



## A dangerous mix: periodontal disease and implants

Periodontal disease and peri-implant tissues share similar microbial and host-response pathways, so untreated or active periodontitis significantly increases the risk of peri-implantitis and implant loss.[1]

Current guidelines emphasize that active periodontal disease must be diagnosed, treated, and stabilized before implants are planned or placed. Patients with a history of periodontal disease remain at a higher risk for peri-implant issues for life.[1]

When clinicians ignore this, implant failure is likely and is difficult to defend in case of litigation.

A New York Case that started in 2021 involved a patient who underwent implant surgery and restoration. The plaintiff alleged that the dentist failed to treat his periodontal disease prior to proceeding with the implants and did not adhere to standard surgical protocols.

*“The plaintiff further contended that, inter alia, the defendants negligently performed diagnostic procedures to determine the extent and nature of her dental problems, negligently prepared her teeth for crowns, negligently placed implants, failed to inform her of the risks and consequences of the prescribed treatment, and thereafter negligently abandoned her.”*

*“The plaintiff still has problems eating, carries Fixodent glue to apply to her teeth every few hours to keep the implants in place, and requires more dental work. The court finds that the plaintiff was left in a “deplorable” condition after her treatment with the defaulting defendants’ practice and now requires reconstruction of her upper and lower jaw, including the placement of additional implants, temporary bridges, final bridges, root canal therapy, and periodontal surgery. The bone grafts currently placed in the plaintiff’s mouth will last her for “a couple of years” before they need revision.”*

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In 2025 The patient was awarded the sum of \$266,500.00 as compensatory with 9% interest since 2021 in addition to \$60,000.00 as punitive damages with 9% interest since 2021.

Periodontal evaluation before dental treatment may reduce malpractice risk, adverse outcomes. Claims often arise due to ignoring or delayed treatment of periodontal disease.

Practitioners should spend a significant part of their chairside time on preoperative diagnosis and treatment planning. Treatment plans should be outlined in writing and detailed and includes a maintenance plan.

The combination of proper clinical skills, good communication, and good dentist-patient relationships will reduce the risk of litigation or board action.

[Cisneros v Rock](#)

2025 NY Slip Op 33673(U)

[1][Microbial boundaries in peri-implantitis: a review of pathogen-related advances](#)

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