

# Courses for specialists in oral implantology 2022/2023





Dear colleagues,

This little booklet will provide you a lot of facts about the Technology of the Strategic Implant®, about state of the art oral implantology.

This technology has overcome the problems and major risks of conventional implantology. And at the same time it provides the possibility of work in an immediate functional loading protocol, without bone-augmentation and without waiting-times.

This little booklet will change your life and your patient's life.

# The International Implant Foundation

- A **Registered Charity** in Munich/Germany
- Provides **Evidence through Research**
- **Know-how base** for the Technology of the Strategic Implant(R)
- An organisation for **World-Wide Teaching and Training**
- A provider of far-sighted consensus documents
- The IF defines the up-to-date **Treatment Standard** in oral implantology world-wide

[www.implantfoundation.org](http://www.implantfoundation.org)  
[www.peri-implantitis.info](http://www.peri-implantitis.info)



Scan for knowledge



# GOODBYE OSSEOINTEGRATION

The standards and possibilities in oral implantology have changed.  
**Osseointegration** is not the «Specialist Standard» anymore.

**Osseofixation** is more reliable, faster, avoids bone augmentation and avoids healing time.

**Osseofixation allows to overcome the problems of the old technology named "Osseointegration":**

- Large implant diameter requires a lot of bone
- Rough endosseous implant surfaces do not improve the integration, but they create Peri-Implantitis
- The connection zones between implants and abutments are a mechanical problem

Science and the clinical practice has known for more than 30 years already, that rough surfaces are not required at all for successful implantology!





# The solution for virtually all cases: The Single-Piece Strategic Implant®. Simple, reliable, infection-free.

## Thin and polished vertical implant part

- No infections, no peri-implantitis
- Requires very little bone

## Engagement by anchorage

- Holds against intrusive and extrusive forces
- Designed for immediate functional loading



# Advantage 1: The Strategic Implant® saves money



The old (2-stage) Implant Treatment (Osseointegration)

Augmentation

Implants

Temporary

Prosthetics

Modern Strategic Implant® Technology

~~Augmentation~~

Implants

~~Temporary~~

Prosthetics

Implants

Prosthetics

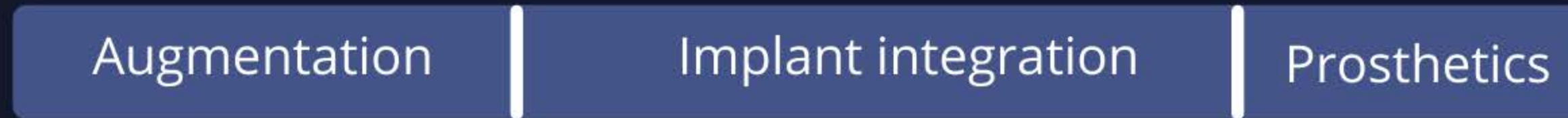
30 - 40% of costs are saved



# Advantage 2: The Strategic Implant® saves time



Conventional (2-stage) implant treatment



Modern Strategic Implant® Technology



3 days only for  
Implants and  
Prosthetics



98% of the time is saved



## Advantage 3:

# The Strategic Implant® saves chair-time

	Conventional 2 stage	Strategic Implant®
Augmentation	2-4 hours	/
Surgery	3-5 hours	2,5 hours (incl. impressions)
Prosthetic try in	4 hrs (high precision)	max. 2 hours
Cementing /delivery	2 hours	0,5 hours
<b>Total Time Consumption</b>	<b>11 – 15 hours</b>	<b>5 hours</b>

This table compares  
chair-time for a typical  
two jaw reconstruction



## **Advantage 4:**

# **Usage of the patients own, natural, healthy bone only**



This principal decision avoids risks and costs of bone augmentations (e.g. sinus lifts, bone augmentation material, or bone transplants).

All these procedures complicate the work of an implantologist and they reduce the safety.

### **Results:**

- The predictability of the treatment becomes very high
- Implantology becomes more affordable and soon all patients can receive implants
- Saves time for the patients and the clinic team



# Advantage 5:

## Immediate functional loading



- Avoids intermediate dentures or bridges
  - No second or third surgical intervention
- (all surgery is done during the first treatment/appointment, also, all extractions are done right before implants are placed)

### Results:

- Saves time at the dental chair
  - Effective procedures
  - Saves money
  - Patient returns to normal life immediately
  - Limited pain
- (not more pain compared to extractions only)



## Advantage 6:

# Extremely low complication rate



- Safe against infections which may have been locally present at the implant site (Periodontal origin or apical infections)
- Safe due to polished implant design: no food nor bacteria retention.
- Strong disinfectants may be used topically, antibiotics are optional

### Results:

- High success rate
- Very little compliance and cleaning by patients are necessary.



# **Advantage 7:**

## **Simple and straightforward treatment approach in cases where 2-stage implants have to be removed**



- Removal and replacement of the old implant in the same intervention

### **Results:**

- The Strategic Implant® may be used immediately after other (old/failing/infected) implants have been lost or must be removed
- There is always a solution with a Strategic Implant®, even if only very little bone is left.



# **Advantage 8:**

## **Immediate implant placement, even in the cases of profound periodontal involvement**

- Teeth are removed, periodontally involved soft tissues are fully removed, then implants are placed right away.

### **Results:**

- Saves time
- Saves costs
- No painful and useless perio-treatments
- No intermediary treatment steps



# **Advantage 9:**

## **Strategic Implant® do not block the natural elasticity of the bone**



- Elastic design improves integration chances to almost 100%
- Usage of the corticals provides immediate stability.

### **Results:**

- Immediate functional loading
- High resistance against infections
- No peri-implantitis



# **Advantage 10:**

## **Allows highly aesthetic solutions for all patients**



- Small abutment heads may be easily hidden on the oral side of the crest
- Large freedom for the work of the dental technician is given
- Even severe skeletal problems may be treated in one single surgical step.
- We use the best cortical bone areas and we avoid bone areas where atrophy is strong
- We will rather reduce bone height in order to create aesthetics





# **Advantage 11:**

## **Smallest possible implant volume: intra-bony and perfusion are not disturbed**



-Implants are designed to utilise only cortical bone for anchorage and to have as little volume as possible.

### **Results:**

- Good bone healing and safe integration
- The natural bone perfusion is almost not impaired
- No Peri-Implantitis



# **Advantage 12:**

## **With The Strategic Implant® it is easy to maintain the oral function**

- Bridges can (and must be) adjusted throughout life, especially if soft bridge materials are used.  
The vertical dimension can be adjusted easily in the oral cavity with normal composite.
- On the Strategic Implant® this work can be done easily, especially if the prosthetic treatment includes chewing surfaces from acrylic or composite.



# Advantage 13: Avoid Peri-Implantitis in your patients



- Peri-implantitis is a dangerous, implant-associated disease, but it seems not to appear around the Strategic Implant®.
- The smooth surfaces of the Strategic Implant® do not allow adhesion and proliferation of bacteria.
- By the thin implants (2 mm core diameter) trajectories inside the bone are only marginally interrupted.
- The load transmitting trajectory inside the bone is only marginally interrupted by the thin Strategic Implant®.  
Load transmission takes nevertheless place into the resorption stable 2nd or 3rd cortical, just as in all trauma devices.



# Literature Excerpt

Ahmad A.G. , M. Osman, F. Awadalkreem, Full-mouth rehabilitation of a patient with cleidocranial dysplasia using immediately loaded basal implant-supported fixed prostheses: a case report, Int. J. Surg. Case Rep. 65 (2019) 344–348

Awadalkreem F, Khalifa N., Ahmad A.G., Suliman A.M., Osman M. Prosthetic rehabilitation of maxillary and mandibular gunshot defects with fixed basal implant-supported prostheses: A 5-year follow-up case report International Journal of Surgery Case Reports 68 (2020) 27–31

Awadalkreem F, Ahmad AG, Ihde S, Osman M. Effects of corticobasal implant protrusion inside the nasal and maxillary sinus. Ann Maxillofac Surg 2020;10:114-21

Dobrinin O., Lazarov A, Konstantinovic V.K., et al. Immediate-functional loading concept with one-piece implants (BECES/BECES N /KOS/ BOI) in the mandible and maxilla- a multi-center retrospective clinical study. J. Evolution Med. Dent. Sci. 2019;8(05):306-315, DOI: 10.14260/jemds/2019/67

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Gaur V, et al., Mandibular reconstruction using single piece zygomatic implant in conjunction with a reinforcing Fibular Graft Union: A case report, Int J Surg Case Rep (2020)

Gosai H., Anchilla Sonal, Kiran Patel, Utsav Bhatt, Phillip Chaudhari, Nisha Grag. Versatility of Basal Cortical Screw Implants with Immediate Functional Loading J. Maxillofac. Oral. Surg. 2021, <https://doi.org/10.1007/s12663-021-01638-6>

Huber G., Sipic O., Ihde S. Zahnimplantate in parodontal betroffenen Knochenbereichen, Dental Tribune 7/2021 ,12f (in German language)

Ihde S, Sipic O. Esthetic indication for dental implant treatment and immediate loading (3). Case report and considerations regarding the aspect of the patient's right to self-determination in medical decision-making. Ann Maxillofac Surg 2020;10:213-6.

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Ihde S, Palka L. Anchorage possibilities in case of a unilateral maxillary defect using the concept of Strategic Implant®. Natl J Maxillofac Surg 2018;9:235-9.

Lazarov A. A prospective cohort study of maxillary sinus complications in relation to treatments with strategic implants® penetrating into the sinus. Ann Maxillofac Surg 2020 Jul-Dec;10(2):365-369.

Pałka ŁR, Lazarov A. Immediately loaded bicortical implants inserted in fresh extraction and healed sites in patients with and without a history of periodontal disease. Ann Maxillofac Surg 2019;9:371-8.

Singh M., R. Batra, D. Das, S. Verma, A novel approach for restoration of hemisected mandibular first molar with immediately loaded single piece BCS implant: a case report, J. Oral Biol. Craniofac. Res. 7 (2017) 141–146

More literature may be requested here: [contact@implantfoundation.org](mailto:contact@implantfoundation.org)

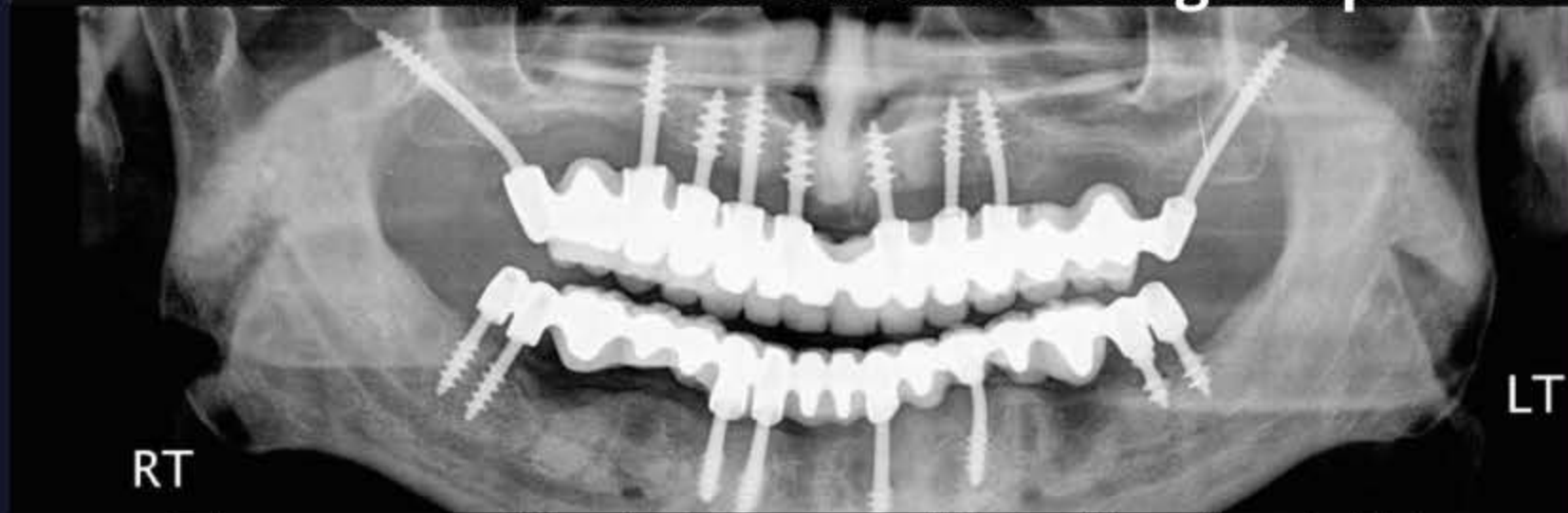




**After upper jaw treatment**



**After removal of all teeth and 2-stage implants**



**Three months later, good healing is visible**

**Advantage 14:**  
**The Strategic Implant®**  
**provides solutions after**  
**Peri-Implantitis has**  
**happened**



Avoid such disasters by not using  
"conventional", rough implants any more!





# Advantage 15:

## NO patient selection



- Virtually every patient can be treated to receive fixed teeth from 6 – 6 in both jaws
- Without bone augmentation
- Without „healing time“
- You will never have to send a patient home untreated because he has "not enough bone".



# **Advantage 16:**

## **Start the treatment right when the patient is on your dental chair**



The best moment to convince a patient to invest into implants is when the patient loses teeth or teeth are extracted.

Patients are likely to do such investment/decision in this moment, it is a logical decision.

By using the technology of the Strategic Implant® we can fulfil the wishes of the patients: they will never have to wear a denture and they get fixed teeth right away.



# Advantage 17: Put more implants!



Statistics show

2-stage implantologists place on average 30 implants per month  
(data from Germany 2019)

Average cortico-basal implantologists place 198 implants per month  
(data from Germany 2019)

Reasons: every patient can be treated, regardless of the bone situation.  
And the treatment is affordable.



## Advantage 18: Save money on implants



Conventional dental implants (2-stage) cost at least 120 Euro per piece (including abutments and laboratory parts) and up to 350 Euro (depending on the brand and the type of the parts).

Single piece implants are **70-90** Euro per piece.  
You can place for your own safety and for the safety of the patient more implants per case and this way you reach a very stable situation which allows treatment in an immediate functional loading protocol.  
All this without the risk of peri-implantitis!



**For the surgical and for the prosthetic steps of the treatment  
clear and proven rules are available  
and they are world-wide valid.**

**The consensus documents of the International Implant Foundation  
define this treatment-standard:**

1. Consensus on Corticobasal® Implants
2. Statement of the International Implant Foundation (IF) Concerning Probing Around Basal Implants
3. Consensus on Immediate Loading of Jaw Implants
4. IF® Consensus Document for Oral Implantology: Description of Methods to Create Permanent Bone-to-Implant Contact. Clinical Indications and Modalities for these Methods





# **IF consensus documents describe the treatment standard for specific treatment modalities in connection with the application of Corticobasal® implants.**

- 5. Consensus on Treatment Modalities with Basal Dental Implants in Connection with the Maxillary Sinus
- 6. Consensus on 16 Approved Methods of Implant Placement in Corticobasal® Implantology
- 7. Indications and Treatment Modalities for Corticobasal® Jaw Implants
- 8. Indications, Procedure and Application of Methods for Carrying Out Corrective Interventions with Corticobasal® Implants





# This means:

## Treatment concepts including the Strategic Implant®

- Increase the chances that the implant treatment will take place (because patients are willing to live without teeth for 3 days, while they are not willing to undergo 12 and more months of treatment incl. several surgeries)
- Makes it easy for the patient to decide for this technology
- Makes it easy and affordable for the patient to decide for a life without his/her own teeth (but with fixed teeth on the Strategic Implant®)
- Eliminates the risks of bone augmentations
- Leads to a convenient high success rate of about 97% (counted by implants, in 5 years)



# How to learn about the technology:



## **Regular curriculum:**

- Monthly education (3-4 days ) takes about 6 months

## **Fast track curriculum:**

- Crash course: **“All in one week”** takes only seven full days with more than 70 hours of lectures and clinical observation.

**Courses and single lectures can be repeated online.**



"It changed my world, because with the Strategic Implant® everything is permitted, anything is possible, you improve oral health of the patient in only 24 hours, and the really important part for me, you don't have peri-implantitis."

"I got to know that this way of implantology is pretty good, I got so excited about it, that i quit my job at a hospital. And I took over a clinic which works only with these implants. I don't do anything else!"





# TESTIMONIALS

Amazing course held in a cozy homely atmosphere. Equally valuable for beginners and for experienced dental care professionals.

High-class experts from all over the world lead you all the way from the basics of the concept to full understanding. Lectures contain vast amounts of information, especially lectures on bone mechanics, which explain why and how immediate loading works, the rationale of cortico-basal implantation & immediate loading becomes clear.

Observation of live surgery and prosthetic work as well as discussion of difficult clinical cases are all part of the schedule of the All-in-one-week intense educational program. A truly holistic experience.

Yarema Vares, Lviv National Medical University, Ukraine



# Before treatment with the Strategic Implant® and 3 days later





# Before treatment with the Strategic Implant® and 3 days later





# Before treatment with the Strategic Implant® and 3 days later





# Before treatment with the Strategic Implant® and 3 days later





# Aims of IF Curriculum

The International Implant Foundation pursues scientific objectives by organizing the Implantology Curriculum.

This statutory mission sets certain requirements and demands on the participants. Thus, each participant is expected to give a scientific lecture that must at least produce a scientifically tangible content and deal with the state of the art of basal-cortical implantation.

The findings can be formulated in a generalized way with reference to a large number of diagnostic and treatment situations, but they can also be presented on the basis of a single and concrete patient case, for example in the sense that an underlying scientific guiding principle is verified in a single patient case.

If verification is not possible in this situation, the participant must be asked to explain how the deviation can be explained in the specific case or, if such an explanation cannot be provided, what conclusion this draws from the underlying guiding principle.

A scientific essence cannot be affirmed if a treatment case with its initial findings, procedure and result is presented purely descriptively, but a proper classification in the principles of basal cortical implantation is omitted.

Michael Zach, Head of the Board of the IF, April 2021



# **ALL IN ONE WEEK**

## **CIRRUCULUM FOR CORTICO- BASAL IMPLANTOLOGY AND IMMEDIATE LOADING**

**26.09.2022 - 02.10.2022**

**23.11.2022 - 29.11.2022**

**12.12.2022 - 18.12.2022**

**24.04.2023 - 30.04.2023**

**ALL THEORETICAL INFORMATION ON THE TECHNOLOGY IS  
GIVEN DURING THIS WEEK, PLUS THE POSSIBILITY TO SEE  
AND TO ASSIST IN LIVE OPERATIONS (APPROX. 1.5 DAYS) AND THE SUBSEQUENT  
PROSTHETIC PROCEDURES.**

**ALL LECTURES AND EXAMS ARE IN ENGLISH LANGUAGE.**







# ALL IN ONE WEEK



## OUR TEACHERS



**VITOMIR  
KONSTANTINOVIĆ**



**STEFAN IHDE**



**YAN VARES**



**ALEKSANDAR  
LAZAROV**



**ANTONINA IHDE**



**OLGA ŠIPIC**



**SANELA LAZANICA**



# TOPICS

**Odontogenic Infections**

**Loading protocols and suitable Implant designs for**

**Immediate loading protocols - KOS, BCS, TPG Uno 2-stage implants**

**Single tooth replacement with KOS and BCS.**

**Treatment of the mandible in different stages of atrophy**

**Implants used and technologies:**

**Compression screws, cortico-basal approach, lateral basal approach,  
diagnosis and treatment in severe atrophy cases**

**Considerations regarding the Treatment protocol**

**Implant complications**

**Repetition of most common  
possibilities of infections  
after implant placement**

**Vitomir Konstatinović**

DDS, MD, PhD  
Clinic for Maxillofacial surgery,  
School of Dental Medicine,  
University of Belgrade

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# TOPICS

## **AFMP & APPI**

(Two aspects of slopes between the maxilla and the mandible)

## **Setting up a BIPS**

(General rules and treatment plan examples)

## **The usage of 1st corticals in cortical implantology**

## **Periostitis - what do we have to know about it**

(Facts and examples of a frequent phenomenon in immediate loading implantology)

## **IF Consensus Document No 1, No 5, No 6, No 7**

## **Botulinumtoxin in oral implantology**

(Indications and usage step by step)

## **The "Open bone wound"**

(Definition and implications for the treatment plan and corrective treatments)

## **Retrograde Osteolysis: Diagnosis and treatment**

## **Reasons for and prevention of "Peri-Implantitis"**

## **16 IF Methods**

## **The use of TPG Uno Implants**

## **Treatment of Angle Class III cases**

## **Stefan Ihde**

Implantologist  
IF-Master of Immediate Loading  
Fellow & Diplomate of the ICOI  
Dentist, Surgeon

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# TOPICS



## **Introduction into the method of oral osseofixation of implants with the intention to replace teeth**

(Description of the method, advantages, results of research, rationale for immediate loading protocols)

## **Bone physiology for implantologists**

(This lecture describes what an active implantologist know about bone, its properties, its adaptation, medical and mechanical facts)

## **Osseofixation vs. Osseointegration**

(This lecture describes why "osseointegration" is an outdated method in implantology)

## **Disadvantages of the Method of Osseointegration**

(Healing time, bone Augmentations, Peri-Implantitis u.a.)

## **Is "All-on-4" the great savior in implantology?**

(A critical view on a special application of traditional 2-stage implants)

## **Treatments in and around the maxillary Sinus**

(Maxi-Lecture, incl. comments on treatment of communications between oral cavity and max. sinus)

## **Augmentations and immediate loading**

## **Explanations and examples of IF-Methods**

## **Is the possibility of immediate loading the question of the "implant's surface"?**



# TOPICS

**Treatment planning on Strategic Implant®**

**Introduction into the prosthetic work on Strategic Implant®,  
impressions and bite registration**

**Introduction into the prosthetic work on Strategic Implant®,  
possibilities to overcome non-parallelity**

**Copy-paste technique using 3D technologies**

**Gum Line**

**Occlusion and mastication in Strategic Implant® technology**

**Prosthetic Workpiece Modelling for different stages of Atrophy.  
The Supporting Polygon**

**Antonina Ihde**

IF Master for Immediate Loading  
IF Teacher for Immediate Loading

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# TOPICS

**KOS Implants - Indications, Use, Prosthetics**

**Placement of tuberopterygoid (TPG) implants: where are the limits?**

**One-stage implantation and immediate loading in cases of periodontal pathology  
and Periimplantitis around 2-stage implants**

## Yan Vares

MD, PhD, DDS

Professor & Head of Chair of Surgical Dentistry &  
Maxillofacial Surgery,

Lviv National Medical University,  
Danylo Halytsky, Ukraine

AO CMF European Faculty, ICOI, IIF

Visiting professor of Jaipur Dental College (India)

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# TOPICS

**Treatment plan and prosthetic steps**

**Bone reduction – indications, technique, and results**

**Live surgery in Dent32 clinic, including impression & bite taking  
(Ihde, Šipić & team)**

**Changes on metal-composite bridges during the healing phase**

**Choice of bridge materials**

**Delivery of bridges or try-in on operated patients**

**Cooperation between the Prosthetic treatment provider and the dental  
laboratory**

**Olga Šipić**

IF Teacher for Prosthetics  
on the Strategic Implant®  
Dent32 Dental Studio, Belgrade

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# TOPICS

**Soft Tissue Augmentation & Deep cementation technique**

**Segment constructions with the Strategic Implant®**

**Results of research:  
Implant survival, Complications, and Changes in Quality of life**

**Prosthetics on Segments**

**Treatment of the Mandible (overview lecture)**

**Preoperative Planning**

**Aleksandar Lazarov**

ORAL IMPLANTOLOGIST  
IF CLINICAL MASTER OF IMMEDIATE LOADING  
IF TEACHER IN STRATEGIC IMPLANTOLOGY

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# TOPICS

**Introduction into production of metal composite, zircon and ISO-Fusion Bridges, for the use in immediate Functional Loading protocols**

**Manual and digital fabrication of bridges in the Strategic Implant®**

**Sanela Lazanica**

Chief Dental Technician  
IF Teacher

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# **Learn about cortico-basal implants in Belgrade/Serbia**

**Register by contacting us through email:**

**[registrations@implantfoundation.org](mailto:registrations@implantfoundation.org)**







# Predictable, simple Implantology.