Sinus lift: a new playground for the periodontist

The first bone grafts from extra oral sites were developed by oral surgeons experienced in reconstructive maxillofacial surgery. These techniques are still indicated for large bone augmentation or for sinus lift, when the residual bone height is minimal.

The development of autogenous bone grafts with intraoral harvesting, and, more recently, the use of bone substitutes as fillers, allow practitioners to apply these techniques before the placement of implants. Today, based on empirical experience, all agree that such techniques are indicated for most patients.

Use of autogenous bone graft leads to significant improvement and no one questions the osseointegration of implants in grafted bone. Satisfactory clinical results are also obtained with synthetic graft materials. However, the nature and the quality of the osseointegration remains a matter of speculation. The first histological analyses together with published clinical reports are very encouraging for the future, but no scientific evidence is yet available to confirm the predictability of the method.

These techniques erroneously give the impression of being too simple. They require from the clinician a complete mastering of the surgical aspects, a good selection of the case and precise planning with suitable imaging techniques.

Periodontists who are trained to practise delicate surgery are well prepared to perform these procedures. For clinicians, sinus lifts represent a new field of activity. For others involved in clinical research, they represent a new area of investigation.

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