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Effect Of Dental Implants On Bisphosphonate-Related Osteonecrosis Of The Jaws

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Purpose:

In the present study we analyze the time span of developing BRONJ in patients treated with bisphosphonates and receiving dental implants.

Study design:

In this metaanalysis patients with dental implants and established BRONJ were evaluated at

the department of oral and maxillofacial surgery, Medical University of Vienna. In

Addition 11 studies from 1978 to 2012 were included in a meta-analysis. Three groups

were created:

a) implantation before bisphosphonate treatment,

b) implantation after

bisphosphonate treatment,

c) implantation during bisphosphonate treatment. Outcomes

were evaluated by linear regression analysis.

Results:

Patients who underwent dental implantation during (p<0.001) and after (p<0.001) treatment with bisphosphonates developed BRONJ more rapidly. The duration of treatment with oral bisphosphonates was significantly related to the rapidity of developing BRONJ (p=0.03).

Conclusion:

Implants	Total (n=)	Median (n=)
Inserted	47	4
Last follow	17	0
up		









Original number (n) of inserted implants versus number of dental implants at the last follow-up investigation

Radiograph of BRONJ affecting osseointegrated implant

Radiograph after removal of osteonecrotic bone and dental implant

Histological section of osseointegrated implant after removal of necrotic bone shown above

Kaplan-Meier curve DI to BRONJ in months with reference to the

The insertion of dental implants during or after bisphosphonate treatment accelerates the development of BRONJ. BRONJ occurred less frequently when implants had been inserted before bisphosphonate therapy started.

number of patients. The figure encompasses all studies included in the analysis (n=54).

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