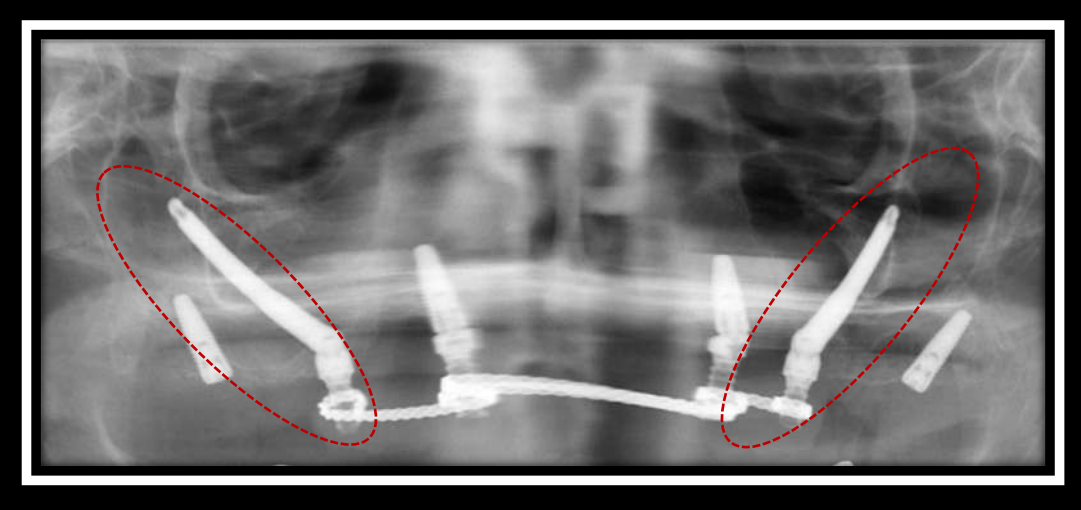


Background and Aim

Zygomatic implants (ZIs) appeared at the late eighties to rehabilitate patients who had suffered resection of the maxilla. Nowadays, they are also used in patients with severe maxillary atrophy.

The stability of the ZI depends on the cortical bone it crosses during its placement.



Aim: To assess the survival rate of ZIs; the prevalence of complications and satisfaction level of the patients based on previously published studies with a medium- and long-term follow-up.

Methods and Materials



- An electronic search was performed in January/2017 in PubMed/Medline database and was supplemented by hand-searching.
- Search strategies :**
 - {Subject AND Adjective}
 - {Subject: (zygomatic OR zygoma OR zygomaticus)}
 - {Adjective: (implant OR implants OR fixture OR fixtures)}.
- Exclusion criteria**
 - Isolated cases.
 - Animal studies.
 - Review articles
- Inclusion criteria :**
 - Human studies receiving Zis.
 - Minimum period of follow-up 39 months

Variables extracted from these papers: number of patients, number of zygomatic and standard implants (SI), duration of the study, surgical technique, type of prosthesis, type of loading, complications, survival rate of the ZIs and satisfaction level of the patients.

44 papers

OBSERVATIONAL CLINICAL STUDIES

DESCRIPTIVES

38 cases series

ANALYTICAL

6 cohort

30R
Retrospectives

8P
Prospectives

4 R

2 P

Results

STUDY SAMPLE AND SURVIVAL RATE

	Patients	ZI	SI
TOTAL	1638	3589	4117
Nº failures		90	138
global survival rate (%)		97,5	96,65
39-120 months	1336	2943	3711
Nº failures		64	93
survival rate (%)		97,82	97,5
>120 months	302	646	
Nº failures		26	45
Survival rate (%)		95,97	88,9

ZI: zygomatic implantes; SI: standard implants

SURVIVAL RATE ACCORDING TO SURGICAL TECHNIQUE

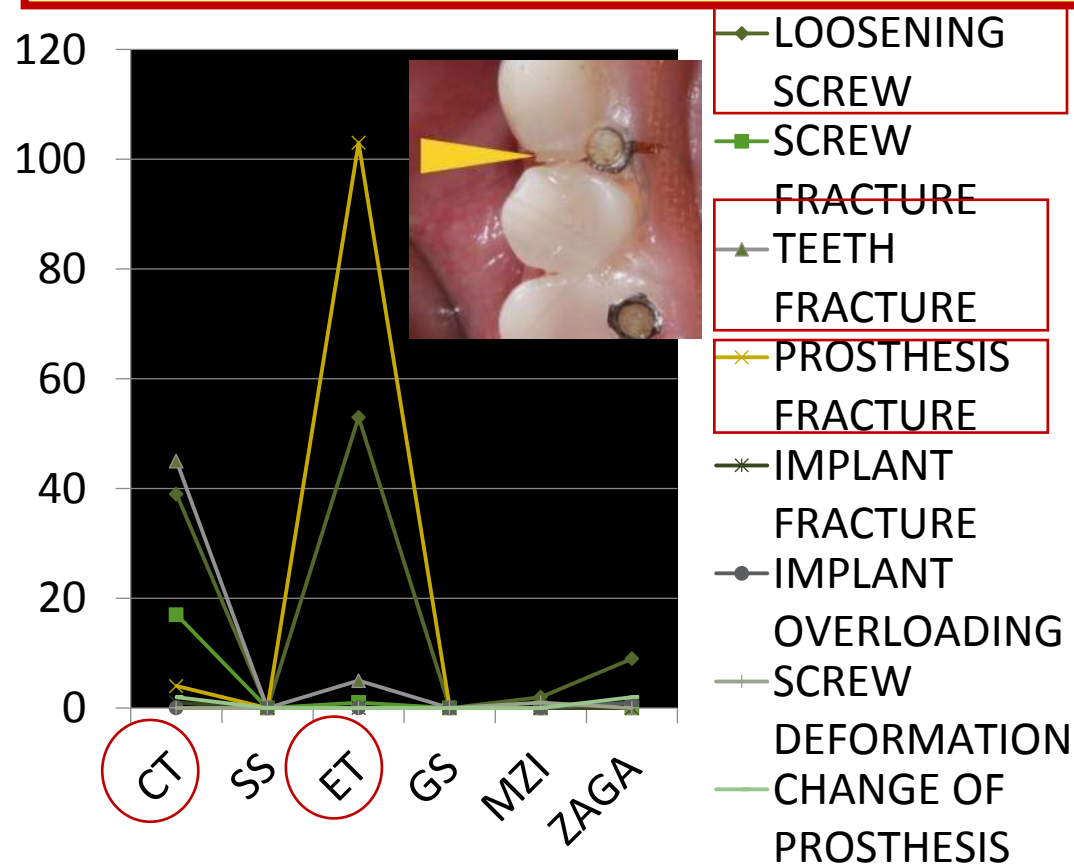
Surgical technique	Patients	ZI	Nº papers
CT	806	1710	24
Failures/survival		41 (2,26%)/ 97,74%	
SS	144	341	6
Failures/survival		17 (4,9%)/ 95,1%	
ET	436	942	6
Failures/survival		11 (1,16%)/ 98,84%	
GS	5	10	2
Failures/survival		3 (30%)/ 70%	
ZAGA	80	157	1
Failures/survival		5 (3,1%)/ 96,9%	
MZI	14	58	1
Failures/survival		2 (3,4%)/ 96,6%	

CT: clasical technique; SS: sinus slot; ET: extrasinusal technique; CS: guide surgery; ZAGA: Zygoma Anatomy Guided Approach; MZI: multiple zygomatic implants.

SURVIVAL RATE ACCORDING TO LOADING PROTOCOL

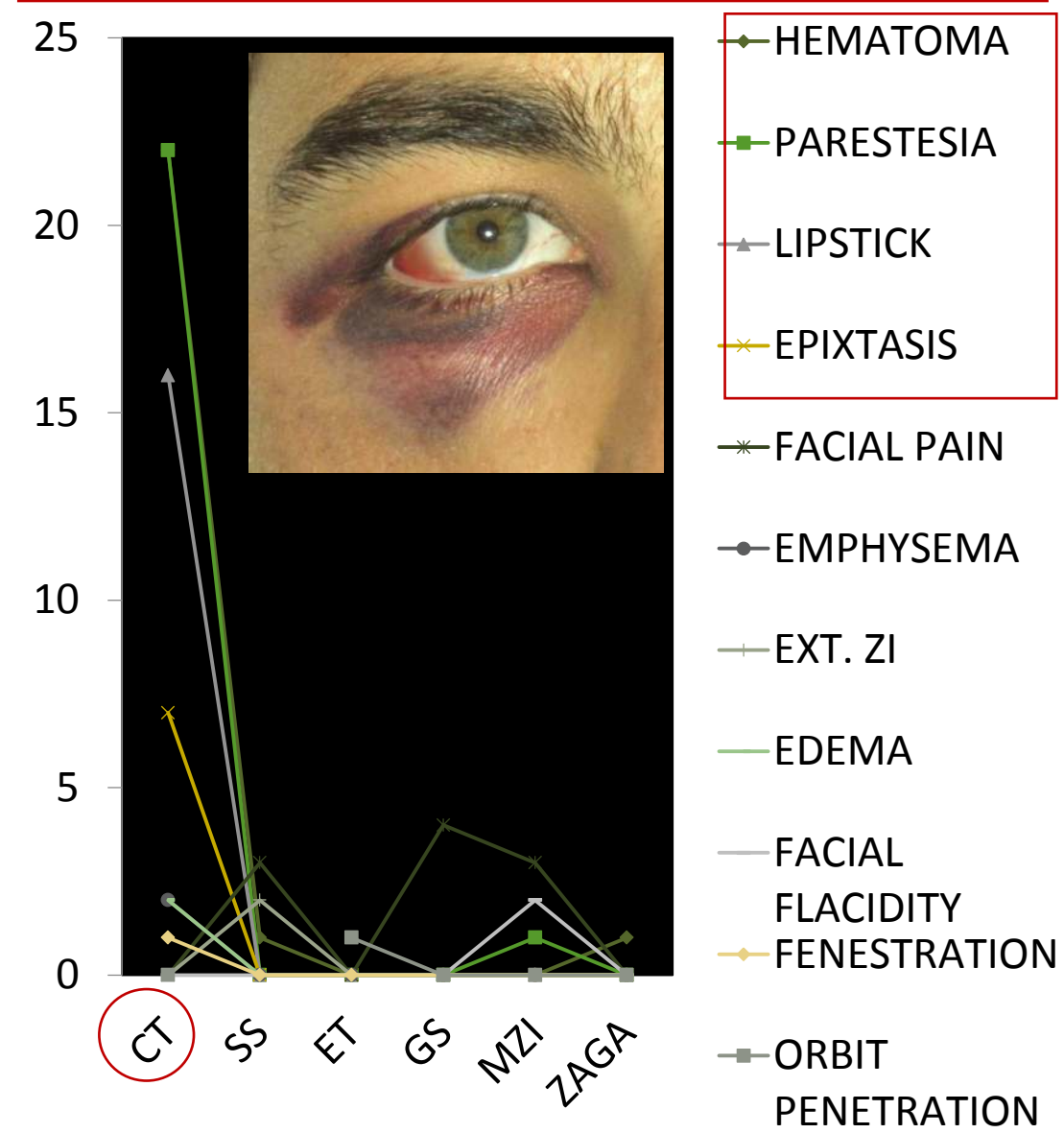
Loading protocol	Patients	ZI	Nº papers
Deferred (4-6 months)	685	1500	28
Failures/survival		43 (2,8%)/ 97,2%	
Early (8 weeks)	20	40	1
Failures/survival		0 (0%)/ 100%	
Immediate	933	2049	17
Failures/survival		144(2,14%)/ 97,86%	

PROSTHETIC COMPLICATIONS ACCORDING THE SURGICAL TECHNIQUE

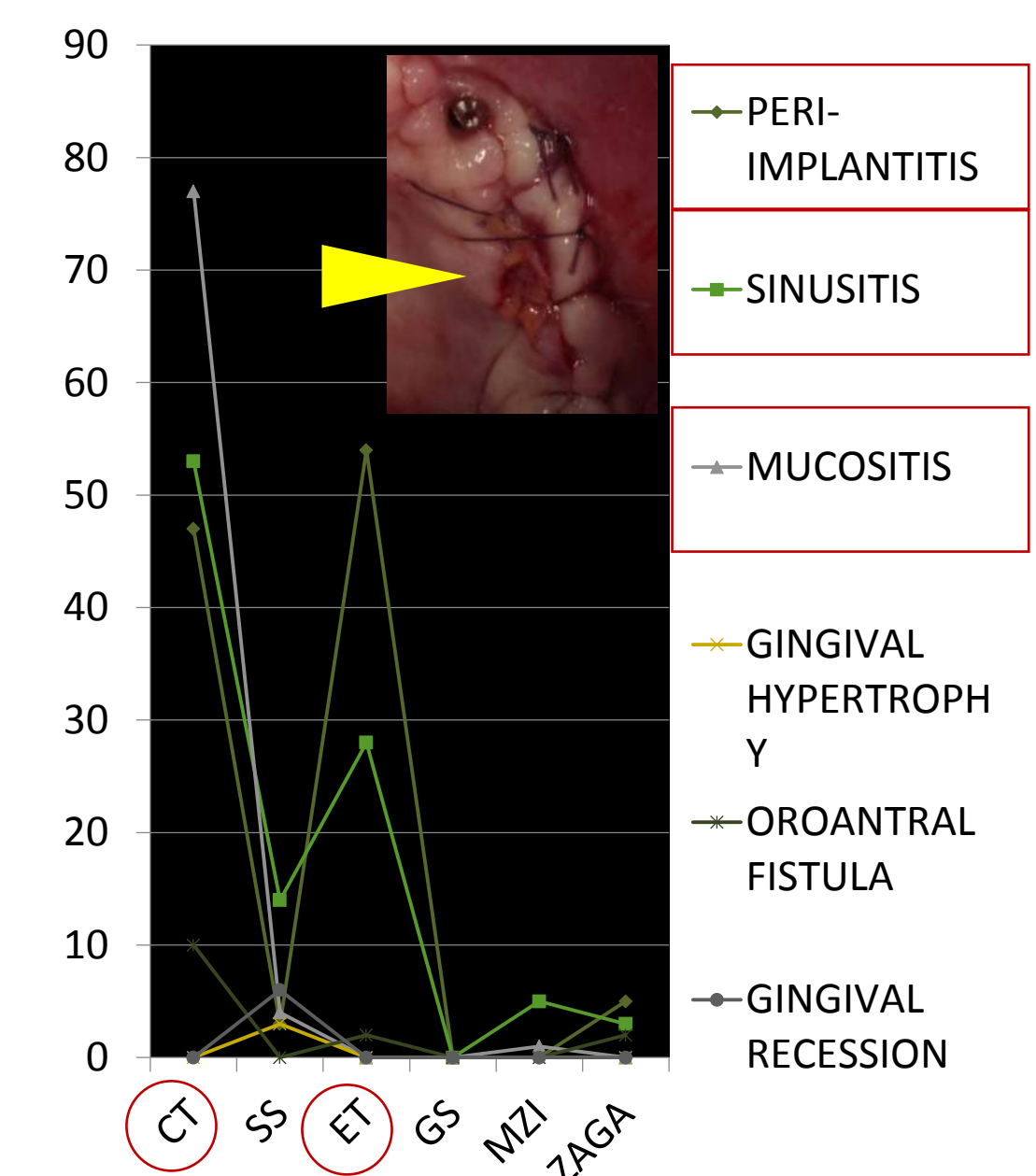


Results

SURGICAL COMPLICATIONS ACCORDING THE SURGICAL TECHNIQUE



BIOLOGICAL COMPLICATIONS ACCORDING THE SURGICAL TECHNIQUE



SATISFACTION LEVEL

	Maximum satisfaction	Aesthetic	Function	Phonetic
PATIENTS	354	346	334	
%		89,4	87,4	84,3

Conclusions

- The 5-years and 10-years **survival rate** of ZIs was 97.82% and 95.97% respectively and it was less with GS.
- Immediate loading is the current standard of **loading protocol** of the ZIs. Delayed loading achieves lower survival rate.
- The **surgical complications** depend on the surgical technique used, being higher in the CT.
- Mucositis and Sinusitis are the most frequent **biological complications**, more prevalent with CT.
- Prosthesis fracture is the most frequent **prosthetic complication** followed by teeth fractures and loosening of screws.
- The maximum **satisfaction level** of patients was 89.4%, 87.4% and 84.34% for aesthetics, function and phonetics respectively
- Further studies are needed in the long term.

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