Soft tissue first: Rethinking implant design

Peri-implant soft tissue determines stability, aesthetics and long-term success. But why do slim implant geometries, one-piece concepts and zirconia open up new biological opportunities—and why is perfect aesthetics always the result of sound biological function?

Interview with Dr med. dent. Holger Scholz, Implant Dentist

Dr Scholz, peri-implant soft tissue is at the centre of modern implant concepts. Based on your clinical experience, why is it crucial today to design implant geometries consistently from the perspective of the soft tissue?
Implant geometry is relevant for both bone and soft tissue. The geometric modifications in the osseous area have been extensively optimised, including those of ceramic implants, so I see limited further development potential in that regard. In the field of soft tissue, however, numerous innovations have emerged in recent years. I had the opportunity to accompany one particularly exciting development from the very beginning.

In my perception, implant diameters have tended toward smaller dimensions in order to preserve more vital bone and thereby enhance stability. bredent has taken a comparable step for the soft tissue with its Tissue Line implant design. The slim transmucosal profile creates space for healthy and stable soft tissue. Combined with the advantages of a one-piece zirconia implant, the result after healing is stable soft tissue firmly attached to the implant surface in the sense of a pseudo-attachment which is nowadays called mucointegration of the soft tissue. Particularly in immediate implant cases, I regularly observe an attachment gain of one to two millimetres.

In which indications do you particularly benefit from the additional soft-tissue space created by the slim Tissue Line of whiteSKY, and how does this specifically affect stability, healing, and aesthetic outcomes?
In short: More space for soft tissue results in more stable tissue. The absence of a microgap in one-piece implants eliminates potential bacterial niches and subsequent infiltration. Zirconia shows the best soft-tissue attachment among all dental materials—again referring to the concept of pseudo-attachment or mucointegration.

As a result, after the healing phase we often see rather an excess than a deficiency of soft tissue—a luxurious situation for achieving optimal aesthetics. After approximately five years of observation, the outcomes compare very favourably with other implant designs.



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What role does zirconia play in combination with implant design, particularly with regard to soft-tissue attachment, absence of inflammation, and long-term peri-implant health?
Various studies demonstrate that zirconia is currently the most favourable material in the soft-tissue environment, both in terms of tissue attachment and aesthetics. The stronger and more stable the soft-tissue attachment, the lower the risk of peri-implantitis and the better the long-term prognosis of the implant.

Reflecting on your clinical experience with whiteSKY: What key message would you like to share with colleagues working in the aesthetic field who wish to align their surgical concepts more closely with sustainable soft-tissue mucointegration?
As you may have noticed, fully metal-free restorations are, from a dental perspective, my great passion. My second focus is the holistic health of patients—not only oral health. Inflammation represents one of the epidemics of the 21st century, with dramatic consequences for both general and oral health.

Zirconia is currently the most biocompatible material available, associated with the lowest inflammatory reactions. Perfect aesthetics is merely the consequence of biologically healthy conditions—because, as we know: form follows function.

Thank you for this insightful interview.

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bredent company profile



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