

## Dental Implants

### Frequently asked questions



### All your questions about dental implants answered

If you would like to know anything further then please get in touch.

#### FAQs in this document:

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- How many teeth can be supported by implants?
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Dr Ellie Ledger (Implantologist)

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## What is a dental implant?

A dental implant is a substitute for a natural tooth and is usually cylindrical or screw-shaped. It is inserted into a socket drilled in the exact location for the intended tooth. The aim with any dental implant is to ensure close contact with the surrounding bone. The stability that this creates is increased as time passes by further growth of the bone around the implant.

Most dental implants these days are titanium or titanium alloy as these materials have proven to be highly tolerated by bone. You may have heard of the phrases 'osseointegrated implants' or 'endosseous implants'; these describe dental implants that support replacement teeth effectively by forming a firm union with bone.

Dental implants are an excellent option for patients who require replacement teeth. At our practice in Cheltenham, we have been expertly fitting dental implants for over 20 years.

## How many teeth can be supported by implants?

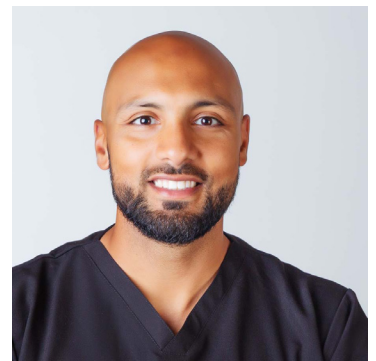
If a patient is missing a single tooth, one implant will usually be enough. When two or more teeth are missing, the patient may not require one implant per tooth – it will depend on the bone quality and volume at the site of the planned implants.

Sometimes dentists can join natural teeth to implants just by using a conventional bridge.

If a patient possesses no teeth whatsoever in their upper jaw, most dental implant specialists will want to fit at least six implants to support a whole arch of ten replacement teeth or more.

In the lower jaw, the bone density is often stronger than in the upper jaw, and so fewer implants tend to be required. A treatment plan to place ten or more teeth in the lower jaw will usually require just five or six dental implants, and sometimes even as few as four.

Bridges, dentures and most other forms of tooth replacement can also be substituted with dental implants.



Dr Toheed Hamid (Implantologist)



## Who is suitable for dental implants?

Dental implants are suitable for almost anyone who is in good health generally, although there are certain lifestyle choices, such as drinking alcohol and smoking, that can negatively impact the long-term health of the gum and bone around a patient's dental implant. In some instances, if a patient cannot reduce their smoking or give up altogether, dentists may decline to give a patient dental implants.

We are highly experienced dental implant specialists in Cheltenham, so feel free to speak with us if you have any other complicated medical problems. In the vast majority of cases, health problems should not prevent the use of dental implants.



## How long do dental implant treatments take?

In our experience of fitting dental implants at our Cheltenham clinic, we find that treatment times tend to vary between six weeks and six months in most routine cases. The time may be reduced if high-quality bone is available; on the other hand, treatment times may extend beyond six months if bone quality is poor, due to the extra care and attention that is required.



Susanna Marray (Practice Manager)

## How long will my dental implants last?

The duration of your dental implants will depend on the quality of care at each stage of treatment – starting from the day they are fitted and continuing with your own home care for your implants. The biggest influencing factor will be your willingness to attend our practice in Cheltenham for regular maintenance reviews of your dental implants.

If you fail to care for your implants, a layer of calculus and plaque deposits will form. Much like those found on neglected natural teeth, these deposits will lead to infection of the gums followed by bleeding and pain if left untreated.

On the other hand, if you are proactive in maintaining your dental implants, you should find that they last many years, and possibly even the rest of your life. Having said that, you should anticipate your implants requiring the same sort of maintenance requirements that would come with other forms of dental treatment such as fillings, bridges and crowns.



## Will my new teeth be joined together?

Yes. When we place multiple implants in a patient's mouth, we join them together just like a bridge supported by natural teeth would be designed. And if there are sufficient dental implants available, it is usually easier and just as effective to make several smaller sections of bridgework each supporting a few teeth.

The quality of the surrounding bone and the quantity and position of the implants will affect which option will suit each patient. When we link implant-supported teeth, they are more robust than the individual parts and are more effective at resisting the forces of normal function that attempt to loosen the screw components, posts and/or cements that secure the underlying structure to each dental implant.



## If the implant surgery takes a long time, can I have a sedation?

It is completely natural to experience some anxiety ahead of dental implant surgery. The good news is that there are several effective means by which you can achieve a relaxed state, and as Cheltenham's dental sedation centre, we are highly experienced in delivering such methods. The most common methods available are inhalation sedation, oral sedation and conscious sedation.

## Is it uncomfortable when the implants are placed?

We place dental implants using the same form of anaesthesia used for routine dentistry as this is very effective and will minimise the discomfort that you will feel. In most cases the surgery entails exposing the bone in the area where the implant and/or bone graft is due to be fitted. There tends to be some minor swelling and bruising post-operation, but most patients will just require some standard painkillers for a few days to keep the discomfort at bay. If you feel that you are in considerable discomfort despite the painkillers, please contact us at our Cheltenham practice.

## What do I have to do before a sedation?

Prior to your implant surgery, we may ask you not to eat or drink for at least four hours. You will also require an adult to take you home, and you must refrain from operating machinery for up to 36 hours afterwards.





## Do I need a general anaesthetic?

In cases where bone needs to be grafted from the patient's hip to their mouth or where a high number of implants are being placed simultaneously, a general anaesthetic may be required, and this would involve admission to a hospital. However, the majority of patients will not need to undergo a general anaesthetic as conscious sedation is highly effective and considerably safer.

## How can I find out if I am suitable for dental implants?

To ascertain whether you are suitable for dental implants, our dentists at our practice in Cheltenham would ask you in-depth questions about your medical history. We would also perform a thorough oral examination to establish any existing problems, and we may need to take X-rays of your remaining teeth.

A key part of any dental treatment is to ensure that good standards of basic dental health are in place, so we would make you aware of any pertinent issues at this first appointment. We would also explain what treatment you require to stabilise any problems with your gums or teeth, and we would talk you through the implant treatment that you would undergo should you decide to proceed.

## How should I look after my dental implants?

Most patients will be able to clean around each supporting implant by brushing and flossing in the usual manner. Sometimes it may be necessary to use special floss, interdental toothbrushes or other specialist cleaning aids, but generally you should find that cleaning your implants is not tricky at all.

When a patient's dental implants are first fitted, we usually like to examine them a few times over the first few months, but once we are happy that your treatment is going to plan, your ongoing care will be no different to when you just had natural teeth.

## Do I have sufficient bone for dental implants?

We can often determine the answer to this question via standard dental X-rays as it is generally possible to judge the height of bone available for dental implant placement. Sometimes, however, we need to utilise more advanced imaging techniques to ascertain the bone width, which is just as essential to implant installations.



Louise Nicholson-Smith  
(Relationship Manager)



Numerous advanced X-ray techniques are now available which can allow dentists to examine your jaw bone in three dimensions rather than the two dimensions achieved through routine X-rays. CT scanning is the technique most widely used these days, and this will normally show dentists everything they need to know about your suitability for implants, such as quantity and quality of bone and the presence of any anatomical structures that must be avoided.

## Can I wear teeth during the course of implant treatment?

If your teeth are being replaced by implants and it happens to be in a part of your mouth that is highly visible, chances are that you will want some teeth to be present whilst the treatment is underway.

This can be achieved in a variety of ways such as removable bridges or plastic dentures. If you are going to wear replacement teeth during the course of your treatment, we need to ensure that the teeth do not apply excessive pressure to the implants. Once the implants are in place and before they are brought into function, we would therefore expect you to make several visits to our practice in Cheltenham for any minor adjustments that are required to the temporary teeth.

## Can dental implants be placed next to natural teeth?

It is standard procedure to place dental implants next to natural teeth. This is considered to be extremely safe unless the natural root happens to be very curved or angled unfavourably in the path of the planned implant, causing potential damage to the root. In most cases this can be avoided by careful planning prior to the surgery.

## Is there anything I should know before I start my treatment?

Before we begin your dental treatment, we would provide you with a summary of your treatment planning discussion, outlining your current dental situation and informing you of alternative options to dental implants if applicable. We will give you any other relevant information such as the estimated duration of the treatment, the number of dental implants required and the estimated cost. We will therefore ensure that you are well informed of any treatment before you decide to go ahead.

## What can be done if I do not have enough bone?

For some patients, the amount of bone loss they have suffered after the removal or loss of teeth means that they do not have enough bone left to support a dental implant. Fortunately there are solutions to this problem: sinus augmentation and onlay grafting.



Employing a procedure known as sinus augmentation, it is possible to boost the height of available bone in the upper jaw above the back teeth by creating new bone in the sinus. This technique provides implants for patients who would otherwise be unable to have them in a part of the mouth where teeth are so often missing.

Onlay grafting is a simple concept that involves taking a piece of bone from another part of the body and applying it as an 'onlay graft' to a deficient area. Over time, once the bone has successfully joined to the underlying region and has healed and matured, a dental implant can be placed in a more favourable position.



## What else can be done with dental implants?

Patients who have no teeth in their lower jaw may not be ready for multiple implant placements. For such patients, a conventional lower denture can be enhanced with two dental implants fitted below the front section. These implants are known as overdentures.

When applied to a patient's upper jaw, the same procedure tends to entail a higher number of implants as the bone is usually softer. Although, like conventional dentures, implant-supported overdentures are still removed for daily cleaning, the implants make them far more stable once they are back in the patient's mouth.

There are many options available to dental implant patients, and each individual case can be treated in various ways. As dental implant specialists in Cheltenham, we are here if you would like us to examine you and discuss your options with you.

## Do you need to have a healthy mouth?

Often when patients first ask their dentist about dental implants, it will be due to recent loss of teeth or ongoing dental problems. Any such issues will need to be addressed in a logical manner to ensure a healthier status for the patient, and this may include the installation of dental implants. It would be easy to focus on the glamorous cosmetic appeal of dental implants, but it's important to remember that basic dental health, including treatment of gum disease, repair of decay and the elimination of abscesses, are equally vital to a patient's treatment in the long run.

If you have noticed that you have bad breath, loose teeth or excessive bleeding after brushing, especially when your teeth are cleaned by your dentist, it is possible that you have periodontal (gum) disease. Dental implant treatment in the presence of reduced bone can be problematic, and as gum disease is a major cause of bone loss, it is important to treat this issue before receiving dental implants.



## What other causes of bone loss are there?

When a patient loses a tooth or has one extracted by a dentist, a significant portion of the surrounding bone around the remaining root may be lost. The speed at which this can occur and also the amount of bone that is 'resorbed' depends on the individual, but without the right care from an experienced specialist, it will always happen to a certain degree. One of the most effective ways to curtail the bone loss is to install the dental implant very quickly after the extraction.

Another cause of bone loss is dentures. Patients often complain of loose dentures after they have had them for a while, and the aforementioned increased rate of bone loss following extractions is usually the cause of this initial problem. In the long term, however, the gradual loss of supporting bone is caused by chewing. After many years of having dentures, patients will require a relining procedure to compensate for this problem, so the longer a patient wears dentures, the less bone will be available for dental implants.

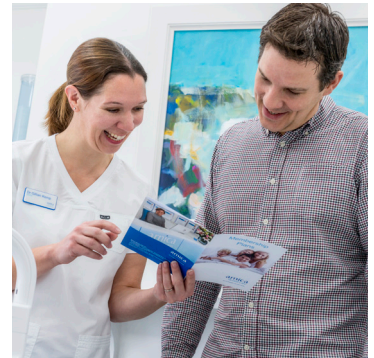
## Can dental implants preserve bone?

One of the most significant benefits of dental implants once they have been installed is that everyday functional forces stimulate the adjacent bone, and in response to this, the bone grows stronger. Of course, each patient is different, and dental implants will have limits in terms of how much work they can do before they start to fail. As your local dental implant specialists in Cheltenham, we are happy to discuss your specific case with you in detail.

Many patients suffer from teeth grinding or clenching (a condition known as bruxism) which can cause them to exert too much pressure on their dental implants – and as this tends to happen at night, they have little control over this subconscious habit. Dentists can combat the detrimental effect of teeth grinding by placing additional dental implants, using restorative materials and equipping the sufferer with a bite guard to protect their new teeth at night.

## What can be done if a dental implant fails to work?

A dental implant will eventually loosen if it fails to remain fixed to the surrounding bone. However, it will often cause no pain or discomfort for the patient and may not even need replacing as long as there are enough implants remaining.





It is not always the case that dental implant failures are this easy to deal with, and while the majority of dentists strive to achieve failure rates below 5%, this still means that around one in 20 dental implants may not achieve long-term function. It is wise to discuss the impact that a failed dental implant may have on your treatment plan, and we welcome you to book an appointment to visit us at our Cheltenham practice if you have such concerns.

## What anatomical structures need to be avoided during dental implant placement?

There are no important risk areas in the upper jaw as long as the dental implants remain within the bone that used to support your natural teeth. For patients who are missing any upper back teeth, the region above the roots known as the maxillary sinus should be avoided, and this area will show up on most X-rays.

The most important anatomical structure to avoid in the lower jaw is a nerve known as the inferior dental nerve which runs from the area behind the wisdom teeth through to where your pre-molar teeth are (or once were).

## Are there alternatives to using my own bone for grafting?

Yes, there are other sources of bone available which have been prepared for safe use on humans. Just like with your own bone, these materials simply supply you with a scaffold into which the new bone will grow and consolidate so that you are eventually ready for your dental implants to be placed. The time it takes for the new bone to be ready can vary from three months to a year.

There are numerous ways of generating new bone, but one of the most common methods used today is 'guided tissue regeneration'. It allows slow-moving bone cells time to fill a space by placing a barrier material between them and the fast-moving cells of the soft tissues lining the mouth. Originally the technique involved having to remove the barrier material during a separate surgical stage a few months later, but these days it is more typical to employ a resorbable barrier, which disappears naturally a few months later once it has performed its function.

## Does bone grafting affect the length of treatment?

Yes, bone grafting will almost always prolong your treatment as it requires greater skill from the dentist than the dental implant procedure itself – but it will also dramatically improve the outcome of your implants. It can also lead to far more aesthetically pleasing results when used in the front of a patient's mouth.



There are ways of shortening the length of treatment where bone grafting is used. For instance, a dentist may choose to perform the implant placement with bone grafting and the placement of a barrier membrane simultaneously. However, many surgeons still like to keep the bone grafting as a discrete stage, ensuring that the implants are only fitted once the bone grafting is deemed a success. Whatever approach is used by the dentist to maximise the bone quantity, it is usually well worth the time, energy and expense.

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