What went wrong?

Eddie Scher previews his forthcoming lecture

"You should always learn from other people's mistakes, especially in surgery." This was a favourite saying of my father's, and it is just as true to-day. In my lecture at the Clinical Innovations Conference, I will share some of the problems that have been seen in my practice. Most of these were in patients referred to me when things have gone wrong - as of course they sometimes will. From these problem cases, I will show in my lecture first, what could be done to help the patient and solve the problem, and secondly, the lessons to be learned that will improve our own practices and help us avoid making the same mistakes. This will be in three key areas: treatment planning, surgery, and prosthodontic restoration.

In this article, I set out some of the questions that will be answered in my lecture.

Errors in treatment planning

The best way to avoid making errors in treatment planning is to know when to say 'no'. There are some cases where implants simply are not the right solution.

Errors in surgery

When surgeons operate in the posterior mandible is (or should be) exceptionally wary of damaging the inferior dental nerve. The damage can be done in an instant, sometimes without warning, and can be permanent. But with guided surgery, one can place an implant within one mm of the position selected using computer software.

Another nightmare scenario is losing an implant during surgery. This happened to the operating surgeon in Figure 4. With a careful look at the x-ray you will see where the lost implant ended up: I will explain in the lecture how to get it back out.

Flapless surgery can also be problematic. The patient in Figure 5 was referred to me as having had a simple extraction when it was losing an implant during surgery. This happened to the operating surgeon in Figure 4. With a careful look at the x-ray you will see where the lost implant ended up: I will explain in the lecture how to get it back out.

There are also interesting diagnostic challenges raised by patients who present with unexplained problems. For example, see Figures 6, 7, 8 and 9. What could have caused these problems? (The cause of the problem in Fig 10 is obvious: the patient did not pay her bill!)

The surgical part of my lecture will end with a fascinating study of the patient in Figure 11: what went wrong here? And what urgent steps should be taken?

Errors in prosthetics

Another extraordinary case is in Figure 15. What could have caused this patient's pattern of damage?

I look forward to sharing the
answers to these questions with you at the lecture. I would also end with this final word of caution: proper training and experience in implant placement is exceptionally important to avoid mistakes and accusations.

I would invite any aspiring implant surgeon to attend my six-day course, or another course with proper accreditation.