



## Comment on “Survival rate of dental implants in the anterior mandible: a retrospective study”

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To the Editor,

I have read with interest the study by Kim et al.<sup>1</sup> evaluating anterior mandibular implant survival according to prosthetic and patient-related factors. While the authors briefly acknowledge the retrospective design limitation, we believe the omission of key clinical variables—bone quality, periodontal status, oral hygiene level, and parafunctional habits—warrants more critical discussion.

These factors are well-documented determinants of implant prognosis. Poor bone density and quality compromise primary stability and long-term survival<sup>2,3</sup>. A history of periodontitis and inadequate plaque control significantly increase the risk of peri-implantitis and implant loss<sup>4</sup>. Parafunctional habits such as bruxism have also been linked to higher complication and failure rates<sup>5</sup>.

Without recording and adjusting for these variables, it is difficult to attribute observed survival differences solely to prosthetic or systemic factors. For example, the apparent influence of loading protocol could be confounded by differences in baseline bone density or occlusal forces.

I suggest that future research prospectively include these parameters or stratify analyses accordingly, to strengthen causal inference and enhance the clinical applicability of findings.

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### Author’s Contributions

The manuscript was written by P.G.G.

### Funding

No funding to declare.

### Conflict of Interest

No potential conflict of interest relevant to this article was reported.

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**How to cite this article:** PG G. Comment on “Survival rate of dental implants in the anterior mandible: a retrospective study”. *J Korean Assoc Oral Maxillofac Surg* 2025;51:328. <https://doi.org/10.5125/jkaoms.2025.51.5.328>