# Hre dental implants for you?





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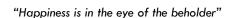
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# The Art and Science of Dental Implants: Never Better!







What a difference! Our patient had five dental implants placed in the upper front of her mouth. The smile was transformed.

Unlike some of the advertisements you read, this process is not completed "in one day". This success story took time (over 8 months) but at all times our patient was comfortable and pleased with her progress.





"Ready to play baseball again"

A sports injury derailed this gentleman for a while but three dental implants and a couple of additional crowns put his smile and his career back on track.

Looking at the "after" picture, it is hard to tell which teeth got the implants and which teeth just got new crowns.

### So what are dental implants?

Implants have been around since the days of the Pharaohs in Egypt. The birth of the modern day implant began in the late 1960's when a world renowned Orthopedic surgeon was experimenting with rabbits. He used light-weight titanium rods to splint broken bones together in his test animals. To his great surprise, as the bunny bones healed, the titanium rods fused solidly to the bunny bone. Wow, thought the surgeon: What would happen if I placed titanium inside a human to help join broken bones together? So the next experiment was with dogs. Researchers placed titanium threaded posts in the jaws of dogs and placed teeth on top of the posts. Eureka, they had hit gold. Not only did titanium post implants fuse to dog jaws but it also fused to the jaws of humans with tremendous tenacity. Now, 40 plus years later, we continue to evolve with better implants, a clearer understanding of how bone grows and what we can do to help those with aesthetic challenges. PLEASE READ ON FOR MORE INFORMATION ABOUT IMPLANTS.

### How do dental implants work?

#### A dental implant is designed to replace the missing root and to hold the artificial tooth in place.

A dental implant mimics nature: it is designed to be firmly anchored in the jaw and to hold the tooth in place. The implant is a small part made of titanium, titanium alloy or ceramics – materials which are generally welltolerated by the human body. Also, titanium has been shown to bond well with the human bone.



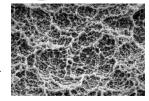
Comparing an implant to a real tooth.

# It's all about "surface texture" technology.

The most popular implants are made of almost pure titanium. Titanium forms an oxide layer which, when placed against bone... just like copper, oxidizes when its outer surface turns green. Titanium Dioxide (the oxide) glues itself to bone forming a strong bond. If you roughen the implant's surface and apply some surface chemistry principles, you get a very strong bond to bone.



To the naked eye, all you see is a grey screw! This is the implant



At the microscopic level, the surface is very rough and it is treated chemically to induce faster healing & increased implant stability.

# Routine placement of implants:

**T**oday, many people opt to have badly broken down front teeth replaced by implants.

In the case presented here, our patient had a crown that broke off at the gum line . The best treatment choice for our patient was a dental implant with a crown.







Step 1: Extraction & healing

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Step 2: Make temporary crown "glued" to inside of teeth with dental fiber

Step 3: Placement of Implant after 8 weeks



Step 4: Training the gums with a new temporary crown and post.





Step 5: Insertion of final crown and the implant post.





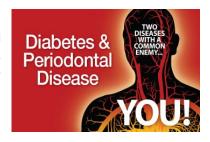
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#### Do health or habit issues influence success with dental implants?

Here is a short list of health or habit issues that influence implant success:

 Smoking: Smoking decreases the amount of oxygen that gets to the bone and blood around dental implants. This decrease in oxygen may influence the early loss of your implant. A smoking cessation period before and after implants are surgically placed is helpful but implants may still fail later on if your smoking habit continues. Discuss this with your implant surgeon.

- 2) Clinching and Grinding: The forces placed on teeth when people clinch and grind is significantly higher. To avoid loss of implants due to grinding forces, your implant team will likely use more implants in the area (to decrease forces) and use specific implant parts to help secure your restorative prosthesis.
- 3) Diabetes or Immune Response ailments: Any systemic disease that impacts on the healing response of an individual has to be evaluated before commencing treatment. In general, only the most brittle individuals will be excluded from treatment.
- 4) Drug Therapy: Some drugs have been linked to bone infections or bone metabolism issues that may affect successful placement of implants. Again, your implant team will discuss your medical history to see if any drug you are taking will affect the implant placement



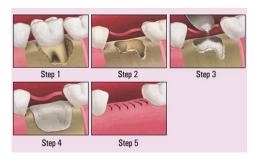


#### Are you a candidate for implant placement?

You wear upper and lower dentures and they are always loose. CASE #1



You are missing teeth but you have lost a lot of bone in the area where implants are required. CASE #2



CASE #1 ◀

As the picture on the left shows, we use prosthetic adaptors that are supported by dental implants to anchor the dentures in place. These devices help to prevent the dentures from moving while you talk or eat. Some patients request a denture that is anchored more firmly or a fixed non-removable bridge (see page 4).

CASE #2

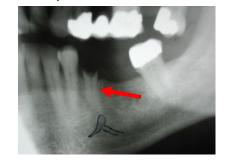
Implants must be totally encased in bone in order to successfully bond to bone. Implant dentists use human bone or bone filler substitutes to help bone grow in the jaws. Every patient's needs are unique but this procedure is frequently used in Implant Dentistry.

You are about to loose all your teeth but you don't want to wear dentures. What can you do? CASE #3





You are missing some teeth and your dentist wants to add an implant and splint it to one of your own teeth. CASE #4

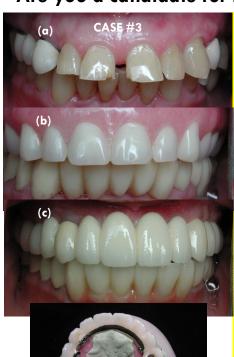


# Dr. Morley Rubinoff, DDS,FADI,Cert. Prosthodontics, Implant Dentistry



Dr. Rubinoff is a graduate of the Faculty of Dentistry, University of Toronto (1974). Dr. Rubinoff completed a post-doctoral program in Prosthodontics from the State University of New York at Buffalo in 1984. Dr. Rubinoff recently retired as a clinical instructor and mentor in the graduate department of Prosthodontics at the University of Toronto., Faculty of Dentistry. Dr. Rubinoff has served as the President of the Association of Prosthodontists of Ontario and Canada and is the founding President of the Canadian Dental Protective Association. He has been awarded the Certificate of Merit by the Canadian Dental Association and received a fellowship from the Academy of Dentistry International. He has been a member of the Canadian Dental Association, the Ontario Dental Association, the Association of Prosthodontists of Ontario & Canada and the American College of Prosthodontists. Dr. Rubinoff is a Canadian ITI (International Team for Implantology) Fellow. Dr.Rubinoff is proud to be a member of the staff at Bayview Village Dental Specialists.

# Are you a candidate for implant placement (continued)?



CASE #3

This patient had very loose upper teeth (a) that had to be removed. On a temporary basis, an upper complete denture (b) was inserted while the tissues healed and the implants were surgically placed in the upper jaw. A fixed bridge made of porcelain and metal alloy is screw retained to 8 implants in the upper jaw (c,d). Our patient enjoys all the comforts of having her own teeth in her new mouth.

CASE #4

Joining natural teeth to dental implants is relatively straight forward as long as the dentist follows specific rules. On the natural teeth (the patient's own tooth), a gold coping must be cemented (fig B,D). On the implant abutment (fig F), a prosthetic connector is used (fig A,B,D). The fixed bridge is made of porcelain and metal alloy (fig E,G). It can be cemented or screw retained.

