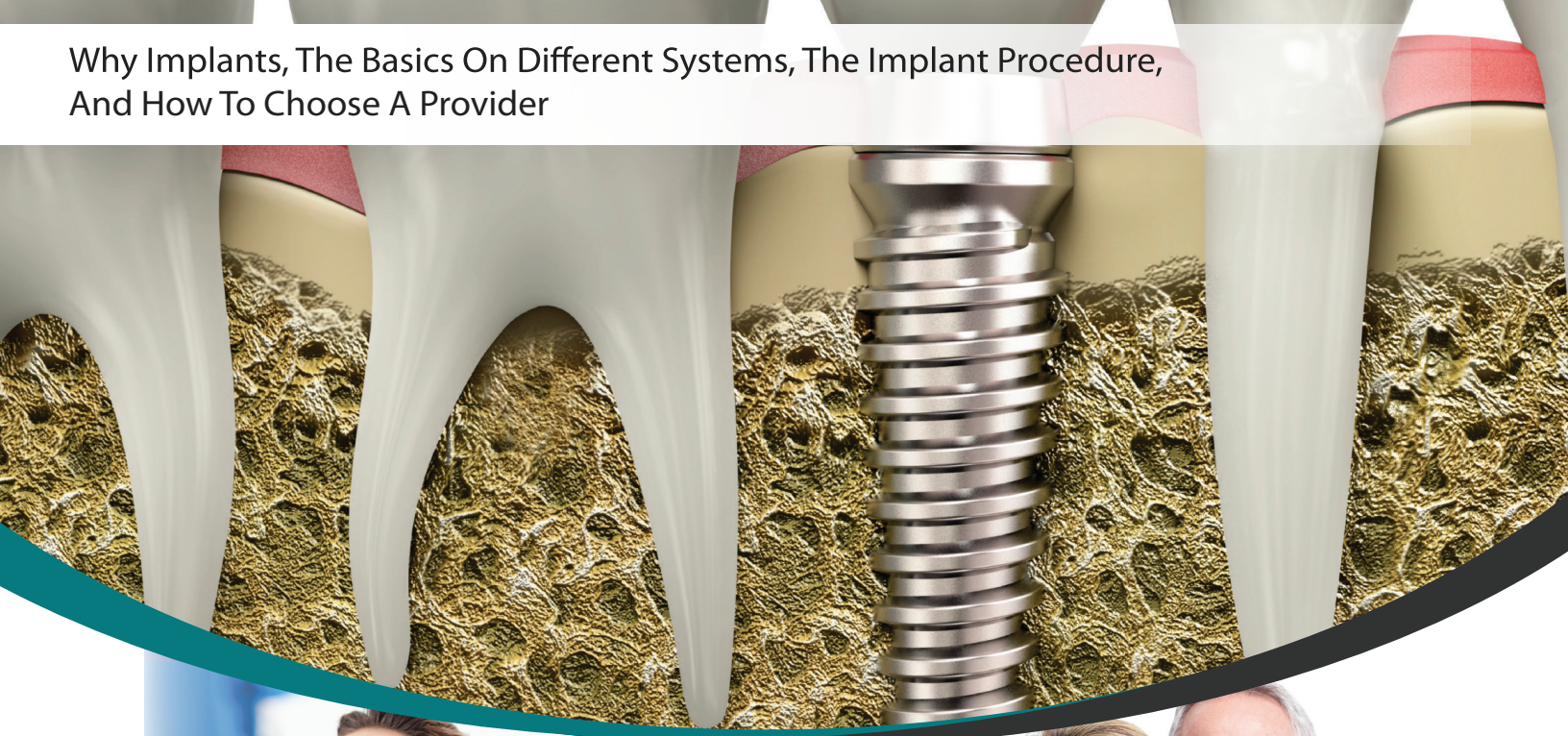


What You Need To Know About Dental Implants*

Why Implants, The Basics On Different Systems, The Implant Procedure,
And How To Choose A Provider



MEADOWS DENTAL
GROUP

201-12195 Harris Rd,
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*This Guide is intended as an introductory overview only, and is not a substitute for your doctor's advice.

www.Meadowsdental.ca

INTRODUCTION

Dear: Friend,

We at Meadows Dental Group would like to take this opportunity to sincerely thank you for your time and interest concerning the possibilities of implant dentistry. Patients need to be fully informed of their health choices before making any treatment decisions.

The fact that you are reading this document indicates that you have serious questions concerning your present dental health. Dental implants may, or may not be the solution to your current problem.

The Purpose of this Report

This patient information guide is designed to give you as much information; and still present it as conveniently as possible. We ask that you read this information carefully and answer all of the questions in this booklet to the best of your ability. If there are any questions, concerns, or answers of which you're not sure, please indicate them in the margin space of the appropriate question. Additional space is provided at the bottom of the last page if you require it.

Dr. Fouellefack and her team are available to answer any questions you may have during a complimentary, no obligation consultation when you wish to schedule such a visit in the future.

We want to ensure that your questions and concerns are answered to your satisfaction. Should you require assistance, our team members will aid you in any way possible.

Thank you,

Dr. Fouellefack



DR. FOUELLEFACK

Your Natural Teeth

Your own natural teeth in a healthy, well maintained condition are the best natural dental implants which you can possibly have. There is nothing else which compares to them. Healthy, natural teeth are usually superior to man-made dental implants in every respect.

It is, therefore, in the best interest of your health and wellbeing to do anything you can to keep your own natural teeth in the best condition for the longest possible period of time. With good home care on your part, and with frequent dental checkups and professional cleaning, we will help you to accomplish this goal.

Nevertheless, sometimes a natural tooth requires removal for many different reasons.

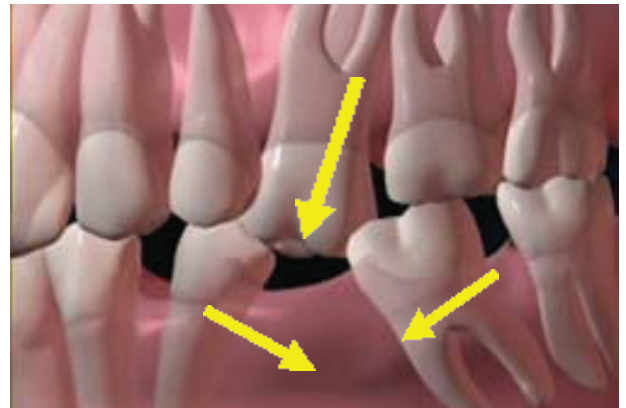
Supplementing Your Natural Teeth

When a natural tooth is lost, it is best to replace the tooth with a non-removable replacement as promptly as possible. Within the first year is best.

What if I do nothing?

Without replacement, the surrounding teeth often shift position over time which makes: tooth fracture, decay, gum disease, additional tooth loss, and jaw joint damage much more prevalent and likely to occur.

You are probably familiar with traditional "bridgework", which uses remaining adjacent natural teeth as supports for non-removable bridges that span the space where teeth have been lost.



What are my treatment options?

Bridges:

Realize that these bridges have not increased the foundational support, which was present when the natural tooth was there in the mouth. A bridge increases the load on each remaining tooth because now there are fewer of them.

This fact can be explained best with the analogy of reducing the number of fence posts in a long fence. The fence is not any shorter, but now there are fewer posts supporting the fence. Now the fence is not as strong as it was earlier and will likely fail in time.

In the case of the fence, it is obvious that fence posts need to be replaced so that the amount of support will be evenly distributed along the entire length of the fence. Similarly, all areas in the mouth need support (which can be best provided by replacing the missing root structure with dental implants).



Partial Dentures

Partial dentures are removable. They are not fastened in the mouth as a non-removable bridge would be; therefore even well-made partial dentures wiggle and move.

There are two types of Partial dentures:

1. **Totally tooth-supported partial denture** will fill the missing tooth space, but the adjacent supporting teeth are no stronger than they were before. In other words, the chewing stress has now been increased on the remaining few teeth.
2. **Tooth and gum supported partial dentures** do not increase the amount of support. Once again, there is the same lack of root support as there was before.



The areas where teeth are missing are filled in with plastic pink gum material to retain the replacement plastic denture teeth. Over time, the natural gum tissue and bone structure beneath dentures will shrink away painlessly. That is why the partial denture will have to be replaced and/or relined (made thicker) periodically. If these areas are not relined, then a space develops under the denture causing the denture to loosen and rock causing damage to the remaining teeth and bone. Many people adapt and “put up” with loose dentures but do not realize how it can damage the remaining support teeth and jaw bone.

A loose denture cannot bear its fair share of the chewing load. Consequently, the remaining natural teeth end up carrying the entire chewing load. The overloaded remaining teeth will undergo accelerated bone loss and are at increased risk of fracture, decay, gum disease and often need removal. Over time most people with partial dentures lose more teeth and eventually end up with complete dentures.

Complete Dentures

Complete dentures are removable. They rest totally on the thin gum tissues after all teeth are removed. Therefore, dentures always feel loose. Even with adhesive use the denture prosthetics are not secure in place like real teeth.

Patients often notice:

1. Poor aesthetics in face and smile (explained below).
2. Pain in gums and bone.
3. Food does not taste the same (denture covers the palate where a lot of taste buds are located)
4. Cannot eat many foods they use to enjoy (cannot eat fresh hard foods like healthy nuts and vegetables... among other foods). People tend to eat soft processed less healthy foods instead.
5. Loose dentures that are always falling and moving around which can be difficult and embarrassing in social situations.
6. Poor speech quality (lisp and unclear pronunciation).
7. Many, many others...



Tooth Supporting Bone



Tooth supporting bone provides for natural facial aesthetics. Lip and facial muscles attach to tooth supporting bone to provide a natural pleasing facial appearance.

Nature provides tooth-supporting bone only when there are teeth present in the mouth. When teeth are lost, the tooth supporting bone is also lost over time.

Nature takes away from you what you do not use!

For example, the person who is paralyzed and confined a wheelchair for a long period of time loses their muscle tone. The muscles get soft and literally wither away from lack of use.

This term is called disuse atrophy. It is painless, but it causes severe changes over time.

In the mouth, when tooth roots are removed, the bone under the gums "shrinks," dentures get loose, facial support is lost and a premature aging effect occurs throughout the face.

As tooth supporting bone is lost the changes in facial esthetics can be dramatic:

1. The upper lip thins and moves backward.
2. Show less upper tooth when you smile as lips are not in their correct position.
3. The lower jaw rotates closed and moves forward giving a prominent chin (witch's chin)
4. Lower third of face appears squished and collapsed
5. Lower face appears unbalanced in relation to rest of facial proportions.
6. Unsupported excess skin appears thin, loose, and wrinkled, (jowls).
7. Loss of muscle tone makes facial expression appear like you are always frowning even when you are trying to smile

Notice in the photo below, in the mouth of a person who has lost many teeth. The bone is still present around the front teeth which remain. In the back where the teeth have been lost, there is excessive bone and gum shrinkage.



The yellow dash lines in the photo to the left indicate where the bone used to be when teeth were present.

When the tooth supporting bone is lost the face appears very different.

A removable complete denture cannot adequately replace the lost tooth supporting bone.

A denture would need to be so thick with pink plastic that a person would be unable to wear it.

Without the tooth supporting bone the denture cannot stay in position and is very painful to wear. As a result, some seniors prefer to function without any false teeth whatsoever.



What is a Dental Implant?

A dental implant is a man-made replacement for the natural tooth root, which allows a person to return to non-removable teeth or a more secure prosthetic dental restoration.

Dental implants for tooth replacement have been around for more than sixty years now. Many people are familiar with hip or knee replacements to restore mobility. Dental implants utilize the same materials and technology- just smaller- to restore chewing function and health.



A dental implant is not a transplant, which would be taken from another individual.

A dental implant is made of medical grade titanium alloy. They look, and feel just like your own teeth.

There are several types of dental implants of which Dr. Fouellefack will select the most suited for your specific needs and general dental condition.

How Is A Dental Implant Inserted?

There are two basic groups.

1. Those that are inserted INTO the jaw bone.
2. Those that are placed OVER the jaw bone.

In both instances, the dental implants are placed UNDER the gum tissue and extend into the mouth for attachment to the replacement teeth. You will not see the implants as they will be under the pink gum tissues.

How Is A Dental Implant Inserted?

Where implants have been placed and properly maintained, the tendency is to preserve the tooth supporting bone mass because the bone is being used somewhat in the same way it was when the natural teeth were present. Therefore many of the negative consequences of tooth loss can be avoided when implants are placed in a timely manner.

For this reason, sometimes most suited for will recommend that the dental implants be placed the same day that the tooth is removed. Other times, it is best to wait for two months for initial healing after tooth removal before placing the implants.

Nevertheless, the best time to place implants is within the first year after tooth removal.

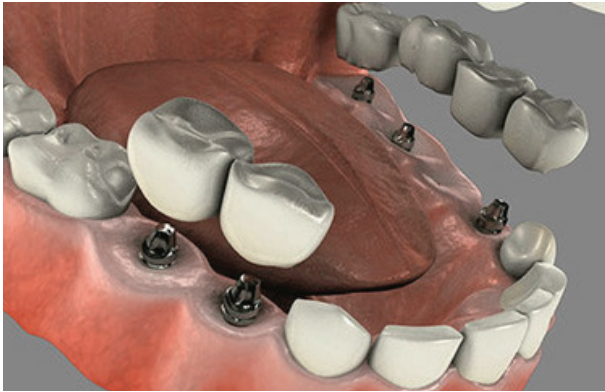


If you have been missing teeth for many years and bone loss has occurred; dental implants can still likely be placed to prevent further deterioration. Dr. Fouellefack evaluate your particular situation and advise you on the best course of action.

What types of replacement teeth are possible?

There are two basic groups.

1. Fixed teeth – patient cannot remove the teeth
2. Removable teeth- Patient can remove the teeth.



If you are missing one or several teeth, but still have many of your own natural teeth remaining in the arch then fixed options are usually recommended as shown in the picture to the left.

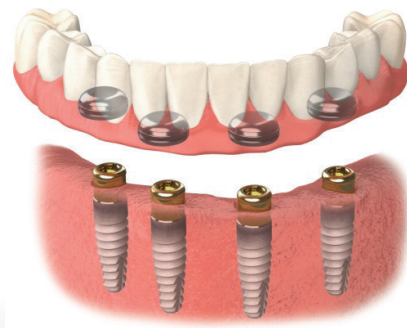
Note how the adjacent natural teeth are not altered. Replacement teeth remain independent of the remaining natural teeth.

Wherever possible it is recommended to have one implant per false replacement tooth in order to maintain the bone mass.

If you are currently wearing complete dentures, or will soon have all remaining teeth removed then there are many choices for you to consider.

Removable

A denture is made with suction cup attachments inside as shown below.



The patient snaps the denture over top of the implants. When in place the denture does as it is anchored to the implants. The denture is now comfortable to chew with in a normal fashion.

The denture is easy to remove for cleaning. Patients with poor manual dexterity prefer this option as it is very easy to clean and maintain long term. Dr. Fouellefack works closely with your denturist to provide this treatment option.

Fixed

For patient who want non-removable teeth then the replacement prosthetic teeth must be designed to be attached to the implants as shown below.



The patient is not able to remove these teeth. Fixed prosthetic teeth can often be secured the same day that the implants are placed. Therefore, you will not have to be without teeth.

It is to your benefit to have more implants placed for more support and stability to your replacement teeth.

There are many different types of fixed replacement teeth types that go on the implants (plastic, ceramic, zirconia, and many others). Price differences will vary depending upon which type of final teeth you request to be placed on the implants. Dr. Fouellefack will discuss the options with you in person at your consultation.

Your Chewing Efficiency

For purposes of comparison, let us assume that the patient with all of their own natural teeth in a healthy, well maintained, functionally accurate condition can chew at 100 percent efficiency. With every tooth lost, the efficiency decreases. How much decrease there will be is dependent upon whether or not the missing teeth are replaced, and in what manner.

Ultimately, scientific studies have repeatedly shown that if a person reaches the point where they have no teeth, and are using properly fitted complete removable dentures, on an adequate bony ridge, a maximum chewing efficiency of 15% may be achieved. If the ridges are not adequate, the percentage decreases exponentially.

With implants and non-removable bridgework, or well supported tooth replacement methods, a person may return their chewing efficiency back to as high as 85-90 % compared with what they had with their natural teeth.

Your Medical Examination

This is an important part of treatment. If you have uncontrolled medical diseases, they often affect the healing of implants and also relate to how long they will last. Please make sure to inform us of any diseases, medications and allergies.

Cavities?

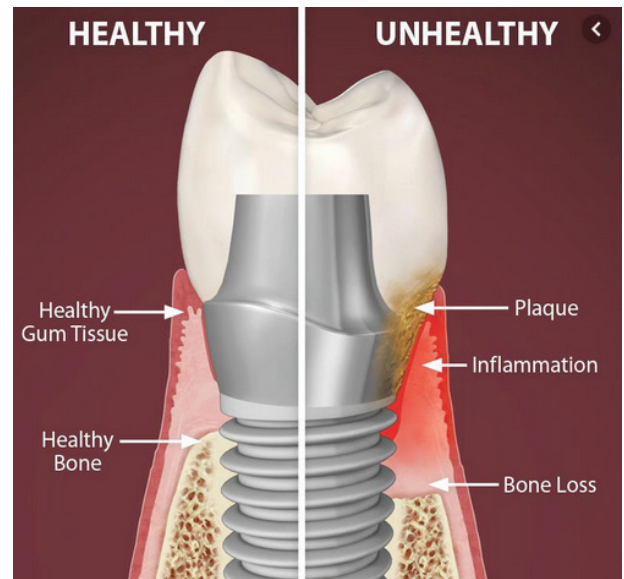
You cannot get a cavity on an implant restoration. Normal foods will not damage an implant. However, anything that could fracture a real tooth could break the implant restoration.

Your Home Care With 3 Month Follow Up Professional Care

The dental care you provide yourself at home must be first-rate. You must keep your teeth and implants cleaner than you have ever done previously in your life. You must be able to use a toothbrush, dental floss, or other devices we recommend to keep plaque off both your natural teeth and the dental implants.

Science and Research has repeatedly shown that 3 month professional cleaning is required to maintain the health of your implants. If 3 month cleaning is neglected there is an increased risk of gum disease developing around the dental implants.

Gum disease is often painless so you will not know it is occurring unless you are seen for professional follow up care. If the 3 month follow up care is not done there is a good possibility that the dental implants will not succeed long term, and will have to be removed. Furthermore, smoking and/or excessive alcohol consumption is a deterrent to excellent dental health.



X-rays

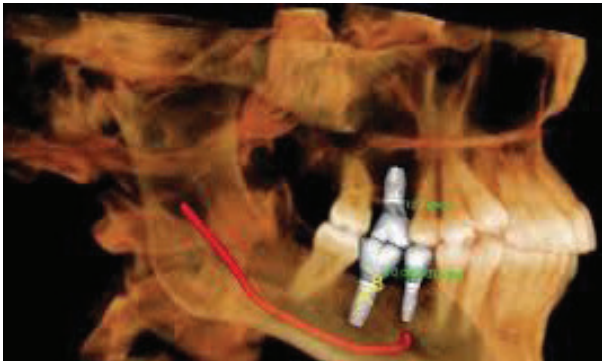
You will have a complete examination with x-rays, which may include a panoramic x-ray, and/or CT-scans of your entire mouth. X-rays are necessary for proper diagnosis during treatment and for follow-up after treatment is complete.

Opposing Teeth

The teeth or denture, which is opposite to the implanted area, are a very important consideration in the success of the dental implant(s). There must not be any grinding of the teeth at night (bruxism) against the implant(s). Care must be taken not to overload the implant(s) by chewing on hard objects such as ice, which could also damage your natural teeth. The patient should not engage in anything, which may cause damage to the implant(s) or the underlying bone, such as full contact sports.

Loss of Nerve Sensation

There are cases reported in dental literature in which there is temporary loss of nerve sensation following many surgical procedures. This does happen sometimes, but it is rare and usually temporary.



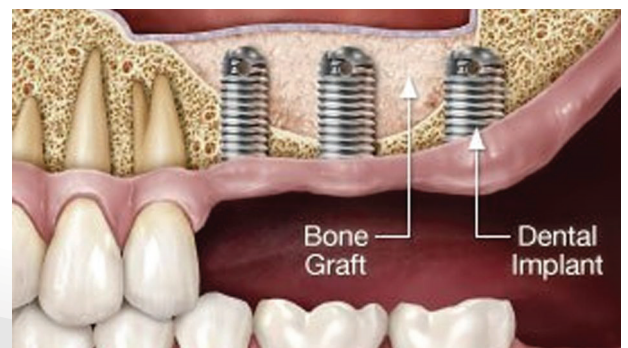
Unfortunately, there have been instances where complete nerve sensation has not returned even after many years. There have been such occurrences following removal of deeply impacted wisdom teeth.

It is possible that such a thing could happen with the placement of dental implants in the jaw bone. It is usually temporary, and is a loss of nerve sensation only (numbness or tingling sensation over areas of the chin and face). Motor nerves are never affected so it

can not cause a drooping or sagging of the face. If this occurs, the implant may have to be removed.

Maxillary Sinus

The Maxillary Sinus is an air filled space located above the upper back teeth. It is not uncommon for the roots of the upper back teeth to be located very close or sometimes within the Maxillary Sinus cavity itself. In the same manner, occasionally, dental implants may also extend into the maxillary sinus cavity. If this occurs it usually does not pose any problems to the patient.



Bone Grafting

When a tooth is removed the bone may not always heal ideally. Sometimes the bone heals in a misshapen manner that makes ideal implant placement impossible.

If you have any of the following:

- been missing teeth for many years
- the previous tooth was infected or damaged

- suffered trauma to the area or the tooth was cracked
- suffered from gum disease

Then bone healing process will likely be not ideal.

A bone grafting procedure may be required to repair and regenerate damaged bone prior to - or in combination with dental implant placement. Bone grafting utilizes man-made materials and/or donated human tissues which have been medically processed for the highest sterility and infection control measures. These donated human tissues are the same materials used in the hospital setting during most surgical treatments.

Your Dentist will attempt to inform you as to the likelihood of the need for bone grafting in your particular case but circumstances can, and do change, during surgery which could alter your particular treatment plan. If you decline bone grafting for any reason you must advise your Dentist prior to surgery.

Are All Implants Successful? No.

Success rates approach 95% which is better than most medical procedures. However, not all implants are successful.

There are many variables to be considered in placing the implant(s).

- First, the patient must be healthy. There must be adequate healing powers present in the patient. For example, if the patient is an uncontrolled diabetic, inconsistent healing could complicate the procedure. If such a condition develops at a later date after the implant(s) has been done, this too may complicate the future of the implant(s).
- Second, a proper diagnosis must be made, and the proper number and type of implant placement and procedure must be selected for the individual patient.
- Third, the implant(s) must be treated properly by the patient and the dentist. If either person is neglectful, there could be complications.
- Fourth, if the patient is a heavy smoker or an excessive alcoholic beverage consumer, the success of the implant (s) will be affected.



Will Implants Last A Lifetime?

Very few things do last a lifetime. There are some implants, which have been in the mouth for as long as fifty years. This is not the average. The average expectancy is less and varies based upon numerous variables, such as the patient's health and proper maintenance. In the final analysis, whether they last a lifetime depends on how long you live and what age you are when implant(s) are placed.

Every natural tooth in the mouth of every living person will have one of two possible fates: it will either last until we die, or it will be removed sometime. The same logic applies to dental implant(s).

Is Age a Deterrent? No!

Health is the determining factor. Many people seventy, eighty, and even ninety years of age are a better surgical risk than someone years younger who has medical or physical complications. Older individuals are more likely to need implants because they have lost more teeth, and have lost more supporting ridges or bone.

As long as you live and breathe and are important to someone, including yourself, you owe it to them to take the best care of yourself that you possibly can. Incidentally, what is a good age for a hip replacement implant or a coronary by-pass? If you needed either operation to stay alive or improve your quality of life, would you refuse because of age?



Rejection by the Body?

Implants are made of biologically compatible materials, which have undergone extensive testing over a period of several years. Since these materials are largely metals, such as titanium and surgical vitallium alloy, and have never been living tissue, there is no likelihood of causing an antigen-antibody response which could cause rejections similar to that which sometimes occurs with heart and kidney transplants.

Cancer?

There is no instance reported in the dental or medical literature of dental implants being the cause of any cancer.

Cosmetics

Are dental implants inserted for cosmetic reasons? Not usually. The primary objective of dental implants is to give additional functional support to the replacement teeth.

Cosmetic enhancement is possible with the replacement teeth but dental implants are not the only way to achieve an improved cosmetic result. Your aesthetic expectations must be fully discussed with your Dentist prior to treatment.



The Guarantee

There is no way that we can guarantee anything which goes into the mouth and which is under the control of the individual patient. Physicians do not tell you that the transplanted heart, kidney, or coronary bypass will keep you alive for any specified period of time. We can only tell you that we will strive to place the dental implant(s) properly, provide you with the information you need to help care for your implants at home and will be available for regular periodic follow-up appointments to evaluate your continued dental health.

We will do everything we can to make the dental

implant(s) succeed, but you will have to make the same commitment. Your home care must be ideal. If you do not keep your end of the bargain, the implant(s) will likely fail over time.

You must return to our office at regular 3 month intervals for examination and periodontal cleaning services according to scientific recommendations. If you do not do this, difficulties may arise, resulting in additional costs for corrective procedures or even the loss of the implant(s). Under such circumstances, the fault would be yours.

Due to the complex nature of oral implantology, it is important that all postoperative examinations and/or treatments be handled by this office. Referrals will be made only to those doctors with experience and training in implant dentistry.



Is It Expensive?

Implant procedures vary in complexity and extent depending on the patient's dental condition and requirements can involve a significant financial investment. A survey of 350 consecutive patients after completion of their implant treatment revealed that they felt not only was it worth the investment, but that they would happily do it again and wished they did it sooner.

Will Insurance Pay For Implants?

Some dental procedures and portions of grafting or implant surgeries are covered by dental and extended health benefit plans. Our office personnel will assist you in obtaining these benefits.

British Columbia Health Care and medical insurance policies will not cover this procedure. In office finance plans are available to make this procedure affordable for everyone."

Will There Be Discomfort?

Just as with any surgery, there can be some pain (discomfort). However, anesthetics and sedation virtually eliminate pain (discomfort) during the actual surgery. Postoperative pain (discomfort) will be similar to that of having teeth removed. This varies from person to person depending on your own pain tolerance and the simplicity or complexity of the procedure being done. In the majority of cases, however, the discomfort is mild to moderate for the first one to three days. After the initial healing you should have no further discomfort. Patients will be provided with prescription medication to alleviate this pain (discomfort).



It depends on your particular condition and needs, and the extent of the work involved. Individual operations may take from one half-hour to several hours. There may be as few as one operation, or a series of multiple operations and follow-up visits, which would be scheduled over a period of months to insure proper healing and an optimal result.

If you have decided that you want to be considered as an implant candidate, then you can be encouraged by the fact that there are many others in this country and throughout the world who have had dental implants, cornea, kidney, heart transplants, and hip implants, with excellent results.

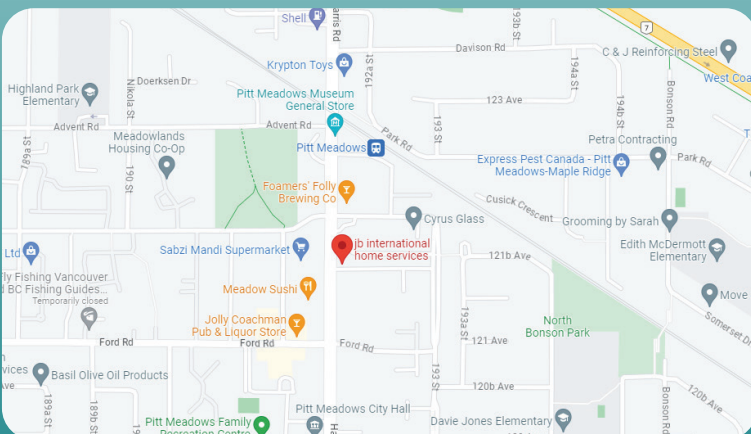
If you have any questions, which have not been fully answered, please feel free to ask them during your consultation appointment or prior to beginning treatment. We will do our best to fully inform you.

This image shows a blank sheet of white paper designed for notes or questions. At the top, there is a solid dark green horizontal band. Centered within this band is the text "NOTES & QUESTIONS" in a white, uppercase, sans-serif font. Below the green band, the page is filled with horizontal blue lines, creating a series of rows for writing. The lines are evenly spaced and extend across the width of the page.

Ask About A Complimentary Consultation!



Call 604-465-6844 to book your appointment.



**MEADOWS DENTAL
GROUP**

Office Hours

Monday:	Closed
Tuesday:	8am – 5pm
Wednesday:	9am – 6pm
Thursday:	10am – 6pm
Friday:	8am – 4pm
Saturday:	Closed (Open 1 Saturday a Month)
Sunday:	Closed

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