Undiagnosed or Uncontrolled Type 2 Diabetes Mellitus Is a Cause of Implant Failure

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Dentists have many patients with both diagnosed and undiagnosed type II diabetes mellitus in their practices.

In addition to carotid plaques seen on panoramic radiographs, you can detect more serious calcifications called **MAC** (medial arterial calcifications) on CBCT images; that is, if you know where to look, what you're looking for and what image processing tools to apply.

Clinicians who place implants believe that they can do it with impunity in a "well-controlled" diabetic patient. This may not always be true. This program will educate the clinician on how to assess the patient's true diabetic status more accurately, including undiagnosed type II diabetes with the goal of reducing implant failure.

37.3 million people, or 11.3% of the U.S. population, have diabetes. An estimated 28.7 million people – or 28.5% of the population – had diagnosed diabetes. Approximately **8.5 million people have diabetes but have not yet been diagnosed (2022)***.

Objectives

At the completion of this program dentists will understand:

- what segments of the internal carotid arteries are actually imaged in a typical CBCT scan
- what patterns of calcification may indicate Type 2 Diabetes Mellitus
- The link between periodontal disease, diabetes and implant failures
- How you can use image processing tools to make the changes more apparent
- When to refer your patients with these detected calcifications and what tests to request to reduce the risk of implant failure

*National Diabetes Statistics Report, 2020
https://diabetesresearch.org/wp-content/uploads/2022/05/national-diabetes-statistics-report-2020.pdf