**INTERVIEW**  
with — *Dr. Marius Steigmann*

**Q:** Dr. Steigmann, you have become one of the most reputable lecturers on dental implantology and esthetic dentistry. What is the philosophy underlying your success?  
**A:** The success is due to the vision I had many years ago regarding soft tissue. Implantology was mostly about function and the surrounding bone; hence, there was little interest in the soft-tissue outcome in terms of function and no interest in esthetics. Today, most esthetic complications in implant dentistry concern the soft-tissue outcome.

**Q:** According to the American Academy of Implant Dentistry, an estimated 3 million people in the U.S. alone have implants and that number is growing by 500,000 a year. What are the current concepts in implantology? In which direction is it developing?  
**A:** Implantology was initially developed for the retention of dentures in the mandible and then for full-arch restoration. Nowadays, implants are used for patients in need of single implants too, and such cases can be predictably treated with implants. The current trend is in the direction of implants and regeneration of bone and soft tissue to resemble the natural function and aspects of natural teeth.

**Q:** What are the main challenges in implantology today?  
**A:** The main challenge in implantology today is management of complications.

**Q:** What do you describe as the overall aim of the Clinical Masters Program in Implant Dentistry?  
**A:** The Clinical Masters Program covers all of the aspects mentioned before, taking the participant through the journey from planning to restorations with the best trainers.

**Q:** What are your personal expectations of the program? What are you looking forward to in particular?  
**A:** My expectations are that once they have completed this program participants will be able to place and restore implants at the highest level, as well as graft bone and soft tissue predictably.

**Q:** What do you consider the benefits of the program for both clinicians and patients?  
**A:** Mastering the skills of clinical excellence by learning from very experienced teachers will enable participants to treat simple to complicated cases to the benefit of the patient.

**Q:** How does this course differ from others?  
**A:** This course is different because it brings together the best clinicians and researchers in the field and uses modern methodology in the teaching process.

**Q:** Based on your experience, what is the future of dental implantology?  
**A:** I think that we are seeing a phase of consolidation of the therapeutic principles. The enthusiasm is slowing down. We have predictable procedures from which patients benefit a great deal and procedures with a relative outcome. It will take some time for all therapeutic concepts to attain the same degree of predictability. The future of implantology will be continuing education.

**Q:** One of the objectives of your course is soft-tissue management for bone augmentation. What is this concept about?  
**A:** In bone grafting procedures, one of the greatest challenges is adequate coverage through soft-tissue augmentation. This problem can only be overcome with a graft with primary closure that remains closed, and teaching this is the aim of the course.

**Q:** What do you think dental education today should entail? What should its main objective be?  
**A:** Dental education today differs from country to country. In some countries, specialists are trained to place dental implants, while in other countries implants are placed by general practitioners. In implantology, the goal of education should be to have practitioners who understand the entire treatment concept placing implants. Hence, education in implant dentistry should cover surgery, bone reconstruction, mucogingival surgery for soft tissue, and prosthetic reconstruction on implants.

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