



## Dear Readers, dear Colleagues,

Even though the year 2017 is already a couple of weeks old, I would nevertheless like to take the opportunity to once again wish you the very best of health, luck and success. And at the same time I would like to thank all my peers for their excellent cooperative engagement and support.

I have the pleasure of informing you that as a matter of routine the position of ZZI editorship has once again changed. We were able to win over Prof. Dr. Dr. Bilal Al-Nawas for editorship of the scientific part of ZZI. Thanks to his extensive clinical and scientific expertise in implantology we have all been familiar with him for years, last but not least as a result of his extensive involvement in our scientific professional associations. In future he will also cooperate in ensuring the quality of ZZI by his extensive experience in implantology.

2017 will be an exciting year providing further scientific and clinical insight into your implantological activities. In addition to expanding indications in the field of implantology quality assurance will be of paramount significance in this year, too.

In this ZZI publication you will find information worth reading on education and documentation in implantology on the basis of the German law governing patients' rights [Patientenrechtgesetz].

The DGI S3 Guideline also gives a new perspective with regard to peri-implantitis. For the very first time consented strategies for treating mucositis and peri-implantitis have been defined. This can be seen as a substantial achievement on the road to success, as a standardisation in mucositis and peri-implantitis treatment was thus defined on the basis of reference data. In future this might offer substantial guidance in making treatment decisions.

In 2017 we also received decision guidance in implant treatments for patients with diabetes and for patients under

ongoing treatment with antiresorptives. This step is a major progress in restoring the masticatory function with implant-supported dentures among these patients, as a graduated treatment concept is described in the guidelines on implant treatment for diabetes patients and patient with antiresorptive medication.

The contribution on treating a patient with Down syndrome in this publication is exemplary for expanding the indication of implants to restore the full masticatory function. The use of implants in underlying general diseases or multimorbid patients will in future still have to be carefully considered in each individual case and determined on the basis of the characteristics of the general disease, individual patient compliance and the patient's individual hygiene capability. It is necessary to ascertain that as a result of individualised implantation and treatment concepts an expansion of the treatment spectrum has been implemented over the past years and has already been published in literature presenting encouraging data. We can surely expect further data in future.

I hope you enjoy reading this publication and would be delighted if you find the implantological data and information to be beneficial in your daily treatment of patients.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Stefan Schultze-Mosgau'.

Stefan Schultze-Mosgau