

IMPLANTS: OPTIONS

Twenty-five years ago, if someone described how missing teeth could be replaced with implants, it might have been called a miracle. Ten years ago, the use of dental implants to replace missing teeth might have been called astounding. Today, implant procedures are called routine. We would like you to have a basic understanding of what implants are, what can be expected from them, and what limitations they might have in your specific area of need.

A dental implant is a synthetic metallic root substitute that is placed or implanted in the jaw bone. It can be used to replace a single missing tooth, provide an abutment (anchor or retainer), replace several missing teeth, or provide added retention to a removable dental appliance such as a full denture. In fact, if you are missing all of your nature teeth, it is possible to have a maxillary (upper) and mandibular (lower) fixed replacements. The replacements do not come out and you cannot remove them yourself.

Two separate events are needed when replacing a missing tooth with an implant. First is the surgical phase in which the implant is placed. In the second phase, the replacement teeth are constructed and fixed into proper position.

The implant placement procedure involves making a small incision in the gum area where the implant is to be placed, preparing a sight in the underlying bone, inserting the implant into the prepared site, and closing the tissue over the implant with several sutures. This area is left undisturbed, usually for 3 to 6 months. More healing time may vary due to the density of your bone. The lower jaw is composed of bone that is more dense than that of the upper jaw. This healing time allows for the slow integration of the implant within your jaw. The implant is held in place by the bone.

After the healing and integration of the implant, the placement site is exposed by uncovering the gum. An abutment post will then be screwed to the implant by internal threads. The crown, bridge, or other type of replacement will be attached to this abutment post. Some dentists prefer to do all phases of the implant procedure themselves, but many choose to perform either the surgical or prosthetic (the actual construction of the replacement device) only. If this is the case, you will be referred to an oral surgeon who will perform the surgical portion of the implant placement.

Implants are very successful. Maxillary and mandibular implants are more than 95% successful. Lower implants have a somewhat high success rate than upper implants. Occasionally, implants fail, but it is not common. Chances of an implant failure, many times, can be determined during or after the surgical phase before the replacement tooth or teeth are constructed.

Smokers take note: there is a heightened risk of dental implant failure among smokers-as much as a 20% greater failure rate!

We will discuss with you the requirements and options for your particular situation. There are usually several possibilities for affectively replacing missing teeth. It is important to decide on the design of the implant-retained replacement prior to the actual implant surgical procedure. Position and alignment of the replacement teeth need to be carefully considered before determining the location of the implant.

If you have any questions about implants, please feel free to ask us.