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 prosthetic 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
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Errors in prosthetics
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Figure 1 might be one such example. This young lady was referred to me with a special request. Something has obviously gone wrong with the implant placement. Can her smile be recovered in time for her wedding? The answer will be yes (Fig 2), but you will have to come to my lecture to see how.

Errors in surgery
Every surgeon who operates 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.

However, even when guided surgery is inappropriate, a CT scan can be used. This may show, for example, serious difficulties such as when the inferior dental nerve is at the crest of the ridge (Fig 5). As I will show, guided surgery and/or a CT scan should be combined with a detailed protocol of other steps to best manage risk when operating in the posterior mandible.

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 with no bone loss. I was asked to perform flapless surgery. What would you have done?

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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.

About the author

Dr. Scher graduated from University College Hospital, London, UK in 1973. He is registered on the GDC Specialist List in Oral Surgery and Prosthodontics. He is a Visiting Clinical Professor at the Prosthodontic and Implant Department, Temple University, Philadelphia, USA. He is also a Member of Faculty at Lyon University, France, and an Honorary Senior Lecturer in Dental Implantology, School of Health Care Professions, University of Salford, UK, and Honorary Lecturer at the Eastman Dental Hospital. Dr. Scher is a Fellow and Diplomate of the ICOI, and a Director on its Board. He is also a founder member and past President of the Association of Dental Implantology, UK, and still serves as an elected board member. He also holds a Diplomate from the American Society of Osseointegration. He is the Director of the Osseointegrated Sour Course (now in its 20th year), and is the chairman of the editorial board of Implant Dentistry Today. He is published extensively in refereed journals. Dr. Scher was Scientific Chairman at the ADI International Symposium in 1989 and 1991, and was Host Chairman at the ICOI World Congress Aug. 2003 and 2004; Scientific Chairman of ADI International Congress in May 2003; Scientific Chairman of Nobel Biocare Conference in September 2006; and Scientific Chairman of ADI International Congress in May 2007. He is President of Alpha Omega UK 2008/9.

Figure captions:

Fig. 1: Could you restore this implant...
Fig. 2: …in time for this wedding?
Fig. 3: CT scans can show problems such as the ID nerve being at the crest of the ridge.
Fig. 4: Can you find the lost implant?
Fig. 5: Is this case suitable for flapless surgery?
Fig. 6: What is this?
Fig. 7: What is this?
Fig. 8: What is this?
Fig. 9: What is this?
Fig. 10: What is this?
Fig. 11: What would you do immediately for this patient?
Fig. 12: How would you take an impression here?
Fig. 13: What could have caused this?