



TREATMENT OVERVIEW

Dental Implant treatment involves the replacement of missing teeth using titanium screw inserts which allow anchoring of crowns, bridges or dentures.

PRIOR TO TREATMENT

We would suggest that you take some form of pain relief approximately 30 minutes prior to your implant surgery appointment. An effective pain reliever to take would be Ibuprofen 400mg, providing you do not suffer from asthma, a stomach ulcer or any other condition, which would stop you taking this drug. If you are unable to take Ibuprofen you may take Paracetamol 1g, 30 minutes prior to surgery. Taking pain relief prior to surgery makes surgical recovery more comfortable and further advice will be given to you.

POSSIBLE SURGICAL COMPLICATIONS

Below we list some possible complications, which may occur during and as a result of implant surgery. In general these complications are rare and unusual. We will be happy to discuss in more detail any of these complications should you wish more clarification at the clinic. Please be aware that not all complications or procedures below are related to your treatment. Please don't hesitate to ask if you are unsure which apply to your treatment plan.

1. Pain, swelling and bruising may occur after surgery and this normally lasts for approximately one week.
2. Sutures will have to be placed during surgery and these may or may not be dissolving stitches. If these are not dissolving stitches then they will need to be removed approximately one to two weeks following surgery.
3. It may be difficult opening your mouth and eating in this area for up to one week.
4. You may be unable to wear a denture in the area for at least one week.
5. Failure of the implant placement is possible and if this occurs we are normally able to replace the implant in a relatively short period of time. This will lead to an increase in treatment time and further surgery.

6. In general a very high number of implant placements are successful.

In the very small percentage of implants which fail to integrate appropriately, the implant may have to be removed and undergo subsequent surgery. If this occurs, generally another implant can be placed in a short period time and this will not affect the overall chances of the implant being successful. In the worst case you will end up with no implant in place as it has not been possible to replace an implant into the site initially used. This will not leave you any worse off than simply leaving the gaps that existed prior to surgery.

7. Surgical implant cases at the practice are extensively planned in order to predict the outcome of the surgery in the best possible way. Rarely, during surgical procedure, we become aware that an implant or implants are unable to be placed despite the thorough planning that has been undertaken. In the rare cases where this occurs, patients do not suffer any harm, the area will be closed with and you the revised plan will be constructed with your input.

8. You will be required to attend for at least a yearly review appointments at the practice (although this may need to be more frequent depending on your circumstances) to ensure that the implants are in a satisfactory situation and generally these appointments will include an x-ray examination. The frequency of these will be determined by individual levels of disease risk. The review is likely to be conducted by your general dentist during a regular examination. On occasion we may ask for you to be seen by one of our oral surgeons.

9. Surgery at the back of the mouth on the top involves working close to the air sinus. In a few cases this can lead to

the production of a small hole or communication into the sinus (oral antral communication/fistulae). If this event does occur, the sinus will generally heal by itself. In the rare cases where this does not heal, the area may have to be closed by a hospital or at the clinic to stop the sinus fluid passing from the nose to the mouth. The chances of this occurring are very small and every possible step to avoid this is taken.

10. Sinus-grafting surgery. If you are undergoing implant placement in the upper back part of your mouth it is often common and necessary to provide sinus-grafting surgery. This procedure is required in order to provide more bone in a particular area. This is routine surgery which is carried out at Duddingston Park. Following this surgery you may be swollen and uncomfortable and also have stitches in place. We will advise you not to blow your nose or to sneeze for some time after surgery (this could be weeks). The risks of this surgery are extremely low as monitored at the practice but these include possible sinusitis following surgery. Complications such as this are extremely rare in this practice and are always monitored. It is also possible for bleeding to occur from the nose following sinus grafting being undertaken. This does not necessarily mean there is a significant problem associated with the graft as bleeding occurs during the procedure normally. One of the main areas for this to drain is through the nose. If you encounter bleeding from your nose following implant and sinus-grafting surgery please contact the practice for advice.

11. It may be necessary to provide a small procedure during your treatment which involves using a small hammer and chisel to raise the floor of the sinus slightly in the area where the implant is to be placed. If we do have to perform this procedure we will deposit a small amount of bone-graft material into the area where the sinus floor has been raised allowing us to place an implant to the appropriate depth.

12. Numbness of the lower lip and/or side of tongue on the side of the operation is possible where lower back teeth are placed. This is due to the close proximity of a nerve supplying this area and is almost always temporary but in some cases it may become permanent. If you require further information regarding this please discuss your concerns with us.

13. On occasions following implant surgery, the healing process can lead to recession and shrinkage of the gum around the teeth adjacent to the implant site(s) and the gum overlying the implant site(s). The potential discrepancy in the gum margins is also related to the shape and quality of the gum and bone prior to implant placement. As a consequence the implant may appear longer or there may be a loss of pink gum around the cuff of the implant. Corrective measures can be provided to reduce the impact of this occasional complication, Your attending implantologist will assist in planning a device a solution for you

14. Patients with gum disease are more at risk of implant failure and it is vital to maintain gum health on an on-going basis. Regular visits to our practice to see a dentist and hygienist are essential to avoid possible future complications. The number of visits required will be based on each individual patient's dental-disease risk profile.

POSSIBLE TOOTH(PROSTHETIC)COMPLICATIONS

This is a relatively complex procedure and certain problems, although very rare, can arise. The restoration of dental implants may take several appointments depending on the complexity of the procedure. For larger implant reconstructions a number of appointments will be required to ensure that the restoration has the appropriate fit and that you are happy with the appearance and the way the restoration feels. We will use as many appointments as necessary during this stage in order to achieve the best possible result.

1. Porcelain on crowns and bridgework may fracture.

2. Screws attaching the teeth to the implant may fracture

3. Perfect colour matching, although very good, may not always be possible where single teeth are placed. To improve the match other teeth may need to be veneered or crowned. We may ask you to visit our colleagues at the lab in order to get an accurate as possible shade match

4. Where there is extensive bone loss it can result in longer teeth extending up or down from the gum level. This is only an issue where it shows on smiling but often where the lip hides the longer teeth it is not an issue. Pink gum-like porcelain can be used but this can often be a poor colour match and longer white porcelain teeth can provide a better result. Sadly when the bone has disappeared vertically we cannot rebuild it and it leaves us with limited options.

5. A denture supported by implants, either on specialised studs (implant supported overdenture) will offer superior fit

and stability compared with a conventional denture without implant retention. The overdenture is removable to aid cleansing of the denture and implants. As such it will be necessary to accept that overdenture will experience a small degree of movement on the resilient clips during use.

6. Dental implants are metal devices to replace the roots of missing teeth. From time to time after implants are placed parts of the metal can become visible, either at the neck of the new tooth, or on the biting surface of the tooth, or by shining through the gum to show a grey area. In cases where this occurs we will make every effort to correct or conceal this.

7. If we have suggested that part of your treatment will involve crowning one or some of your teeth. It is important to be aware that this involves cutting down natural tooth tissue in order to facilitate fitting of a crown over an existing tooth. The dental scientific literature suggests that approximately 1 in 5 (20%) of teeth that are crowned will suffer damage, which results in death of the nerve or de-vitalisation. This may be unnoticeable or may cause pain and swelling associated with the tooth. If this is diagnosed the tooth will require either to be root filled and may require a new crown or will need to be extracted and replaced. Every effort is made at Duddingston Park to ensure that preparation of teeth during this procedure is as minimal as possible to reduce risks associated with this type of procedure.

HYGIENE THERAPY PHASE

This is the initial treatment carried out by our Hygienist and Dentists to bring the mouth to the standard required for implant surgery. Our Hygienist/Dentist will advise you if you require further and/or longer treatment sessions at the initial appointment. We generally recommend a minimum of two appointments with our Hygienist/Dentist.

HYGIENE MAINTENANCE PHASE

This is a bespoke package tailored for each individual. This will be re-evaluated at each appointment to provide and maintain optimum oral health ensuring the success of your implants. We work closely with any maintenance programmes you already follow from your referring practice. We carefully plan to avoid these situations and any of the above complications is usually resolvable. All implant work is covered by our guarantee however, failure to attend for review appointments as advised may mean that we cannot fully guarantee our work.