

Implantology: Inter-Dependent Worldwide Relationships

The last 2 decades have been exciting for the Implant Dentist. The profession has progressed due to advances in bone grafting, fixture design, and prosthetic attachments. These advancements are the result of basic science research,^{1,2} clinical research,^{3,4} case reports,⁵ and major financial investments by manufacturers. Incorporating technological advancements into a clinical practice that is comprised of an older patient population presenting with complex medical, functional, and esthetic demands can be challenging. The clinician's decision-making process is enhanced by technology. Treatment planning is empirical; however, it should be supported with evidence-based research.

The relationship between the clinician, academia, and industry is a necessity for the successful implementation of technological advances. Academia provides basic and advanced postgraduate education with basic/clinical research as a by-product. Industry provides clinical education, translational/clinical research, and the marketing of new products. The clinician must take advantage of these resources in a responsible manner. As clinicians, we depend on the marketing efforts of manufacturers to inform us of new technologies. These cost- and risk-intensive efforts put forth by the manufacturers are appreciated by the clinical community. However, we must not rely solely on marketing. Clinicians need to investigate the products presented and choose the one that is a "best fit" for their clinical needs. The investigation must include the scientific evidence presented in journals such as *Journal of Oral Implantology*.

Clearly, the technological advances are the result of worldwide efforts. No country stands alone in this interdependent relationship, as



demonstrated by the representation of authors in this issue from Germany, Italy, Saudi Arabia, South Korea, and the United States.

This issue of the *JOI* is a collection of manufacturers' marketing campaigns and articles that offer scientific support for technological advances that are available today or in the future. The *JOI* team encourages you to read and be enlightened by the multiple international efforts put forth by industry, academia, and clinical practice found in this special issue.

Enjoy!

James L. Rutkowski, DMD, PhD
Editor-in-Chief
Journal of Oral Implantology

REFERENCES

1. Khojasteh A, Eslaminejad MB, Nazarian H, et al. Vertical bone augmentation with simultaneous implant placement using particulate mineralized bone and mesenchymal stem cells: a preliminary study in rabbit. *J Oral Implantol*. 2013;39:3–13.
2. Kurt M, Külünk T, Ural C, Külünk Ş, Danişman Ş, Savaş S. The effect of different surface treatments on cement-retained implant-supported restorations. *J Oral Implantol*. 2013;39:44–51
3. Bassil J, Naaman N, Lattouf R, et al. Clinical, histological, and histomorphometrical analysis of maxillary sinus augmentation

using inorganic bovine in humans: preliminary results. *J Oral Implantol.* 2013;39:73–80.

4. Tolstunov L, Hicke B. Horizontal augmentation through the ridge-split procedure: a predictable surgical modality in implant reconstruction. *J Oral Implantol.* 2013;39:59–68.

5. Rosano G, Taschieri S, Del Fabbro M. Immediate postextraction implant placement using plasma rich in growth factors technology in maxillary premolar region: a new strategy for soft tissue management. *J Oral Implantol.* 2013;39:98–102