Implants are the choice treatment for missing teeth

CLARK F. BROWN, JR., DDS, P.A.

Tooth loss can have a number of negative effects. From a functional standpoint, bone tends to shrink and collapse following tooth loss. As more teeth are lost, so is the ability to chew properly, resulting in the possibility of nutritional deficiencies and digestive problems. Also, when teeth are lost, the remaining teeth tend to shift into the spaces that are created by those missing teeth. As they shift, the resulting change in the bite further sets the stage for possible temporomandibular joint (TMJ) problems.

From a cosmetic standpoint, when teeth are present in their proper positions they serve to fill out the face. If back teeth are lost, cheeks begin to sink inward, and when front teeth are lost, lips are prone to recede. Then, as the bone that supported the tooth begins to shrink, the effect is accentuated, speeding up the appearance of aging. Additionally, as teeth are lost, people tend to smile less, producing expressions that can be interpreted as indifferent, unhappy, or angry.

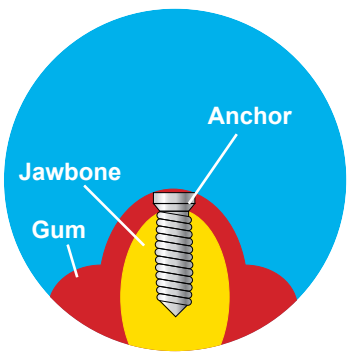
Because replacement of missing teeth is important for both physical and emotional health and for cosmetic appearance, *Brevard Health Care News* turns to Clark F. Brown, Jr., DDS, for advice on state-of-the-art tooth replacement. Dr. Brown is a comprehensively trained and experienced dentist who has practiced cosmetic, general, and implant dentistry in Melbourne for over twenty-eight years.

FAQs

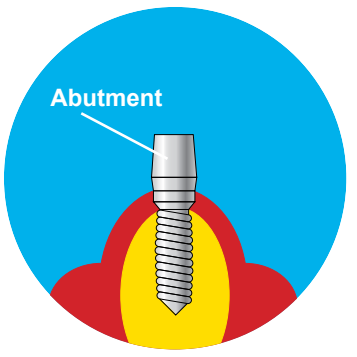
Dr. Brown, can you give us a little history on tooth replacement? The quest for permanent tooth replacement has been going on for several thousand years. The first attempts we see are in the skulls of ancient Egyptians and Mayans who tried replacing missing teeth by having shells or pieces of gold hammered into their jaws.

And what about in today's world? Traditionally, when patients lose all of their teeth, they turn to removable dentures for relief. For patients who are missing one to several consecutive teeth, a removable partial denture can restore the ability to chew. However, because both partial and full dentures sit on top of the gum tissue and rest on the bone underneath it, as the patient chews the bone will continue to shrink. The denture needs to be continually realigned or readjusted for a proper fit, and because there will always be some movement of the dentures on the gums the potential exists for sore spots and a lack of security. Also, with the partial, because it is held in by clasps around surrounding teeth, it can put additional stress on these teeth and jeopardize their health, as well as cause discomfort for the wearer. A better choice for patients with healthy teeth on either side of missing tooth or teeth might be a fixed bridge.

What is a fixed bridge? Most dental bridges are appliances made of a *pontic*, or false tooth, held in place by two crowns cemented to the teeth on each side of the space. The fixed bridge restores function as well as aesthetics. However, this appliance requires that the teeth on either side of the space, called abutment teeth, be ground down to receive the crowns. This could jeopardize these otherwise healthy teeth in the future. So although a fixed bridge is often a good option, usually the treatment of choice is the dental implant.



Step 1
The coated anchor of the implant is surgically placed into your jawbone. Over the next few months, the living bone in your jaw will bond with the anchor.



Step 2
An abutment, or "post," is attached to the top of the implant's anchor.

Step 3
One or more custom-designed tooth restorations are attached to the abutment.

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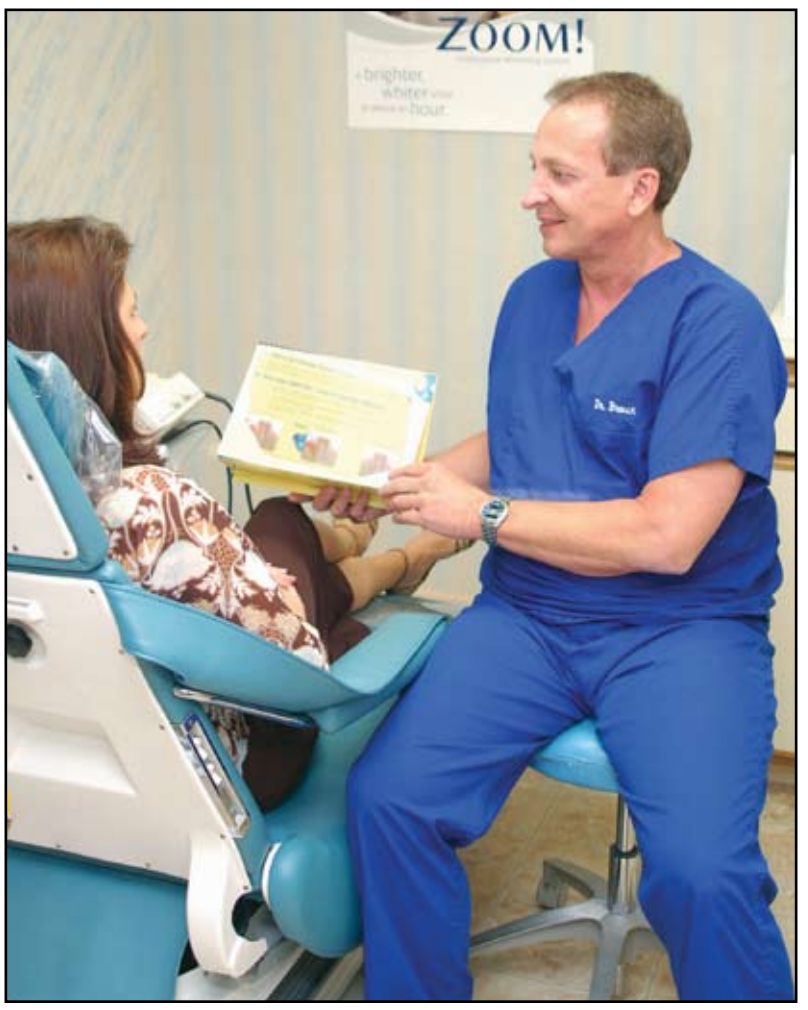

Dr. Brown is well known for his kind, gentle, and professional manner.

Please tell us about dental implants. A dental implant is an artificial replacement for the root of a tooth. The implant provides a foundation on which permanent teeth or removable teeth can be securely attached. Implants can prevent deterioration of the bone beneath the gums, which helps maintain the fullness of the face and provides a good bite. They also stimulate the bone, causing it to strengthen and grow.

Implants are a great option for patients who want to improve their dental health.

What is the procedure for placing implants? The first stage is to determine the number, position, and direction in which to lay the foundation with dental implants to maximize success. We work carefully with each patient to achieve the desired design and aesthetics of the replacement teeth.

The next stage is to place the implants. These implants are made of titanium, which is an extremely biocompatible material. It is a strong substance that has the ability to actually bond to the bone. This process is called *osseointegration*.

At times we can place an implant and immediately place a tooth over it. The success rate of that procedure is less than if we let the implant heal first, especially if the tooth is in the back where it will be subjected to a lot of pressure.

For more information, please visit www.drimplant.com.

During the placement of implants, the tissue over the implant site is opened to expose the bone. A recipient space is created in the bone close to the shape of the implant, and the implant is then placed into the bone. The tissue is repositioned and secured with sutures.

Do you do both the surgical placement of implants and the design of the restorations? Yes. That way the possibility of miscommunication between the implant surgeon and the restorative dentist is eliminated. We know exactly how the placement of the implant is done for each patient and why.

How long is the healing process? It takes approximately four months for the implant and bone to fuse. Once that takes place, the top of the implant is uncovered, and replacement teeth are attached to the implants.

Are all patients good candidates for implants? Because implants require a certain amount of jawbone with which to fuse, some patients do not have enough bone for implants. However, thanks to a very high success rate with bone grafting, we can often create enough bone for a successful outcome.

How long have implants been used successfully? In the middle of the last century, the first of the modern-day implants using titanium was performed to stabilize a full lower denture through a procedure called a subperiosteal implant. In 1986 implants gained scientific approval as a routine, first-line treatment from the American Dental Association. Today, implants in the upper jaw have a ninety-five percent success rate, and those on the bottom have a ninety-eight percent success rate five to seven years after surgery.

Implants look, chew, and feel like natural teeth, and they are as close as we can come to replacing them.

This interview with Dr. Brown was conducted by Kris Kline, a member of the editorial staff at Brevard Health Care News.

Clark F. Brown, Jr., DDS, is board certified by the American Board of Oral Implantology/Implant Dentistry. He earned his undergraduate degree from the University of California, San Diego, and his doctor of dental surgery degree from Georgetown University. Dr. Brown served as a dentist in the U.S. Air Force from 1978 to 1981. He has been in private practice in Melbourne since 1981. He is a diplomate of the American Board of Oral Implantology/Implant Dentistry, International Congress of Oral Implantologists, American Society of Osseointegration, and American College of Forensic Examiners and is a fellow of the American Academy of Implant Dentistry and International Congress of Oral Implantologists.

Here for you…

Dr. Brown looks forward to meeting the readers of ***Brevard Health Care News.*** For additional information or to schedule an appointment, please call (321) 259-9429. The office is located at 2113 Sarno Rd. in Melbourne.