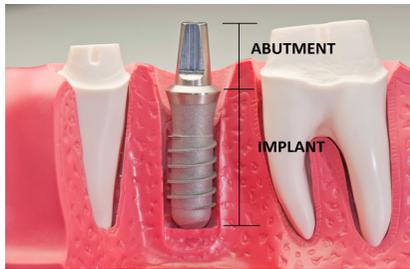


Implants

A Guide for patients

Dental implants may be used to replace one or more missing teeth. A dental implant is an artificial metal 'root' that is inserted into the jawbone. It bonds to bone over time and is integrated into the jawbone thus anchoring the attached artificial tooth into the jaw. The artificial tooth (crown) is attached to the implant by means of an abutment. Sometimes, the implant 'root' may be fitted with a press stud like attachment to clip onto a denture to increase its stability.



BENEFITS OF DENTAL IMPLANTS

Dental implants can prevent long term bone atrophy (bone loss) in the jaw following extraction of teeth. This may prevent hollowed out or collapsed cheeks, and reduce the risk of adjacent teeth becoming loose or moving withstand greater bite pressure than dentures do not require extensive preparation of adjacent healthy teeth like bridges require the same care routine as natural teeth i.e. brushing and flossing

The percentage success rate of implants is around 97% at 5 years, and 94% at 10 years.



Whilst dental implants are generally very successful and are designed to last many years, poor oral hygiene may reduce their lifespan. As with natural teeth, plaque and calculus deposits may build up over time and may cause bleeding gums, bone loss and infection. Therefore good oral hygiene and regular maintenance and dental check ups are essential to their success.

Not all dental implant procedures may be able to give a “lifelike” appearance. Some restorations may be very challenging, and it is important to discuss your expectations with your dentist, who will explain any limitations of treatment.

Other factors which may contribute to the failure of an implant are:

- The bone's strength and density
- The location of the implant, as different areas of the jaw differ in their bone height and density
- General health factors affecting the patient's ability to heal e.g. diabetes
- Gum disease (periodontal disease)
- Poor oral hygiene
- Smoking

Like any surgical, medical or dental procedure, implant surgery cannot be guaranteed.

BEFORE IMPLANT SURGERY

Your dentist will discuss with you whether a dental implant is a good option for your treatment. There are certain factors which may determine whether you are a suitable candidate for an implant procedure. General exceptions may include

- Age under 17, as the bones have not completed their growth
- Smoking. Smoking impairs healing and may prevent integration of the implant. It may also cause a breakdown in the integration between implant and bone over time
- Medical conditions such as uncontrolled diabetes may increase the risk of complications including infection and delayed healing
- Pregnancy. General anaesthesia and other medications may harm the unborn child as may necessary CT scans and radiography
- Alcohol/drug abuse may impair the patient's ability to follow the dentist's instructions
- Psychological illness may impair the patient's ability to follow the dentist's instructions

Your dentist will need to know your full medical and dental history to ensure optimal success of your procedure. In particular, your dentist needs to know if you have had :

Haemophilia or other blood disorder

Heavy bleeding following surgery

Rheumatic fever

Heart problems/surgery

Radiotherapy to head and neck / Chemotherapy

Medicines you are taking especially blood thinners and bisphosphonates

Reactions and allergies to anaesthetics or any other drugs

Healthy gums must be ensured before considering implant therapy

DIAGNOSTIC TESTS

Your dentist will need to perform certain diagnostic tests in addition to a full dental examination. These may include

X-rays

CT scans

Photographs

Models

It is important that you discuss the size and shape of final restorations as this may be influenced by remaining natural teeth.

PROCEDURE

Many types of dental implant are available, generally made from titanium. The procedure to place an implant consists of two or three stages.

1. Insertion of the implant into bone. The dentist prepares a site in the gum to access the underlying bone. A drill is then used to prepare the hole which will accept the implant. It is not normally necessary to insert an implant for every missing tooth. The threaded implant is then screwed into the drilled hole. A healing cap may be placed over the implant and the gum sutured, or the gum may be sutured closed without a healing cap. The stability of the implant increases over the next few weeks, after which the osseointegration (degree of bonding to bone) is tested.
2. Insertion of the abutment connector may be as a separate stage or at the same time as insertion.



3. Attachment of the artificial tooth to the abutment, or attachment of the abutment and artificial tooth to the implant. The artificial tooth may be cemented or screwed to the abutment. Over-dentures or “detachable teeth” are designed to be removed.

RECOVERY

- Some swelling, bruising and pain are normal reactions and should resolve within one week. Ice packs can help to reduce pain and swelling.
- Do not drive, operate heavy machinery, or exercise vigorously for a few days following surgery
- Do not smoke
- You may be prescribed antibiotics and pain killers
- Arrange for a friend to drive you home and arrange a few days off work if wished
- Eat soft foods following surgery and drink plenty of water
- Follow instructions carefully regarding after care, especially regarding rinsing and oral hygiene
- see your dentist immediately if pain and swelling worsens or a fever develops

COST

You should be provided with an estimate of cost before you commence treatment. Should any additional work become necessary due to unforeseen circumstances your dentist will advise you of this and any additional costs at the time.

POSSIBLE COMPLICATIONS OF DENTAL IMPLANT PROCEDURES

As with all types of surgical procedures, dental implant surgery carries some risk. Whilst rare, the following risks are for your information, not intended to alarm you. There may be other risks not listed here, and we encourage you to discuss any concerns you have with your dentist.

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General surgical risks

- allergic reaction to anaesthetics
- nausea following anaesthesia
- wound infection which may require antibiotics
- very rarely, excessive bleeding which may be life threatening and require a blood transfusion

Implant surgery risks

- * Affected sinus-where an inserted upper implant contacts or perforates the maxillary sinus resulting in infection and sinusitis. Excessive bleeding is rare.
- * Fractured lower jaw-very rarely the lower jaw may fracture during the procedure which will result in specialist care being required
- * Nerve damage- a nerve called the inferior dental nerve runs the length of the lower jaw. Damage to this nerve by a placed implant may result in numbness of the lower lip, gum and skin around the mouth. It is usually temporary and resolves in around six months, but may occasionally be permanent.
- * Inhalation of equipment/parts. This can cause a range of complications such as obstruction of breathing or infection, and surgery to remove the part may be required.

Specific risks of implant treatment

- * Infection- may be local which may respond to antibiotics. If antibiotic treatment fails the implant may need to be removed. General infection in some people can lead to infections at a site distant to the implant. Infectious endocarditis is a potentially life threatening infection of the heart to which some people are more susceptible.
- * Bone loss. In most cases, bite pressure encourages bone tissue to grow around the implant, but in rare cases the implant may cause bone loss, eventually becoming loose and unstable.
- * Loose implant. The implant may fail to integrate with bone or may become unstable over time (perimplantitis or gum disease around an integrated implant). It requires removal and re-insertion.
- * Loose crown. This will require tightening or replacement of screws. Tooth problems such as chipping/ breakage may require a new artificial tooth to be fabricated
- * Speech problems. Some patients have speech problems following the fitting of artificial teeth which usually resolves, but may require speech therapy
- * In very rare cases fracture of other component or the implant itself. This is more commonly related to bruxism (grinding teeth). Your dentist may advise you to wear/fabricate a splint.
- * Periodontal disease is a significant factor in reducing the life span of an implant.