Twenty-five years after the Toronto Conference on Osseointegration in Clinical Dentistry, experts will return to offer their opinions on the future of osseointegration. The Toronto Osseointegration Conference Revisited will take place May 8-10 at the Metro Toronto Convention Centre. Dr. Asbjorn Jokstad, who is professor and head of Prosthodontics at the University of Toronto and who created the scientific program for this event, answered the following questions for Implant Tribune:

**What will be the main themes of this conference?**

We believe the 25-year anniversary of the inaugural osseointegration conference is an appropriate time to take stock of what has been achieved over the time span and to focus on what is emerging as new and innovative developments in the field of osseointegration. The main themes will reflect the many significant developments of the current and future application of implants to support intra- and extra-oral prostheses. This is not a function primarily of a specific implant surface, treatment procedure and/or loading protocol, but can best be understood by conceptualizing the individual elements involved in placing one or more endosseous implants to support an intraroral prosthesis. It is the refinement of each of these individual elements that has contributed to the understanding of osseointegration itself and improved the technology to solve our patients’ problems even further. Several intertwined treatment planning phases can be identified in the practical application process, i.e., a total treatment planning strategy, a surgery planning strategy and a restorative planning strategy. These focus on patient centered considerations, e.g., risk factors, healing predictability and

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**Revisiting Toronto Conference**

By Sierra Rendon
Managing Editor

Instrumentation for dental implant procedures has not changed significantly during the last few decades. Most of these procedures share one parameter in common; they are primarily resective in nature. When tissue is traumatized, it goes through an inflammatory cascade, which results in edema, erythema and discomfort for the patient. A period of tissue remodeling then occurs in which the production of matrix metalloproteinases (collagenases, elastases and gelatinases) occurs. These enzymes are the primary inducers of both soft and hard tissue remodeling. Crestal bone remodeling around implants is one result of the action of these compounds. The loss of peri-implant osseous support may cause the collapse of the interdental papilla, resulting in compromised gingival display in the aesthetic zone.

A paradigm changing modality has recently become available for use in oral implantology. The Waterlase MD laser (Biolase Technologies, San Clemente, Calif.) has been used to treat peri-implant tissue for the past eight years.

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**The biologic basis for the use of lasers in second phase implant uncovering**

**By Robert J. Miller, DDS, FACD**

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