SOJTHWESTERN NEWS

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DENTAL IMPLANTS INCREASINGLY ATTRACTIVE TO PATIENTS

DALLAS — November 2, 1995 — Oral surgeons say new techniques and improved equipment have increased interest in dental implants from individuals who have parted company prematurely with some of their "pearly whites."

Americans tend to take their teeth for granted, an attitude that often contributes to "low dental IQ," and even people who do brush and floss regularly may face a time when they lose some of their teeth to disease or accident, according to Dr. Douglas P. Sinn, who holds the Robert V. Walker, D.D.S., Chair in Oral and Maxillofacial Surgery and chairs the division at UT Southwestern Medical Center at Dallas.

Until recently, the options for replacements were limited and not altogether appealing. But things have changed.

"I have a whole new sense of security," said Sherry Brown, a patient of Sinn's who wore dentures but has had 18 dental implants installed since 1992. Part of her dental work was done by Dr. David McFadden, assistant professor of oral and maxillofacial surgery. As the prosthodontist, McFadden was in charge of attaching the teeth to the implants and monitoring the patient afterwards.

UT Southwestern faculty members inserted 250 to 350 implants in the last year, Sinn said. The number has been rising steadily in the past few years. Half of the patients that Sinn and his colleagues see need implants to replace teeth lost to accidents or violence, while the others lost their teeth because of disease. Many of the department's patients come in after losing a tooth or two to sports injuries. More serious cases may require extensive plastic surgery to rebuild their entire mouth and jaw after car accidents or a shooting incident.

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Prosthetists recently began molding ears and noses that can be attached to the skull in a way similar to dental implants. So individuals in some of the severe cases may also be getting ear or nose prostheses as well as dental reconstruction. All oral and maxillofacial surgery faculty members are also trained to place the dental implants.

Brown said she had virtually "no choice" when she turned to implants. She'd worn a denture on the top of her mouth for two decades although she still had seven natural teeth remaining on the bottom. But the bone holding those teeth and the dentures in place was deteriorating. She had to consider getting a bone graft and implants.

When she had her first 14 implants put in, she hoped that half would "take." She thought at least some of them would have to be reinserted. But, as it turned out, all of the implants have remained, without rejection.

The process hasn't been easy because of the extent of her replacement and the fact that doctors had to take part of her hip bone for use in the bone graft. Brown said the healing process for the implants was relatively easy, though her recovery from hip surgery was harder. "It worked out even better than I thought," she said.

But she finally feels like she has real teeth again, after two decades with dentures. Sinn said many patients report how good they feel about not having to remove their dentures before going to bed.

Brown said no one can tell her implanted teeth aren't natural. "When I put my fingers in my mouth and pull down, it feels like real teeth in there," she said. "I wore dentures well, but these look more real."

She also is able to taste food better because her denture used to cover most of her upper palate, reducing her sense of taste.

McFadden said implants can substantially raise the quality of life for patients who have lived with dentures. "We've found that the biting and chewing forces are reduced by

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about 75 percent in people who have traditional dentures without implants," he said. "With implants, it's as though they have real teeth again and they can enjoy meals a lot more."

But the realistic feel of the new teeth have required Brown to make some behavior adjustments. "I've had to pay more attention to the way I speak because it's a different feeling in my mouth. When I first got the implants, I had a tendency to pass a lot of air through the teeth when I spoke."

The implant consists of three parts. The titanium anchor is surgically embedded in the jaw bone. The bone graft is required only when the upper or lower jaw bone has deteriorated. Three to six months will go by before the bone has grown around the anchor enough to hold it in place.

The anchor contains a hole. When the anchor is firmly in place, a post is screwed on to the top of the anchor. The replacement teeth, which have been crafted out of porcelain and gold to fit the size and shape of the mouth, then are attached to the post by McFadden.

Sinn points out that implants are expensive, costing \$800 to \$1,200 per implant. But there is a less costly alternative, he said. Surgeons can insert the anchors and then just attach dentures to them, eliminating the need for many of the posts and new porcelain teeth.

With people living longer and expecting to remain active as senior citizens, implants look more and more appealing. Once the implants are in, individuals take care of them just as they would natural teeth, brushing and flossing. And if they take good care of the implants, they are likely to last for the rest of their lives, Sinn said.

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