The question of whether a compromised tooth can be improved in prognosis to serve as a support for a prosthetic reconstruction and thereby be maintained, or whether it should be replaced by a dental implant to support the planned reconstruction, is one of the key points that we discuss in our weekly case-planning seminars within the postgraduate specialization program. Following the principles that we learned from our mentors, as a first step of treatment planning, the individual tooth prognosis has to be evaluated.

An abutment tooth can be doubtful due to endodontic and/or periodontal reasons, a significant lack of remaining healthy tooth substance, or a combination of several problems. Numerous parameters have an influence on the decision of whether to keep the doubtful tooth. The long-term outcomes of the endodontic or periodontal pretreatments are important to know, and furthermore, the outcomes of the tooth- and implant-supported reconstructions also have to be considered. In addition, the prognoses of nonvital teeth—with or without post-and-core reconstruction—and of teeth with reduced periodontal support must be evaluated.

The present issue of the IJP includes recent research on these topics, adding to the already published literature in helping to support this decision-making process.

Yet, doubts about the long-term prognosis of implants have recently come up, complicating this process. The literature displays an increasing incidence of loss of implants due to peri-implantitis, a disease that has been associated with bacteria and clear signs of infection. However, more recently, another parameter has entered the discussion as a potential reason for the loss of previously successful implants—the foreign body reaction. So, what is a foreign body reaction, and what can we expect of dental implants in the future with this respect? For some answers to these clinically relevant doubts, we have invited Professor John Davies to give us his expert opinion, and we hope that this issue will help add to your knowledge and support you in your decision-making process during treatment planning.

Best regards on behalf of the entire editorial board,

Irena Sailer
Editor-in-Chief

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