Dentists are increasingly exposed to civil and criminal liability for failure to fully inform patients of the treatment and treatment alternatives such as MIMI® therapy as a possible alternative to the classical implantation method, and/or for failure to transfer the patient to a MIMI® specialist if needed, and/or for refusal to perform a necessary MIMI® diagnosis and treatment.

Patients are suitable for the MIMI[®] dental implant treatment if parameters include the following:

- Vertical bone height of at least 4 mm in the maxilla
- Vertical bone height of at least 6 mm in the mandible
- Transversal bone width of at least 3 mm.

No more bone is needed since bone can be laterally condensed intra-operatively.

Actually, some people still wrongly believe that any dental implantation is exceptional and complicated and that it almost always involves a costly and time-consuming bone augmentation. In addition, they wrongly assume that this treatment can only be performed by specialists in high-technically equipped "lege artis" dental clinics. According to dental liability insurances, there have been several liability cases in the last years because patients have not been informed of MIMI[®] as a treatment alternative.

Dentists can be sued for failure to inform patients of MIMI® before surgery. Dentists can also face penalties for performing an external sinus lift when there is a vertical bone height of approx. 8 mm and a horizontal bone width of 3 mm, even though this procedure – for whatever reason-was a state-of theart one some 15 years ago and has still been performed for decades.

Furthermore, the dentist has the obligation to fully inform the patient of the treatment and treatment options, in a manner that allows the patient to become involved in treatment decisions. Informed consent must respect the patient's right of self-determination and freedom of decision making.

For instance, an unnecessary medical intervention by the dentist such as a Tatum sinus lift fulfills the legal criteria for the charge of battery.

Providing optimal dental care for all patients is our priority.

2010 – Statement by Prof. Dr. Reiner Gradinger and Consequences for Dental Offices

Prof. Dr. Reiner Gradinger, the President of the German Society of Surgery, reproached doctors and the clinic administration for medical malpractice. "There is an increasing commercialization in medicine: clinics and practices are performing unnecessary medical interventions to make exorbitant profits," Gradinger told FOCUS.

"Putting Profits Before Patients" was one of the main discussion topics with the medical director of the "Klinikum Rechts der Isar" in Munich, Germany (the university hospital of Munich) during the Surgery Conference in Berlin, Germany, last year.

Is it Different in Our Field?

I wish more professional organizations would focus more on the benefit of our patients. Almost all conferences are sponsored by the industry, which influences contents. Sometimes, maximally invasive therapy is recommended as "standard therapy" and as a "treatment guide" for no clear dental indication, which is mainly beneficial for the industry and opinion makers!

In my view, it is far more important to focus on the routine dental care performed by economically independent Implantologists (approx. 8000 dentists and oral and maxillo-facial surgeons) in the dental office and the benefits for the patients instead of the amount of profit that can be made from it.



*"*You'll never attain it unless you know the feeling"

Some dentists fear that actually, they will not see the bone if they implant according to MIMI[®]. Therefore, they believe that the gingiva has to be incised. However, through the BCC (Bone Cavity Check), you can feel the bone, which means you can proceed with the implantation without any problems.

"You'll never attain it unless you know the feeling" (in German: "Wenn ihr's nicht erfühlt, werdet ihr's nicht erjagen") is a quote by Johann Wolfgang von Goethe. Of course, Goethe did not know the tools needed to perform a MIMI[®] implantation at that time!

The transgingival procedure during a MIMI[®] implantation results in less postoperative pain and swellings, and the treatment has proven to be beneficial for the patient even after decades (with no peri-implant craters).

MIMI®-BCC – Bone Cavity Check

Minimally invasive flapless surgery means: preserving the periosteum to a maximum.

Studies have shown that periimplantitis or peri-implant craters can be caused by an iatrogenic periosteum injury during surgery due to a mucoperiosteal flap, which can lead to poor peri-implant bone nutrition.

In order to check the whole bone cavity, you can use a sterile "KKK" ("BCC") probe and make a "BCC" (Bone Cavity Check) by checking the small-diameter conical bone cavity for hardness of bone in all five dimensions. In this way, you can feel and check the bone without the need to actually see it.

Using self-tapping implant systems is quite risky because you drill the first crestal third of the bone cavity, and you cannot check the implant placement well, for example in the apical third of the cavity.

Regarding the drills, the twist/ cylinder drill (conventional system) can be distinguished from conicalshaped triangular drills such as the Champions® system. In order to place a Champions® implant, you have to prepare the whole bone cavity, check it, and then you can place the implant! For instance, you cannot insert the implant more deeply in the D2 bone than the drilled bone cavity depth. In addition, you can use excellent, easy-to-use and low-cost Prep-Caps, which can be cemented and which allow to compensate titanium, zircon or WIN! onepiece implant divergences up to 40 degrees. Then, impression copings and laboratory analogues are not absolutely necessary. A dream for us as dentists has now come true: We can implant and prepare a "tooth". (Fig. 1 - 4)

Furthermore, do not confuse MIMI[®] with the so-called "Mini"-implants, which have a diameter of less than 3 mm and on which only prostheses can be fitted.

In contrast to "Mini"-implants, Champions® implants (Ø 3 - 5.5 mm) can be supported by removable as well as fixed prosthodontic restorations (these implants are available on commission in 50 lengths, diameters and shapes). According to a recent study at the university in Cologne, the Champions® implants have one of the best surfaces.

The same goes for the previously mentioned MIMI[®] two-piece Champions-(R)Evolution[®] implants, which will be presented at the IDS 2011.



Fig. 1 - 4: The bone is checked in all five bone dimensions: just one conical triangular drill is used for a minimally-invasive drilling in the maxilla. Fig. 2 shows how the "BCC" is made. Fig. 3 shows the finished implantation and Fig. 4 the preparation with the cemented Prep-Caps.







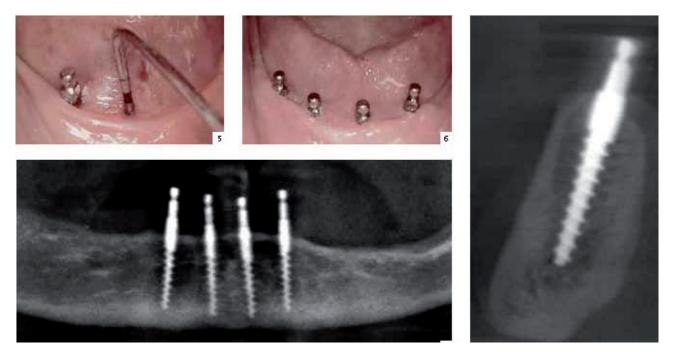


Fig. 5 - 8: MIMI[®] surgery is becoming more and more integrated into dental care for elderly patients and/or patients who are at risk because in most cases, almost no complications have been described during and after MIMI[®] surgery. It is very important to proceed correctly and check the bone cavity with the "KKK" ("BCC") probe before implanting with a torque between 40 and 70 Ncm. In addition to the one-piece Champions[®] implants, the two-piece Champions (R)Evolution[®] implants will be shown at the IDS Fair.

Shorter Treatment Time and Cost Reduction by 50%

Both for the practice and for the patients, shorter treatment time and cost reduction by about 50% are the main reasons for this enormous success of the Champions® systems, developed in Germany, in the last five years. Many patients are more and more interested in this system, and the media, the radio, the television and the press, for example "Yello", are more and more interested in providing information on this current procedure with this new implant system.

For instance, the success of the dental implant treatment of two patients in an airplane in Germany in 2010 suggested that at least 80% of all implantations were uncomplicated, that no high-tech equipment was needed in the dental office, and that any dentist could perform a dental implantation. A lot of dentists and patients were enthusiastic about this idea. Moreover, the MIMI[®] Info homepage site is one of the sites most visited by patients in Germany.

Summary

Our goal is to perform minimally invasive dental implantations and apply effective, state-of-theart methods. In the interest of preserving the continuity of care for the patient, these treatment methods should be discussed between independent professional associations and the industry and also in politics.

In addition, patients must be informed of MIMI[®] by the dentists prior to treatment. Failure to inform patients of treatment options such as MIMI[®] can result in a lawsuit.

Since we can perform the MIMI[®] surgery with the corresponding MIMI[®] dental tools and systems in many cases, a standard gingiva incision is usually not necessary. Furthermore, complicated risky Tatum sinus lifts can be avoided. Moreover, you do not need two to three surgery sessions for a MIMI[®] procedure.

Recently, the industry has been convinced of DVT navigated Implantology, and it has emphasized that it is "minimally invasive". However, this is not really true because you cannot drill transgingivally (perform a minimally invasive drill) very well with twist or cylinder drills. In this case, bone might not be laterally condensed. Moreover, navigation programs do not consider bone condensing as a dynamic process instead of a static one during the MIMI[®] implantation.

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