

Bridges, implants, or dentures for replacing missing teeth? - Smile Solutions

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Bridges, implants, or dentures for replacing missing teeth? - Smile Solutions Skip to content Book Appointment Now Our Services General Dentistry Dental Cleans and Hygienists Wisdom Teeth Emergency Dentistry Root Canal Tooth Fillings Chipped or Cracked Teeth TMD & Teeth Grinding Snoring & Sleep Apnoea Sport Mouthguards Dental Anxiety Cosmetic Dentistry Porcelain Veneers & Crowns Same Day Porcelain Veneers™ Composite Bonding Professional Teeth Whitening CEREC Restorations Invisalign No Braces All-on-4® Dental Implants Gummy Smile Complimentary Cosmetic Consultation Orthodontics Invisalign No Braces Orthodontic Braces Children's Braces and Invisalign Jaw Surgery Dental Implants All-on-4® Dental Implants Conventional & Immediate Implants Dental Bridges Bone Grafting For Implants Dentures Specialist Care Prosthodontists Oral & Maxillofacial Surgeons Periodontists Orthodontists Endodontists Paediatric Dentists Complex Dentistry Children's Dentistry First Visit To The Dentist Children's Dental Emergencies Children's Braces and Invisalign Child Dental Benefit Schedule Kids Teeth Cleaning Tips About Us Why Choose Us Our Team Our Location Technology Before & After Gallery Payment Plans Packages & Offers Contact Us Call Us 13 13 96 Dr Philippa Robinson 7 Dec 2018 Bridges, implants, or dentures for replacing missing teeth? How can I replace my missing teeth? Before we delve into replacement options of bridges, implants and dentures, let's start with why we have to replace missing teeth at all. Is it important to do so? What will happen if you don't get a replacement? The human dentition is designed to function with twenty-eight interacting teeth. Each tooth connects with two other teeth in the opposing arch. When we lose a tooth it's like knocking a brick out of a wall! At first nothing happens, but soon gravity and external forces take over and the wall starts to collapse. It's the same with teeth: gravity and other forces win. The teeth either side of the gap begin to collapse inwards and the opposing teeth start to move. This results in malocclusion (abnormal tooth alignment). The longer you wait to replace missing teeth, the more complicated replacement gets and the more costly. You may even sacrifice replacement options – for example, the bone at the gap resorbs over time and so an implant may not be feasible. There are various ways to replace missing teeth and all have different cost implications and different benefits. It's much like getting from A to B: you can, for example, walk, cycle, scooter, or drive a small, medium-sized or extravagant car. Each will get you there, but differently. The available tooth replacement options are: dentures, implant-supported crowns, and bridges. You will have to rely on the expertise of your clinician to ascertain which is the best option for you. Meanwhile let's have a look at the two most popular long-term replacement options: bridges and implants, and we will discuss dentures a little later. A dental implant consists of an implant crown and an implant screw, whereas a dental bridge consists of two crowns and one dental pontic (floating tooth that replaces the missing tooth). The decision whether to have a dental bridge or a dental implant depends on your unique situation. Every individual circumstance is different. Just as you are unique, so is the decision. The primary consideration as to whether implant or bridge is the best option is the condition of the teeth adjacent to the gap. If the bounding teeth are in good condition, then an implant is probably the way to go. However, if the adjacent teeth are in poor condition, heavily filled, with poor cosmetics (such as big black metal fillings), then they would probably need crowning anyway. In this case it is a no-brainer to opt for the dental bridge. Another consideration is how long the tooth has been missing – whether you've had a recent extraction, or the gap has been there for a while. Is there a tooth still present that needs to be removed? That might mean the need for a temporary tooth if the gap is visible when you

smile. In the case of an implant, you would likely need a temporary denture for a few months, which is not as comfortable as a temporary bridge. Why a temporary denture or temporary bridge? The answer is for healing. In most cases, the recent extraction site needs to heal for several weeks before an implant or bridge can be placed, so that gum shrinkage doesn't affect the cosmetics of the end result. Another consideration in general is the position of the gap. Is it in the front or back of the mouth? These considerations all affect the decision as to whether to have a dental bridge or dental implant. Generally, there is little cost difference between a dental bridge and a dental implant. That said, a dental implant requires adequate bone and if there is insufficient bone for a dental implant then bone grafting may be required. This can push up the cost by several hundred dollars and possibly extend treatment time. If you feel confused as to which tooth replacement option is best for you, don't feel alone. As you can see, there are several factors that come into play in the decision-making process and your treating dentist or specialist will happily assist you to make an informed decision. But what if you're missing multiple teeth in the upper or lower arch? Dentures may be the right option for you. So, please read on! What are the different types of dentures? A denture is a removable prosthetic device used to replace missing teeth and associated gum loss. Dentures are also known by other names – such as false teeth or plates. Dentures can be either partial (replacing one or more teeth) or full (replacing all teeth in one jaw or both jaws). Partial denture These can be made from one of three different materials: acrylic, metal or flexible resin. Acrylic resin partial denture Acrylic is a rigid resin material. In dental prosthetics it is pink for the base and gums and tooth-coloured for the replacement teeth. The partial denture is often held in the mouth through the use of metal clasps which grip onto surrounding natural teeth. When in place, the metal is partially or fully covered by your lips. Metal partial denture This is a denture with a metal base, usually made of an alloy containing cobalt and chrome. The portion of the denture used to replace the gums is made of pink acrylic material (as above), and the part used to replace teeth is tooth-coloured (as above). Metal clasps are usually attached to the metal base. A major advantage of using metal for the base is the ability to make it both thin and strong. Another design advantage over acrylic dentures is the provision of greater support, which minimises impact on your existing teeth. Flexible resin partial denture This is also pink in colour, but is made using a flexible resin which can facilitate insertion into the mouth. It comes with clasps, which may be made out of the same pink flexible material. Flexible dentures usually do not last as long as acrylic or metal dentures but they may be a useful option for some patients. Full denture A full denture is a pink acrylic denture that replaces all of the teeth in one jaw or both jaws. This means that the denture rests on your gums and does not use clasps. For some patients, full dentures may need to be held in place with adhesive. Full dentures can be made either to look like an ideal dentition or to mimic your natural teeth. A little time is usually required to get used to eating and speaking with them. Over-denture An over-denture is a denture that is made to fit over existing teeth or roots, or over dental implants. An advantage of over-dentures over full dentures is that the teeth or implants act as a secure anchor. Immediate denture An immediate denture is one that is prepared in advance of tooth extraction, then placed on the same day as the extraction procedure. This ensures that the patient does not spend any time without teeth. However, the immediate denture cannot fit as accurately as a denture made after teeth have been extracted. It can sometimes be made to fit well with adjustments, but in most cases it is used as a temporary denture, with a new one being made several months later. What are the different types of dental implants? A dental implant is made up of a titanium (or zirconia) post which replaces your tooth root and is surgically placed into the jawbone beneath the gum. This allows your dentist to fit a replacement tooth (or crown) or a bridge to replace the missing tooth/teeth or gaps in your mouth. As the implants are fixed or “fused with the jaw bone”, they do not need to be removed daily and don't come loose like a denture. They also do not need to be anchored to other teeth like bridges and hence do not put pressure on, or compromise the oral health of, the remaining teeth. Endosteal dental Implants These are the most common implants, shaped like screws that are fixed into the jaw bone. These screws, or posts, replace the natural teeth roots of the missing teeth that artificial teeth (crowns or bridges) are then fitted on to. Most of these implants are made of titanium or zirconia that bonds into the bone as the bone heals. Endosteal implants are suited to most patients providing there is healthy jawbone for the implant post to fuse to. Subperiosteal dental implants These are made of metal framework that sits below the gum tissue but above the jaw bone. When the gum heals, the artificial teeth are fixed onto

posts that protrude from the gum. Historically, these types of implants have been considered for patients who do not have sufficient jawbone or who may be unwilling to have more bone added (with bone grafting or augmentation) for an endosteal implant. Nowadays, these types of implants are not very common because advances in implant dentistry are such that we can make use of either shorter implants which function just as well as regular implants or different bone grafting techniques (or donor bone) to add more bone.

Types of dental implants techniques Depending on the jawbone and the specific needs, there are different options for the placement of dental implants.

Conventional Dental implants Conventional dental implants have a diameter of about 3mm to 6mm in width. Following the removal of any tooth, a healing period is required. The implant therapy involves a periodontist carrying out a surgical procedure to place a titanium fixture, or post, into the jawbone, with the implants left to heal and integrate with the bone over about a 3-month period. Once the fixture is fused to the bone (osseointegrated), a small abutment is attached into the implant that acts as an anchor to which the artificial tooth, or crown, can attach.

Immediate Dental implants Immediate dental implants can mean those implants that can be placed at the same visit as the removal of the natural tooth (this is called immediate implant placement) or this can mean immediate load dental implants. Immediate load dental implants are also called same day implants or teeth in a day or 3 days, where the new tooth/set of teeth are placed shortly after the implant posts are placed into the bone. This is an attractive option for patients who have enough healthy natural bone and an implant post secure enough to support the load from an immediately placed tooth on top. The tooth that is fitted soon after surgery is temporary and is designed in such a way to avoid putting too much stress on the healing implant. Once the implants are fully osseointegrated, the temporary teeth will be replaced with a permanent tooth.

Mini dental implants Mini dental implants are much smaller in diameter, about 1.8mm to 2.9mm. Mini implants have been suggested cases where there is insufficient bone width in the jaws to receive regular-sized implants. These are commonly used to support dentures or replacing small front incisors.

Mini ortho implants (miniscrew implants) These mini implants are specifically designed for orthodontic anchorage purposes, providing stable "anchors" to support the desired tooth movement. These are about 1.8mm in diameter and provide temporary anchorage and are removed once the desired tooth movement is achieved.

All-on-4 or Teeth in 3 Days This technique makes use of four dental implants, placed in available bone, to support a complete upper or lower bridge. Special abutments are used so that temporary teeth can be placed on the same day. Again, once the implants are fully osseointegrated, the temporaries will be replaced with permanent teeth. In selected cases where a patient does not have enough jawbone, zygomatic implants may be placed. These implants make use of the cheekbone rather than the upper or lower jaw bone as the implant base.

What are the different types of dental bridges? Dental bridges are appliances that "bridge" the gap created by one or more missing teeth. They are made up of one or more crowns for the teeth adjacent to the gap, along with a false tooth or teeth attached. These anchoring teeth are called abutment teeth and the false teeth are called pontics. The latter can be made from gold, alloys, porcelain, zirconia or a combination of these materials. The result is a dentition that is fully restored in terms of function and appearance.

Conventional bridge Conventional bridges are used when there are natural teeth present on both sides of the gap created by the missing tooth. They involve reshaping the teeth on either side of the gap to make room for cementing crowns on them, with a pontic in between to replace the missing tooth.

Cantilever bridge Cantilever bridges are used when there is an adjacent tooth on only one side of the missing tooth or teeth. The pontic is supported on only one side, rather than on both sides, by one or two crowned abutments (depending on how much support is required/the length of the bridge). Since this type of bridge is supported on only one side, it may act as a lever leading to complications such as fractured teeth or loosened crowns. The risk is high at the back of the mouth due to strong molar biting forces that can weaken the bridge.

Maryland bridge Maryland bridges (resin-bonded bridges) are considered a conservative alternative to traditional bridges. These bridges consist of a single pontic that is held in place by a metal or porcelain framework (wing). This framework is bonded onto the back of the tooth adjacent to the missing tooth with composite resin cement. Minimal alteration of the adjacent tooth is required – your dentist will need to remove only a very small amount of tooth from the back surfaces of these teeth to make room for the wing. The strength of the bridge is limited by the strength of the resin that holds it in place, so it may dislodge if used in the molar areas.

Implant-supported bridge Implant-supported bridges are the most stable means of tooth replacement. The dentist surgically embeds tiny biocompatible implants made of titanium in a patient's jawbone, and these secure the entire restoration. One dental implant is placed for every missing tooth. An alternative is a pontic suspended between two implant-supported crowns. Patients who are considering an implant-supported bridge must have enough healthy bone in their jaws to support the implants. X-rays, CT scans and other tests may be required to investigate the quality and quantity of the bone. The procedure is expensive, invasive and time consuming, with a long recovery time and post-treatment sensitivity. However, the outcome of this treatment option can last a lifetime, making it worth the investment. To help you choose your ideal bridge option, your dentist will plan your treatment depending on the number and location of missing teeth, presence and health of the adjacent teeth as well as quantity and quality of your jaw bone (in implant cases). In complex cases, your general dentist may refer you to see a specialist prosthodontist, periodontist or oral and maxillofacial surgeon. Types of materials used for dental bridges Gold, Silver, and Metal Alloys Strongest and most durable type of restoration Minimal drilling of the patient's natural tooth structure Poor aesthetic quality Recommended at the back of the mouth in the molar area (able to withstand strong biting forces and no interference with aesthetics) Porcelain-Fused-to-Metal (PFM) Metal base for strength and stability Overlying porcelain to match the patient's natural tooth colour Natural tooth structure sacrificed to accommodate for both the metal and porcelain layers Better aesthetics than metal bridges All Ceramic Not as strong as metal As they are thicker, they require more alteration of the supporting teeth Superior aesthetics – blend seamlessly with a patient's natural teeth Zirconia Type of dental ceramic Virtually as strong as metal Typically requires very little alteration of the natural tooth structure Comes in a wide range of shades, and a dentist can select a colour that is a near-perfect match for the patient Slightly translucent – can reflect light, much like dental enamel When choosing one material over another, consideration will be given to your budget, lifestyle, overall oral health and personal preference.

Implant dentures: Smile Solutions' teeth in 3 days procedure Smile Solutions has paved the way for a revolutionary alternative to missing teeth and dentures. Thanks to the close collaboration of our registered oral & maxillofacial surgeons, our specialist periodontists our specialist prosthodontists, we can offer patients dental implants that span a full arch in just three days, all within the one location. Traditionally, dental implants and single implant-supported dentures require three to six months' healing time before they can be loaded to achieve oral function. By contrast, Smile Solutions' Teeth in 3 Days procedure allows multiple implants to be loaded almost immediately, without jeopardising their success rates. By distributing the load over four to six implants, stability of the dental implants is achieved across the rigid prosthetic bridge. This is made possible largely by recent developments in medical and dental technologies. At Smile Solutions we use a 3D i-CAT scanner – being the first dental practice in Melbourne to offer this technology – to immediately determine the quality and dimensions of bone support available for teeth implants. What are the advantages? Full-arch implant dentures have various benefits over traditional dentures, including improved ability to eat, better taste and sense of texture of food as the palate is exposed, greater comfort, improved speech and, ultimately, a more aesthetically pleasing look. What does the procedure involve? Providing you are a suitable candidate, as determined by a thorough medical and dental assessment, the Teeth in 3 Days procedure is a routine one. First, the dental implants are put in place. This part normally takes place under general anaesthetic in a hospital as day surgery (that is, you will not be admitted). The surgeon prepares your jawbone and places your implants, then one of our prosthodontists takes impressions of the implants to begin construction of your fixed bridge(s). Usually the next day after surgery, our prosthodontist and dental prosthetist will see you in our specialist centre on Level 12 of the Manchester Unity Building and will check the fit and initial setup of the new teeth on the fixed bridge. On Day 3, you are ready to smile and enjoy your new teeth, having just had a high-strength, high-gloss acrylic bridge attached to your implants. This article was written by Smile Solutions clinicians Dr Stephen Do, Dr Robert Ormerod and Dr Constantine Ong and managing director, Dr Kia Pajouhesh. Articles from Dr Philippa Robinson View Blogs Specialist Care Dr Philippa Robinson 12 Dec 2018 Root canal treatment: who and what is involved? Read More All Dr Philippa Robinson 7 Dec 2018 Why would I need to see a dental specialist? Read More All Dr Philippa Robinson 30 Nov 2016 Is it important to have a family dentist? Read More Specialist Care Dr Philippa Robinson 12 Dec 2018 Root canal treatment: who and what is

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