What are dental implants?
Dental implants are replacement, or substitute tooth roots, used to replace natural tooth roots in areas of the mouth where teeth are missing. These implants are threaded screws made of titanium (bio-compatible and safe) and they ultimately become fused to the bone in a process called “osseointegration”.
The reason it is so important to replace the tooth root as well as the visible part of the tooth is that natural tooth roots are embedded in the bone, stimulating bone growth and providing the stable foundation necessary to bite and chew.
When teeth are missing, the bone that previously supported those teeth melts away, or deteriorates. This process is called bone resorption. However, the bone can be preserved by replacing missing tooth roots with dental implants. Since the bone actually forms a strong bond to the implants, they can serve the same functions as natural tooth roots.
With dental implants it is possible to replace one tooth, several teeth, or a complete set of teeth supported by implants anchored in the bone.

What are some of the benefits of dental implants?

- **Overall quality of life is enhanced with replacement teeth that look, feel and function like natural teeth.** With implant-supported replacement teeth, the appearance of the smile is more natural and the teeth function more like natural teeth. The result is increased comfort and confidence when smiling, speaking and eating.

- **Integrity of facial structures is preserved.** By preventing the bone resorption that would normally occur with the loss of teeth, the facial structures remain intact. This is particularly important when all of the teeth are missing, as the lower one-third of the face collapses if implants are not placed to preserve the bone.

- **Adjacent teeth are not compromised to replace missing teeth.** Tooth replacement with traditional tooth-supported bridges requires grinding down the teeth adjacent to the missing tooth/teeth, so that the bridge can be cemented onto them. This tooth structure can never be replaced and the long-term health of these teeth is compromised. Partial dentures have clasps that hook onto adjacent teeth, putting pressure on them as the partial rocks back and forth. Eventually these teeth can loosen and come out as a result of this pressure. Replacing missing teeth with implant-supported crowns/bridges does not involve the adjacent natural teeth, so they are not compromised or damaged.
- **The mouth is restored as closely as possible to its natural state.** By replacing the entire tooth, including the root, it is possible to replicate the function of natural teeth, with a strong, stable foundation that allows comfortable biting and chewing. In addition, nothing in the mouth looks or feels artificial.

- **Increased stability and a sense of security that teeth will not fall out when eating, laughing or sneezing.** People who wear dentures often worry that their dentures will fall out when they laugh, sneeze and sometimes even when they eat. Since the bone bonds to the implants, replacement teeth have a stable foundation and are securely attached to the implants, so there is no fear that teeth will fall out.

- **Improved health due to improved nutrition and proper digestion.** People with dentures usually have problems eating certain foods, such as fresh vegetables and fruits, which can compromise their nutrition. Additionally, since it is difficult to chew properly with dentures, digestion is often compromised. With implants, chewing and function are restored back to the normal function prior to tooth loss.

- **Improved appearance.** Since implants preserve bone, preventing deterioration of the facial structures, appearance is improved. Collapse of the lower one-third of the face caused by complete tooth loss can be visually corrected and the remaining bone preserved. The appearance of wrinkles around the mouth caused by posterior bite collapse or complete facial structure collapse, are virtually eliminated. The smile is improved when replacement teeth look more like natural teeth. Even when only one tooth is missing, long term esthetics are usually much better with an implant-supported replacement tooth than with a traditional tooth-supported bridge. This is particularly important in the front of the mouth, where preventing a visible bone defect is critical for natural appearance.

- **Improved ability to taste foods.** Wearing an upper denture can prevent someone from really tasting food, as the roof of the mouth is covered. With implant-supported replacement teeth, it is not necessary to cover the roof of the mouth, so it is possible to enjoy the taste of foods.

- **Increased convenience of hygiene.** It is much easier to care for an implant-supported crown, which can be cleaned like a natural tooth, as opposed to a tooth-supported bridge, which cannot be flossed normally for proper cleaning.

- **Elimination of denture adhesives.** Since implant-supported teeth are securely attached to the implants, there is no need for messy denture adhesives, which are often needed to keep dentures from falling out.

- **Restored self esteem and renewed self confidence.** Many of the people who now enjoy the benefits of implant-supported replacement teeth state that their self esteem and self confidence have been restored as a result of improved appearance, function, comfort and health.
Who is a candidate for dental implant treatment?

Nearly everyone who is missing one or more teeth and in general good health is a candidate for dental implant treatment. There are a few medical conditions that can undermine the success of implant treatment, such as uncontrolled diabetes and other such systemic diseases. Smokers have been reported in the literature to have a higher rate of failure due to poorer oral hygiene created by the nicotine buildups. However, there are very few conditions that would keep someone from having implant treatment altogether.

Quality and quantity of available bone for implant placement is more often a factor in qualifying for dental implants than medical conditions. However, even people who have lost a significant amount of bone can be a candidate for dental implant treatment with additional procedures to add bone or create new bone. Advances in this type of treatment have made it possible for thousands of patients who would not previously have been considered candidates to have successful implant treatment.

What is involved with dental implant procedures?

Consultation. The first step is an examination and consultation with Dr Ira Schecter to determine whether or not you are a candidate for implant treatment. This usually involves x-rays and may include taking impressions for models of your teeth. If you have already lost a significant amount of bone, additional x-rays taken at another facility that specializes in this type of x-ray may also be recommended.

During the examination, Dr. Schecter will be evaluating the area(s) of your mouth where teeth are missing, including the amount of bone available to support the placement of implants. Dr. Schecter will also be evaluating the type of replacement teeth that will best meet your needs. A review of your health history will indicate whether there are any medical conditions that could prevent you from being a candidate for implant treatment. Any potential complications will be outlined for you by Dr. Schecter. Following the initial consultation, you may be referred to a dental specialist for another evaluation. If you are referred to a surgical specialist, this will typically be for the purpose of further evaluating the quality and quantity of available bone for the possibility of procedures to add (graft) bone, or create new bone.

Implant Placement Procedure. The implants are placed in the bone using a standard surgical technique. Under local anesthesia, a small incision is made through the gum tissue overlying the bone so that the implants can be placed into the bone. This is a completely painless procedure. Following the implant placement procedure, the implants may be left undisturbed for a period of 3-6 months so that the bone can bond with the implants, or the implants may be placed and immediately loaded with replacement teeth. The immediate loading of any dental implant can only be determined at the time of surgery.

In any case, Dr. Schecter will always ensure that you have some type of temporary replacement teeth, so that you never have to be without teeth during treatment.
If the implants are left to heal under the gum tissue for a period of time, then a second stage surgical procedure is done at a later date to uncover the implants and get them and the tissue ready for the restorative phase of the treatment. Typically, patients are prescribed an antibiotic to prevent infection and pain relief medication. Specific instructions for home care are provided and the post surgical healing is closely monitored by Dr. Schecter. Gum sutures may or may not have to be removed by Dr. Schecter

**Abutment Attachment Procedure.** Following the appropriate healing period, a small connector post, called an abutment, is attached to each implant. The permanent replacement teeth will eventually be attached to the abutments. Dr. Schecter prefers to use custom fabricated, aesthetic abutments which are digitally designed and fabricated through a special milling process. The advantage of this is that the final restoration can best approximate your resulting gum contours.

**How Long Does It Take to Complete Treatment?**

Dental implants preserve bone because they function like tooth roots, firmly embedded in the bone. In order for the implants to become embedded in the bone, the bone must bond or fuse to the implants. This process takes anywhere from 6 weeks to 9 months depending upon the quality of the bone into which the implants are placed.

There are other treatment options that do not include dental implants, that do not take as long to complete; however, none of these traditional methods of tooth replacement preserve bone. And, in fact, dentures and partials actually accelerate the bone resorption process. In selected cases, dental implants can be immediately loaded after placement, thus the time to complete this treatment plan is minimal. Dr. Schecter will evaluate your options for immediate loading.

**Is the Surgical Procedure Painful?**

Most implant patients report that the discomfort is far less than they expected, and is actually easier than having a tooth extracted. And although everyone is different with regard to pain tolerance, most patients are very comfortable simply taking Ibuprofin afterward and are able to resume their normal routines the day after surgery.

**Post –Operative Expectations**

In addition to some discomfort there may be some bruising and or swelling. These symptoms are usually well controlled by adhering to the recommended post-operative instructions. Risks are kept to an absolute minimum as every case is very carefully pre-planned for. Very, very rarely, adjacent teeth to the surgical site can be damaged and may require further treatment. In the lower jaw there is a nerve that runs in the bone and carries the feeling for the lower lip, chin, teeth, gums, and the side of the tongue facing the surgical site.

This nerve can be damaged either temporarily (for a period of months up to 2 years) or permanently traumatized. The result could be an altered sensation up to permanent numbness.
It is important to understand that at all times each and every patient will be advised of the predictability of the procedure and the likelihood of any complicating risk. If it is feared that the risk of damage is too high then an alternative treatment will be prescribed other than dental implants.

**How Long Do Implants Last?**

Documented clinical research demonstrates that implant-supported replacement teeth have been successful for over 60 years. These were some of the first root-form implant cases ever completed (by Professor Dr. Branemark of Sweden, in 1965) and they have been closely monitored from the beginning. It is highly likely that these cases will be successful throughout the lifetime of those patients. While there can be no guarantee of 100% success, experience has demonstrated that implants remain osseointegrated in the overwhelming majority of patients.

Dental implants are designed to be permanent; however many factors contribute to the long term success of implant treatment, such as the individual patient health, the bone structure, the patient’s oral hygiene, and regular maintenance visits to the dentist.

By comparison, research demonstrates that the typical tooth-supported bridge lasts from 7-10 years and that partials and dentures are functional for approximately 5 years.

Insurance statistics indicate that bridges, partials and dentures last 5 years and they generally pay for replacements every 5 years, but they cannot pay enough for the ensuing amounts of bone loss.

**Do Dental Implants Ever Fail?**

Dental implant treatment is one of the most successful procedures in the medical/dental field, with documented success rates over 95%. Although successful treatment is very predictable, there are rare occasions where the bone does not completely bond to the implants. When this occurs, new implants can be placed once the original area heals. Smoking or putting too much pressure on newly placed implants, as with excessive grinding of the teeth, can cause problems with the bone bonding to the implants, and should be avoided.

While every effort is made to ensure the success of your implant, there can be no guarantee. Reimbursements are not issued for failed implants but Dr. Schecter will replace any failed implant at no charge within the first year of its placement. Only the best materials are used but just like one’s automobile, every prosthetic restoration may require some maintenance. In the unlikely event that there are any component fractures and failures, then additional fees may be charged for the repair.

**What Is Involved With Taking Care of Dental Implants?**

The home care recommended varies depending upon the type of implant-supported replacement teeth. For example, a single implant-supported crown is cleaned like a natural tooth, with regular brushing and flossing. Implant-supported bridges that replace a few teeth are cleaned like tooth-supported bridges; brushing and flossing with a floss threader or a water irrigating device.
Home care is a little more complicated for people who are missing all of their teeth. Special brushes and floss are often recommended. With overdentures, it is necessary to clean the implant attachments, as well as the overdenture. Permanently fixed implant supported replacement teeth are cleaned like all other bridges. Again a Water Pik irrigating device is strongly recommended.

In all cases, it is recommended that patients regularly come for their scheduled hygiene appointments. A custom maintenance schedule will be prescribed for you by Dr. Schecter and this will allow him to monitor the progress of your dental treatment in conjunction with the necessary hygiene work done by the hygienist.

What Is the Cost of Implant Treatment?

An investment in dental implant treatment is an investment in overall health, appearance and well being, as it involves preserving the integrity of facial structures, as well as replacing missing teeth. The actual cost of implant treatment is based on a number of factors, such as the number of missing teeth being replaced, the type of implant-supported teeth recommended (treatment option) and whether additional procedures are necessary to achieve the proper esthetic and functional result as well as the estimated cost of implants, other components and materials necessary to complete treatment and dental laboratory fees.

The only way to accurately estimate the cost for an individual patient is to have an examination and consultation with Dr. Schecter.

Is Dental Implant Treatment Covered by Dental Insurance?

Insurance coverage of implant treatment depends on the individual policy. The benefit coverage is determined strictly by the amount the employer wants to spend on the policy, and how much the insurance companies want to preserve their profit margins. In addition, there are major limitations on most dental insurance plans. In reality, the plans are only designed to cover routine maintenance, emergencies and basic care.

The insurance companies use statistical data to determine the most common procedures submitted on claims, then set their own “usual and customary fee” schedule for these procedures. They then determine the specific restrictions and limitations for each plan.

Although most companies exclude dental implants as a covered benefit, many of them will pay the same benefit they would cover for the lowest cost alternative treatment option (partials and dentures) and some of the diagnostic records, if a specific request is made for “alternative benefits.” Even if an individual policy includes implants as a covered benefit, the amount of coverage is still limited to the annual maximum allowable. Dr. Schecter and his staff will be more than willing to submit whatever forms are needed to help you in determining any such benefits.