

When a Denture or Partial Makes Sense

Not that long ago, many people believed that dentures were an inevitable part of growing old. Modern dentistry and the development of stronger, longer-lasting restorative materials has changed that mindset for most people. But even with all the advances in preventative and restorative techniques in the past 30 years, there are still cases where significant tooth loss occurs and the placement of a denture or partial may make the most sense as an optimal treatment option.

Why Does Significant Tooth Loss Happen?

While accident and injury can certainly play a role in significant tooth loss, the majority of cases are mostly a result of uncontrolled gum disease and/or tooth decay. Certainly, individuals who do not or cannot brush and floss their teeth on a daily basis are at a much higher risk of developing the kind of uncontrolled oral disease that leads to eventual tooth loss. However, there are several other factors that can increase an individuals risk of oral disease exponentially in a very short period of time. Some of those risk factors include but are not limited to:

- Severe wear from long-term clenching and grinding of the teeth
- Repeated, extensive dentistry on multiple teeth that can lead to overall tooth weakness and untreatable vertical fractures
- Regular use/abuse of methamphetamine and other controlled or illegal drugs
- Pregnancy (see Oral Health for Women for more information)
- Chemotherapy
- Certain long-term medications that specifically produce side-effects of dry mouth
- Any physical or mental disability that makes brushing and flossing difficult for an individual to perform on their own



Why Does Significant Tooth Loss Happen? (cont'd)

Obviously, the best case scenario for all of us is to avoid the kind of oral disease that leads to significant tooth loss by controlling our risk factors with excellent home care and regular visits to a dentist to stop any minor incidences of disease from getting out of control. But when the damage has already been done, or the risk factors are not within our control to reduce, a denture or partial can still be an excellent restorative option.

Not Your Grandfather's Denture

Most of us can remember a grandparent or great-uncle with a pair of dentures that seemed to flap and clack endlessly. Before the advent of implant-secured dentures and partials, the best dentures relied on regular refitting and adhesives to hold them securely in place. But why would a denture need refitting so often?

The roots of the teeth sit in the jawbone like the roots of a tree. When the tooth is removed, much like removing a tree stump, a concavity results. Over time this concavity continues to shrink in upon itself, resulting in regular changes in the size and shape of the jawbone. Additionally, gaining or losing weight can also change the shape of the soft tissues in the mouth. Each of these factors can make it difficult to maintain a snug fit with a traditional denture. Many individuals who wear adhesive-retained dentures often get frustrated with the constant process of relining and refitting, and eventually give up on the denture all together.

But modern dentures don't have to be this way. With the advent of implant-retained dentures and long-span partial bridges in the last 15 years, not only can a denture be securely held in place for both chewing and speaking, but the implants themselves offer the added benefit of integrating into the jawbone like a tooth root — reducing the overall bone loss and remodeling that is so common in patients with multiple missing teeth.



The Removable Implant-Supported Denture

When an entire arch of teeth is lost due to oral disease or injury, strategically placed implant abutments can snap into the base of a denture and hold it firmly in place for chewing, speaking, singing, and smiling. A removable denture of this type also allows for easy cleaning of the denture as well as the gums and implant abutments in the mouth.

Removable, implant-supported dentures are most successful in patients who have the implant abutments placed either at the same time the tooth roots are extracted, or shortly thereafter. In some cases, some bone grafting may be necessary to ensure the proper support and integration of the implant.

For patients whose teeth have been missing for several years, an implant-supported denture is not always out of the question, but existing bone width and strength must evaluated carefully. If the bone is too narrow or short, the implant will not be well-supported and should not be placed. In some specific cases, more extensive bone grafting may allow for successful implant placement, but each case must be evaluated on an individual basis.



The Fixed Partial

For a series of missing teeth that does not include the entire arch, sometimes a fixed partial bridge or partial denture is the best replacement option. Unlike an implant-supported bridge that is only 3 or 4 teeth long and cemented into place onto no more than 2 implant abutments, longer-span fixed partials usually require 3 or more supporting abutments in order to be stable. Many of these partials are screwed into place, rather than cemented to allow for easier removal at the dental office for repair or replacement.

A fixed partial feels more like your real teeth because you never remove it yourself, but it does require a bit more work to keep clean. Food can sometimes get stuck in the space underneath the partial, and special flossing techniques must be mastered to keep this space clean and the implant abutments healthy. However, for those patients who do not like the idea of removable teeth, a fixed partial may offer the ideal restoration.

Just like a removable, implant supported denture, fixed partials seated on implants are most successful in patients who have the implants placed at the same time the tooth roots are extracted, or shortly thereafter. Some bone grafting may also be necessary.

Patients who have had missing teeth for several years may not be the best candidates for fixed restorations like these – especially if the existing jawbone is too narrow, short or weakened in any way. In some cases, more extensive bone grafting may allow for successful implant placement, but each case must be evaluated on an individual basis.