

## Congratulations on the success of your implant.....

Now that your implant has successfully integrated with your bone, you can go ahead and have the tooth or teeth added for which the implant therapy was performed. Please take a few minutes to read this Patient Guide. The information contained is extremely important for the future success of your implant(s).

### Introduction.....

Your implant is supported by your own jaw bone and is surrounded by the soft tissues of your gum. Both these tissues will remain healthy in the future *only* if **you maintain the necessary level of cleaning at home and the dentist or dental hygienist provides you with the appropriate standard of preventive dental care including professional cleaning, home care advice and regular assessment of the bone level by X-ray**. This leaflet is provided as a thorough “Patient Guide” for the future to ensure you understand what is required in order to enjoy the successful outcome of your implant treatment for many years to come.

### You will make all the difference.....

The principal contribution you will make towards the long-term success of your implant treatment is to maintain the implant surface and the associated crown or abutment surface as free of plaque as possible using the special brushes recommended. Hence **it is the effectiveness of your cleaning which will be the most important factor in determining the future success or failure of this treatment**. This is not just a commitment to daily brushing but also a commitment to detailed cleaning in specific ways as demonstrated to you by our dental hygienist, Sharon Everett and your dentist or hygienist in the future.

The use of Superfloss or X-Floss under bridges or bars, or normal floss around implant crowns will help remove plaque in less accessible places. The single tufted brush is also a useful cleaning aid and the daily use of a sonic high frequency vibrating brush for all your plaque control will help achieve the most effective control of your oral plaque.

Every patient is different; their anatomy and the size of the spaces between teeth varies from tooth to tooth and from person to person and so your particular cleaning routine will be developed with you by Sharon and this *patient-specific* system should be followed to ensure you achieve a meticulous standard of plaque control.

### Our Support.....

In order to help you we will arrange a **FREE appointment with Sharon for her to demonstrate what you should do and the dental cleaning aids that are most appropriate to your situation**. This routine will be designed for you to follow daily in the future.

To support you in your home cleaning, you should also receive professional cleaning of your implant and your natural teeth periodically to ensure that no accumulations of plaque are allowed to gather and no deposits of calculus (tartar) build up that could contribute to the establishment of gum inflammation. Avoiding gum inflammation prevents the development of bone destruction, known as Peri-implantitis, a form of gum disease that affects the bone around implants.

### What is Peri-implantitis?

Bone destruction around an implant is known as “Peri-implantitis” and is really no different to what you may know as gum disease. The same disease exists around natural teeth in susceptible patients and is then known as “Periodontitis”. Both conditions are caused by the inflammatory destruction of the bone surrounding the implant or tooth. Both conditions are the result of inadequate elimination of plaque on a daily basis.

The first sign of Peri-implantitis will be a mild redness to the gum margin around the implant, possibly accompanied by a little bleeding after thorough brushing or flossing. This is known as “*Peri-implant mucositis*” and is the equivalent to *Gingivitis* around a natural tooth. This is the first stage in the disease process and shows that there has been an accumulation of plaque producing toxic chemical waste products leading to a defensive inflammatory response.

After a short time with continuous inflammation present, the nature of the inflammation changes from a protective inflammation directed against the bacteria and their waste products to a destructive inflammation that results in the breakdown of the bone supporting the tooth or implant. If no treatment is provided this will progress, and infection will occur with further bone destruction taking place and the production of pus. This is then known as Peri-implantitis.

**Monitor your own implants.....**

When you clean around your teeth and implant(s), check for any bleeding, or the appearance of redness that may indicate inflammation is present. Other signs of problems would include tenderness of the gum, darkening of the gum margin, and discharge of any fluid from the gum margin when you apply gentle pressure on the gum with your finger. Any of these signs must be reported to your dentist urgently as they may indicate the beginning of Peri-implantitis.

**Some Statistics on oral hygiene and smoking.....**

If you fail to maintain the necessary standard of cleaning you are **14 times** more likely of developing Peri-implantitis and bone loss around your implant than a patient who cleans well. If, in addition to failing to maintain adequate cleaning, you take up or return to smoking, then your risk factor jumps 3-4 times that of a non-smoker to a staggering **42 times** that of a normal non-smoker with good cleaning. **The message is clear**, it is strongly advised that patients with implants should not smoke and should maintain the best cleaning possible.

**Responsibility.....**

Remember, now that we have completed our work, it is you who has the long-term task of maintaining the environment of the teeth and implant so that you can enjoy the long-term benefits of implant treatment. It is advised that in addition to your own daily cleaning, you attend for 3-4 cleans a year with a dental hygienist.

**We are always here to help.....**

Remember, in addition to your own dentist and hygienist, we are always here to offer help and advice on all implant matters. Routine prevention is better than treatment or cure for a problem. Any infection will detract from the appearance we have achieved. Also, any infection in the gum will increase the risk of bone loss around the implant, infection in the bone around the implant and failure of the implant.

**Arrange your Preventive Appointment with Sharon.....**

Please **make your FREE 30 minute appointment with Sharon Everett** on any Tuesday or Thursday to initiate your future implant care. Get her help and advice and then you can make arrangements for the maintenance of the implant so that you can enjoy a trouble-free future and realise the benefits that dental implant therapy can offer you.

**You still need your routine dental check-ups.....**

The remainder of your teeth still need the routine dental checks and care that your own dentist can offer for the long-term maintenance of your other natural teeth. It is important that you attend every year for routine dental examination and annual or biennial X-rays to check for dental decay between your teeth and signs of bone loss from gum disease around both your natural teeth and your implant(s).

**We now advise that an addition X-ray should be taken every 12 months by your own dentist of the implant(s) to keep a close watch on the bone level** around the implant threads. This will then act as an early warning system for any bone loss and if such bone loss is detected, corrective treatment can be initiated early on in the process to ensure continued bone loss is avoided.

A dental check up also allows screening for general health, gum disease and oral cancer. All these are sound reasons why everyone, both young and old, should have regular dental checks throughout life.

**The first X-ray of the implant.....**

One month after the implant is loaded (has a crown or denture placed on top), an X-ray should be taken by your own dentist to provide a baseline view of the bone at the start of the implant's life. It is this film, which will be the yardstick against which future bone levels are compared.

**We would be delighted if you would ask your dentist to send us a copy by email of the X-ray for our records.**

**Recent research findings show.....**

Patients who have received implant therapy in the past have been recalled for examination in a number of international studies. The results are now showing that unless implant patients are given regular dental care including professional cleaning and oral hygiene advice, the bone levels around implants reduce with time due to slowly progressive bone loss resulting from plaque induced inflammation.

The degree of bone loss in those patients who fail to get the professional support they need is disturbing. The results do vary between studies but even so, the findings are that between 50 and 90% of implants are found to have some

*inflammation around the adjacent gum.* Furthermore, *between 15 and 43% of all implants were found to have suffered from bone loss* with continued inflammation present.

**You have invested in advanced and complex treatment.....**

Your investment in advanced and complex implant treatment requires future maintenance and servicing just as if you had bought a complex piece of equipment, like a new car. Periodic servicing will ensure you get the best out of your investment. Long-term success is what we all want and with the correct approach and care, it will be achieved.

Thank you for giving us the opportunity of providing you with the implant therapy. If we can ever offer advice or help, call us.

With kind regards

*Dr Colin Priestland and the Team at NQ Surgical dentistry.*