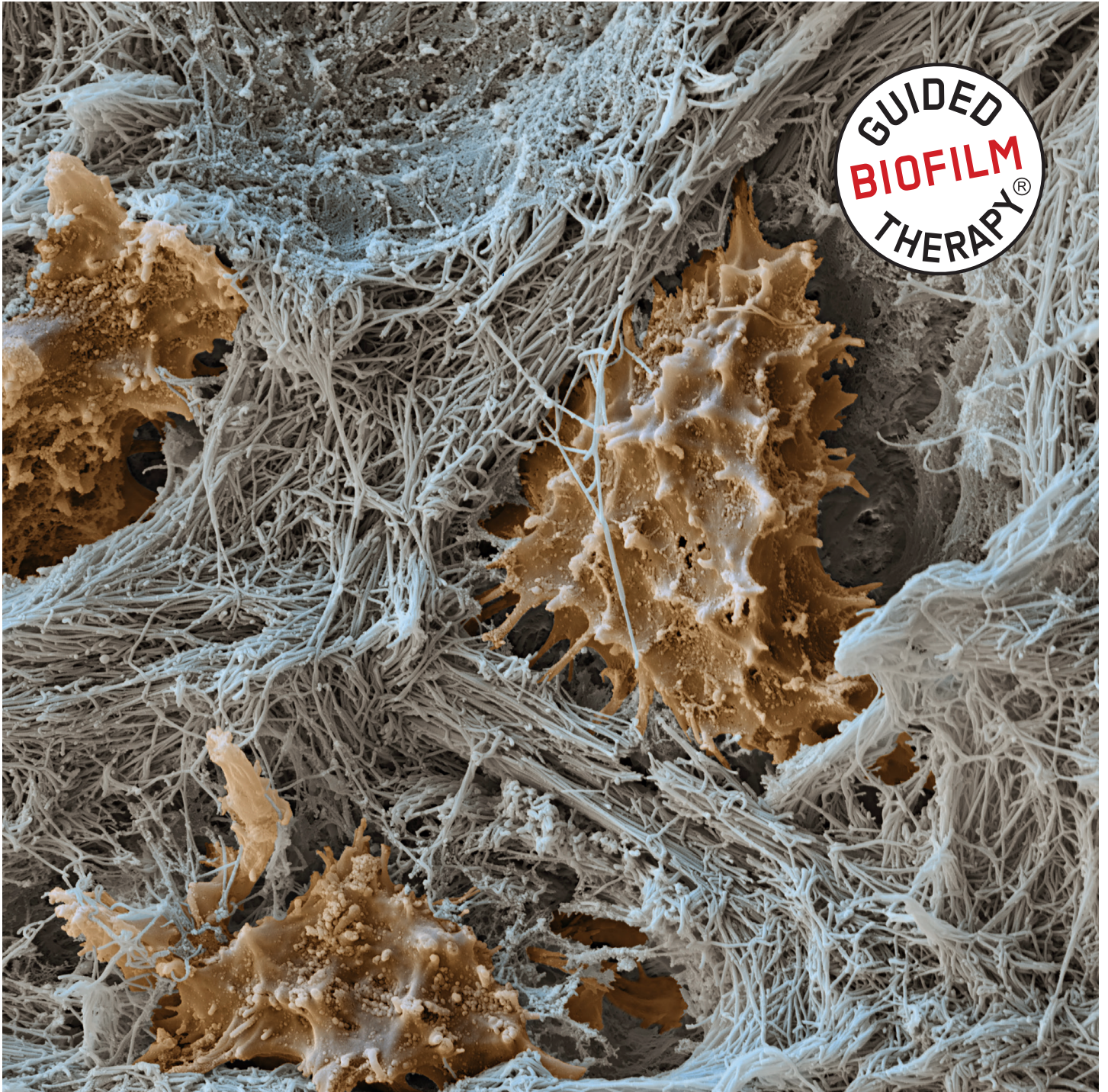


GUIDED **BIOFILM** THERAPY

PRESS ARTICLES AND CLINICAL EVIDENCE 2024 - VOL. 4



Osteoblasts in collagen matrix (original magnification×5000).

Gruber R, Stadlinger B, Terheyden H. Cell-to-Cell Communication: Cell Atlas
Visual Biology in Oral Medicine, 1st Edition, Quintessence Publishing, Berlin, ©2022
EMS Private Label edition; SEM images: eye of science.

SDA 
SWISS DENTAL ACADEMY

GBT IN THE PRESS



The fourth and final edition of this year's collection of press articles and studies, spanning September to December, alongside another highlight of this year, focuses on the Guided Biofilm Therapy (GBT) protocol, showcasing its systematic approach, strong evidence, and high patient acceptance. Discover valuable insights to elevate your prophylaxis practice.

WINNER IN PREVENTION: THE GBT EXPERIENCE SURVEY OF OVER 400,000 PATIENTS WORLDWIDE

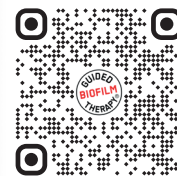
► ZMK Vol. 40, Issue 11-12 2024,
November/December 2024, 684-685



<https://gbt-dental.com/TS-Vol4-Press-1>

GBT IN PERIODONTITIS TREATMENT - DENTAL HYGIENIST PRACTITIONER AWARD 2024

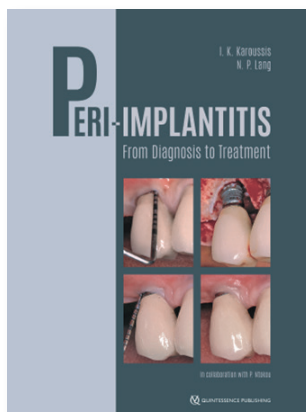
► dzw, Die Zahnarzt Woche, 32/2024



<https://gbt-dental.com/TS-Vol4-Press-2>

Please find below the latest comprehensive reference guide which delves into key such as the etiology, diagnosis, prevalence, and risk factors of peri-implantitis. It also explores a range of treatment modalities, from non-surgical approaches to advanced resective, regenerative, and soft tissue augmentation techniques. **GBT** serves as a foundation managing peri-implant diseases, encompassing prevention, therapy, and lifelong maintenance.

Authored by renowned experts in implant dentistry and periodontology, this book integrates the latest research with practical case studies, providing real-world scenarios commonly encountered by clinicians in daily practice.



PERI-IMPLANTITIS

► From Diagnosis to Treatment
1st Edition 2024, Book Hardcover;
Ioannis K. Karoussis / Niklaus P. Lang



<https://gbt-dental.com/TS-Vol4-Book>

GUIDED BIOFILM THERAPY

1. CLINICAL COMPARISON OF GUIDED BIOFILM THERAPY AND SCALING AND ROOT PLANING IN THE ACTIVE PHASE OF PERIODONTITIS MANAGEMENT

Mensi M, Sordillo A, Marchetti S, Calza S, Scotti E.

Eur J Dent. 2024 Nov 7

<https://pubmed.ncbi.nlm.nih.gov/39510522/>

CLINICAL RELEVANCE

- ▶ Guided Biofilm Therapy (GBT) achieves clinical outcomes comparable to Scaling and Root Planning (SRP) in the initial treatment of patients with stage III and IV periodontitis, particularly regarding pocket reduction percentage and improvement in periodontal parameters. The treatment duration is similar for both methods. The choice between GBT and SRP depends on the operator's proficiency with the technology and their level of comfort. GBT is a viable option for managing the active phase of periodontitis in patients with stages III and IV periodontitis.

2. PERIODONTAL AND PERI-IMPLANT BLEEDING ON PROBING IN PATIENTS UNDERGOING SUPPORTIVE MAINTENANCE: A CROSS-SECTIONAL STUDY

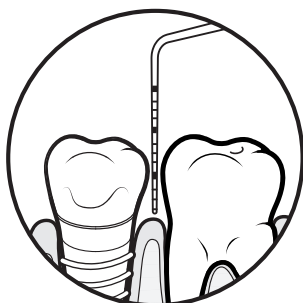
Outatzis A, Nickles K, Petsos H, Eickholz P.

Clin Oral Investig. 2024 Nov 7;28(12):633.

<https://pubmed.ncbi.nlm.nih.gov/39505743/>

CLINICAL RELEVANCE

- ▶ This study highlights that peri-implant sites show a higher prevalence of bleeding on probing (BOP) compared to periodontal sites, particularly in patients undergoing supportive therapy. Consistent with this, the Guided Biofilm Therapy (GBT) protocol underscores the importance of probing every implant to evaluate the condition of the surrounding soft tissues.



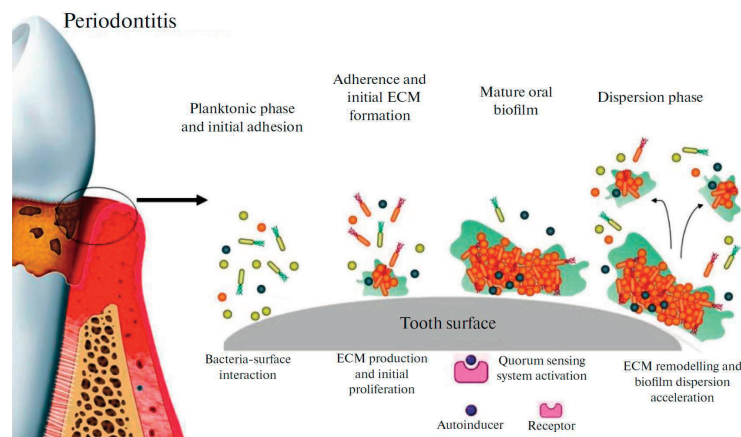
AIR-FLOWING®

3. A COMPREHENSIVE REVIEW ON IMPACT OF MICROBIAL BIOFILMS ON DENTAL PLAQUE FORMATION AND ITS TREATMENT STRATEGIES

Geetha Priya Subramanian, Tamil Selvan Sukumar - Biology Bulletin Reviews, 2024. .
<https://link.springer.com/article/10.1134/S2079086424600322>

CLINICAL RELEVANCE

- ▶ AIR-FLOWING® for supragingival biofilm management is much more effective and more convenient to use than rubber cup polishing in individuals with relatively good oral health. Guided Biofilm Therapy (GBT), when performed regularly, helps to keep the bacteria in a planktonic phase, hence preventing disease.

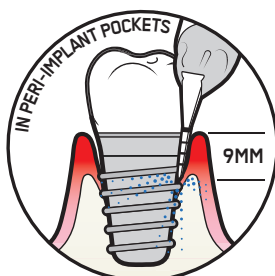


4. IMPACT OF GLYCINE POWDER AIR-ABRASIVE DEBRIDEMENT ON PERI-IMPLANT MUCOSITIS: A RANDOMIZED CONTROL TRIAL OF CLINICAL, MICROBIAL, AND IMMUNOLOGICAL CHANGES

Clin Oral Partido B, Saraswat S, Kumar PS - Implants Res. 2024 Sep 28.
<https://pubmed.ncbi.nlm.nih.gov/39340233/>

CLINICAL RELEVANCE

- ▶ AIR-FLOWING® demonstrated a significant, early and sustained change in species richness with health-compatible species and loss of pathobionts over a period of 3 months in comparison to ultrasonics; particularly a decrease in some pro-inflammatory cytokines. In line with GBT, patients with peri-implant mucositis must attend a recall at least every 3 months in order to resolve clinical inflammation and restore host microbial homeostasis.



5. LONG-TERM IMPLANT MAINTENANCE: A SYSTEMATIC REVIEW OF HOME AND PROFESSIONAL CARE STRATEGIES IN SUPPORTIVE IMPLANT THERAPY

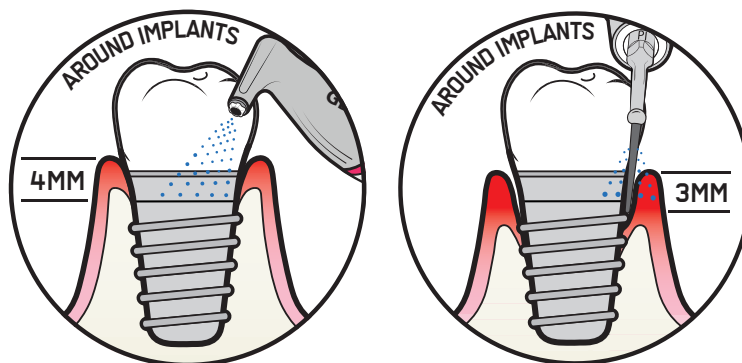
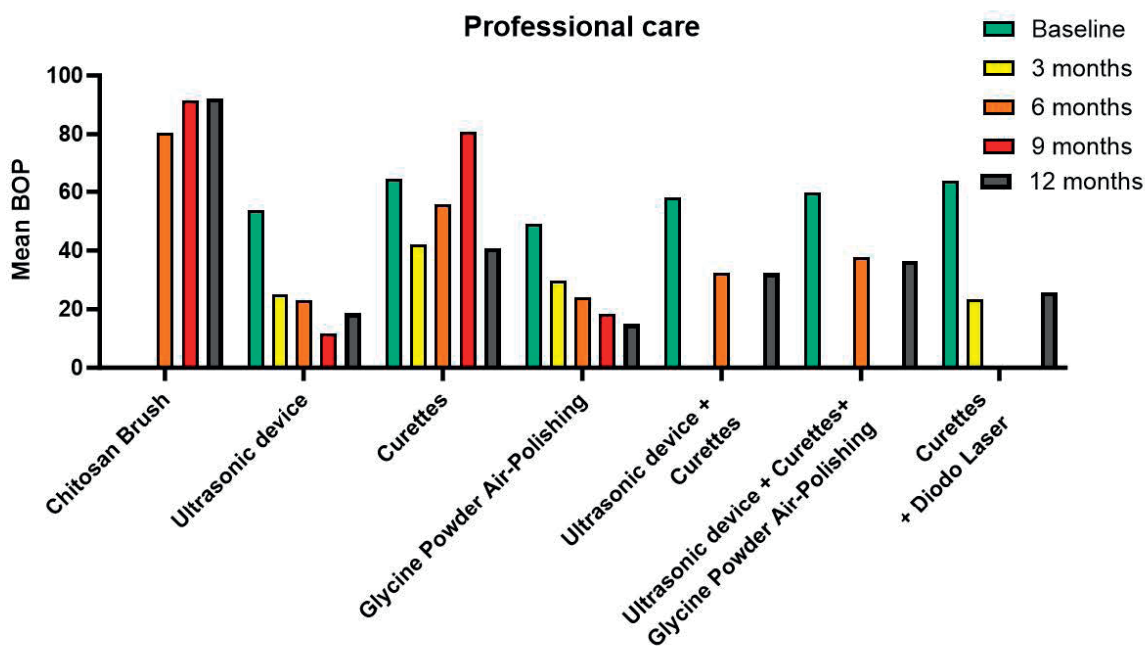
Araújo TG, Moreira CS, Neme RA, Luan H, Bertolini M.

Braz Dent J. 2024 Oct 25;35:e246178.

<https://pubmed.ncbi.nlm.nih.gov/39476119/>

CLINICAL RELEVANCE

► This review highlights the efficacy of various home and professional care techniques for long-term implant maintenance compared to standard methods like brushing and mechanical debridement. AIR-FLOWING® and ultrasonic devices show potential in reducing peri-implant inflammation. For home care, while many techniques effectively manage tissue inflammation, water flossers with chlorhexidine appear particularly promising. In line with the Guided Biofilm Therapy (GBT) protocol, homecare and professional teeth cleaning both play a crucial role for long-term treatment success.



6. NON-SURGICAL TREATMENT OF PERI-IMPLANTITIS

Meyle, J., Fischer-Wasels, L.

Br Dent J 237, 780–785 (2024)

<https://www.nature.com/articles/s41415-024-7950-2>

CLINICAL RELEVANCE

- ▶ Non-surgical peri-implant treatment offers a less invasive and often more comfortable option for patients. This approach plays a vital role in reducing inflammation and bacterial presence at the site, effectively preparing the tissues for surgical intervention. By improving the condition of the local tissues, it paves the way for smoother surgical procedures and decreases the risk of failure in reconstructive surgeries.
- ▶ Aligned with the GBT protocol, the primary goal is to halt disease progression and promote healing by eliminating bacterial biofilm and thoroughly cleaning the implant surface. Successful management of peri-implant diseases should prioritize enhancing biofilm control through non-surgical methods, which are typically within the scope of general care providers. GBT, with its minimally invasive methods, forms the basis for non-surgical peri-implant therapy.



ON IMPLANTS

