The Most Current Clinical Evidence on Dental Implant Treatments Based on Official Cochrane Library Publications (December 2014)

1) Different Types of Implants:
   There was no evidence showing that any particular type of dental implant had greater long-term success.

2) Implants in Fresh Extraction Sockets:
   It is suggested [underpowered] that immediate and immediate-delayed implants may be at higher risks of implant failures and complications than delayed implants on the other hand the aesthetic outcome might be better when placing implants just after teeth extraction.

3) Implant Surgery and Antibiotics:
   Scientific evidence shows that 2 g or 3 g of amoxicillin given orally, as a single administration, one hour preoperatively significantly reduces failure of dental implants. The effect of post-operative antibiotics is still unclear.

5) Different Times for Loading Dental Implants [With 35 Ncm Implant Stability]:
   Overall there is no convincing evidence of a clinically important difference in prosthesis failure, implant failure, or bone loss associated with different loading times of implants.

4) Management of soft tissues for dental implants:
   Limited evidence suggests:
   a) Flapless placement reduces postoperative discomfort in adequately selected patient
   b) Augmentation at implant sites with soft tissue grafts is effective in increasing soft tissue thickness improving aesthetics.
   c) The height of keratinised mucosa can be increased using autografts or an animal-derived collagen matrix at the price of a worsened aesthetic outcome (0.5 mm of recession)
   d) Insufficient evidence on:
      - the ideal flap design,
      - the best soft tissue augmentation technique,
      - if increasing the width of keratinised/attached mucosa is beneficial to patients,
      - which are the best incision/suture techniques/materials.
6) **Treatment of Peri-implantitis:**

There is no evidence from trials that the more complex and expensive therapies were more beneficial than the control therapies which basically consisted of simple subgingival mechanical debridement. Titanium screws may be preferable to resorbable screws to fixate onlay bone grafts.

7) **Vertical Bone Augmentation:**

Complications, especially for vertical augmentation, are common. Short implants appear to be a better alternative to vertical bone grafting of resorbed mandibles. Osteodistraction osteogenesis allows for more vertical bone augmentation than other techniques.