

Customised dental treatments

JEAN PAUL DEMAJO WRITES ABOUT CUSTOMISED DENTAL TREATMENTS

Dental treatment plans vary considerably. Besides the main aim and objective of good aesthetics and functionality, other goals may include comfort, hygiene maintenance and having fixed teeth. The manner of achieving these desirable goals varies with the nature of treatment provided. A goal is an answer to a complaint.

Source of common complaints

1. Food packing – old crowns/bridges; receding gums leaving widening interdental spaces; ill-fitting dentures; missing teeth; crowded teeth
2. Bad breath/halitus – gum disease; poor dental hygiene; food packing; dental caries
3. Pain – gum disease; dental caries; poorly fitting dentures; inflammatory lesions including tooth abscesses
4. Aesthetics – old crowns/bridges; visible metal of fillings, denture clasps, old-design crowns/bridges; worn down teeth; minimally visible teeth; crowded/spaced or protruded teeth
5. Lack of confidence in smiling – typically cause by any or all of the above

You may notice that many of the above complaints stem from the same source. However, the way of addressing them may vary considerably in costs, time and nature of treatment.

Pinpointing and addressing the right complaints will lead to a satisfied patient. Addressing the dentist's wishes as opposed to the patient's wishes will lead to disaster and, hence, an unsatisfied patient never to return.



Intra-oral before treatment



Intra-oral after treatment



Upper new crowns with incorporated precision attachments to retain new upper prosthesis



Lower attachment to retain new overdenture



Extra-oral before treatment



Extra-oral after treatment

A CASE STUDY

An elderly man presents himself with ill-fitting dentures and a history of loss of mini-implants. His current status is the following:

Upper jaw – reasonably comfortable upper removable denture, but with poorly aesthetic for the remaining teeth and a thick denture plate covering all his palate

Lower jaw – two remaining mini-implants out of an initial four, causing high denture mobility and pain, with an ongoing history of denture midline fracture.

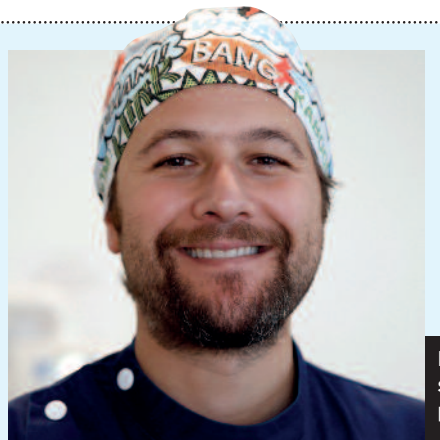
His wishes were simple:

1. To be able to eat comfortably without denture movement and pain
2. Teeth that look good, allowing him to smile confidently

3. To be able to clean his teeth very closely
4. To spend a decent, but not over the top, amount of money on achieving all this
5. To achieve a good, long-term solution.

Treatment plan

1. Upper jaw – Crown the five remaining, heavily-filled upper teeth with incorporated special attachments, providing retention for a newly fitting removable denture called a fixed-overdenture prosthesis.
2. Removal of remaining mini-implants and placement of three conventional implants to support a removable over-denture



The above patient achieved just what he wanted; a comfortable, long-term, hygienic, functional and aesthetic solution. Objectives achieved.

Ask your dentist! **C**

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