

Frequently Asked Questions About **DENTAL IMPLANTS**

What are dental implants, and what are they made of?

Dental implants are metal screws or cylinders that are inserted in to the jawbone and used to support artificial teeth. They attempt to mimic our natural tooth roots. The majority of modern implants are made of commercially and medically pure Titanium. This is the same metal that has been successfully used in hip replacements for many years. Titanium implants are able to bond with bone. It is inert and is not known to cause any type of rejection phenomenon.

Some implants are coated with materials that enhance the attachment of the implant to the jawbone.

How are implants used ?

Implants may be used to replace teeth in single-tooth spaces, groups of two or more missing teeth, or where the teeth are completely missing in one or both jaws. Once placed, the implants are used to support individual crowns, or bridges that are retained rigidly to the implants. Implants may also be used to help retain removable dentures more securely (implant-retained over-dentures).

What are the advantages of implants?

Dental implants provide a number of benefits for people seeking alternatives and solutions to the problems created by tooth loss. These benefits include:

- Renewed ability to chew and speak properly
- Restoration of facial aesthetics
- Preservation of remaining jaw bone structure
- Reduction of possible gum problems and infections
- Increased confidence and self esteem as a result of all of the above.
- Conservative replacement of a missing tooth instead of a fixed bridge where teeth may be prepared/cut unnecessarily on either side of the missing tooth.

How do implants bond with bone?

Implants bond with bone by a process known as osseointegration. When first placed into bone, the implant is held by mechanical locking and frictional grip with bone. Microscopic spaces remain between the implant surface and bone. Over a period of 2 to 6 months, bone gradually grows up against the implant surface until no space remains. The implant is then said to have integrated with the bone.

Am I a candidate for implants?

Anyone in reasonable health who wants to replace missing teeth. You must have enough bone in the area of the missing teeth to provide for the anchorage of the implants. Some people are missing all their teeth and most of those are excellent candidates for dental implants, but today, we use implants to replace small bridges, removable partial dentures and even missing single teeth.

Most patients who are healthy and not restricted from undergoing minor dental surgical procedures, and who have good oral hygiene can have dental implants. Your dentist will assess the potential implant site to determine whether there is sufficient bone volume and gum thickness to allow placement of an implant.

Who is not a candidate for implants?

Not every one can have implants. Certain factors, such as diabetes, smoking, bleeding disorders, certain medications as well as compromised physical and mental integrity, may influence the procedure and outcome of the treatment.

How is the bone assessed?

The dentist begins by undertaking a clinical examination that will involve inspection, palpation and gentle probing of the potential implant site and adjacent teeth. In straightforward cases, simple dental x-rays are usually sufficient to examine the bone. In more complex cases, specialized implant x-rays, known as tomograms, are usually required (either plain x-rays or CAT scans).

What if I don't have enough bone?

By utilising various bone augmentation procedures, or in some cases, by grafting bone from other sites, the dentist is usually able to provide adequate bone to support the implants.

Why do dentists recommend implants?

In a case where a single tooth is to be replaced, perhaps the most important reason being that they represent the best solution by being the most conservative treatment long term of replacing that single tooth. A single tooth solution for single tooth problem. Compared to a fixed bridge, implants offer the situation whereby the adjacent teeth are not cut or ground down and represent a stand alone solution that has a high success rate and can also be very cost effective long term.

People are becoming increasingly aware of the importance of a healthy dentition in their overall well-being and ability to enjoy life. Dentures and removable bridges have some problems, because they are relatively loose and unstable. Implants can provide people with replacements for missing teeth, that are both functional and aesthetic.

Will my implant teeth function like my real teeth?

Nothing will function as well as natural teeth. However, implant crowns and bridges function much better than removable teeth and can feel very similar to the natural dentition. Implant-retained over-dentures will feel much more secure than conventional full dentures.

What is the success rate of dental implants? What are the chances of rejection of implants?

Success depends very much on where in the jaws the implants are placed and what they are used to support. The best position for implants is in the front portion of the lower jaw, where success rates can be very close to 100%. In other areas of the mouth, success rates can drop significantly. According to figures that we have today, the success of implants in the front part of the upper jaw are anywhere from 90-95%. Success rates of implants in the back part of the upper and lower jaw can be in the 85-90% range.

Implants that fail do so because the bone has not integrated sufficiently with the implant surface. Hence, implants are not "rejected" like an organ transplant, they simply fail to bond with the bone. This may occur if the bone is very soft at the time the implant is placed, or if the implant is initially unstable. Other reasons include inadvertent loading of the implant via a removable denture or by the action of chewing hard food over the implant site at the early stages of healing. Infection may also cause an implant to be lost. Most modern implant systems report success rates of 85-95% over a 5 to 15 years period.

Can smoking affect the success of implants?

Smoking is one of the biggest risk factors in failure of dental implants. Recent studies estimate that the chances of failure increase by two to three fold in a smoker. Smoking affects the healing of bone and soft tissue, by reducing the nutrients and minerals in the tissues and by reducing blood supply.

What happens if I have dental implants and they are rejected?

Can an implant be replaced if it is lost?

Occasionally dental implants fail to integrate with the bone or, as some people say, they are rejected. In most situations, an implant can be readily replaced if it fails to bond with the bone provided that adequate bone and gum tissue is present. In most instances, they are replaced with another implant, usually of a slightly larger size.

Do I have to go without my "teeth" while the implants are bonding to my jaw bone?

This varies greatly with the individual circumstances of each patient. In most situations, patients leave the office with some form of prosthesis in place, especially if the smile is involved. Every patient and procedure is evaluated separately and there might occasionally be a recommendation that a patient go without their prosthesis for a short period of time.

Will I be able to wear my denture after surgery?

In most cases, dentures and other temporary appliances can be worn immediately after implant surgery. The exception would be in cases where many teeth are missing, or where all the teeth are missing in one or both jaws. In these situations, dentists will often recommend that dentures not be worn for up to two weeks following surgery.

What procedures are involved with the placement of implants?

In most cases, implants may be placed using local anaesthesia in the dental office. Sterile drapes and gowns are used to maintain optimal cleanliness. In more complex cases, your dentist may recommend that treatment be performed while you are under general anaesthesia in a hospital environment.

How long does treatment take?

In most situations, a healing period of between 3 to 6 months is required before the artificial teeth can be attached to the implants. A temporary appliance can usually be made to provide function and aesthetics during this period.

How long after a dental implant is placed can it be used to anchor my new teeth?

The original protocol states that we must wait three to four months in the lower jaw and four to six months in the upper jaw before constructing the new dental prosthesis that will be supported by the implants. In recent years, however, there has been a lot of research indicating that this period can be shortened in certain circumstances, even to the point of loading the implants as soon as they are placed. Each case has to be assessed on its merits, and the dentists placing your implants will advise you what's best in your particular situation.

Does it hurt?

Almost without exception, patients report that there was far less discomfort from the implant placement than when they had the tooth or teeth extracted. The actual procedure to surgically place a dental implant is usually done under local anesthesia and is generally not at all painful. When the anesthesia wears off about three or four hours later, you might expect some discomfort. The level of discomfort is quite different from patient to patient, but most patients do not have significant problems. Usually, only very mild analgesics are needed for a day or two. There are exceptions to every rule, and some patients do have varying degrees of pain or discomfort which may last for several days. Swelling and bruising may also develop. Most patients report being surprised at how little discomfort or swelling they experienced.

What kind of follow-up is required?

After initial implant placement, regular follow-up visits are required to ensure that healing is progressing satisfactorily. After completion of the artificial teeth, regular check-ups are needed every 6 to 12 months. At these check-up appointments, the implants are inspected and examined to ensure that the supporting gum and bone remains healthy. X-rays are taken to examine the bone structure around the implant.

What kind of home-care is required?

For the implant to function well and to remain healthy, proper oral hygiene must be performed at home on a daily basis. Special cleaning aids (brushes, and floss) and a water jet irrigator (waterpik) are widely available. Your dentist will provide instruction on the proper use of these cleaning aids.

DR JOHN TIA has had training locally and overseas(Singapore, Korea and Australia) in the treatment provisions of dental implants .He has completed intensive training and experience in the 5 major implant systems available worldwide today, including Branemark Nobel Biocare, 3i implant systems, ITI, Imtech Mini Implant system and most recently, the Dentium Implantium system.

*Should you have any further questions, please feel free to ask more questions to **Dr JOHN TIA** who will be more than happy to answer and clarify any further questions that you may have.*

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*Suite 1, Level 1,
80 Hampden Rd ARTARMON
2064 NSW (02) 9419 7484.*

www.ArtarmonFineDental.com