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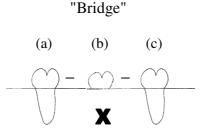
WHAT IS AN IMPLANT- WHAT DOES IT DO? HOW DOES IT WORK?

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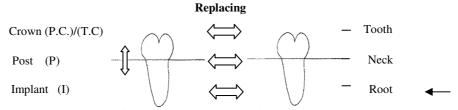
In order for you to get the most out of your dental implant experience it would be very beneficial for us to have a common language and for you to have an understanding of what we do and how we do it. While we've provided many thousands teeth on implants over the past 30 years, for you this may be the first time. We suggest you read this thoroughly and do not hesitate to discuss any aspect that we may not have adequately clarified for you.

A G-d given tooth has three basic parts. The **root** (1) which is in the bone, under the gums, it is the foundation of the tooth. Above the gum line is what we call the **tooth** (3), it is the part that interests most people, as it is the part we smile with, eat with and which holds our face, bones, muscles, joints and bite in its proper place and position. This position allows us normal healthy comfort and function, preventing (and eliminating) headaches, wrinkles etc. Connecting the upper (3) and lower (1) parts is what we call the **neck** of the tooth (2). These together, you might say, are the tooth, the whole tooth and nothing but the tooth.

If one is missing a tooth in between two teeth (x) one could place a crown on each of the neighboring teeth (a) and (c) which would hold the replacement tooth (b) in the middle. This we call a bridge. Alternatively, one could have a removable tooth often called a flipper or denture.



Today, another option exists, instead of the root we can place a root replacement known as an implant (I). An implant is not a tooth. It is a root replacement. It is a foundation on which we can place a non-removable-tooth replacement either transitionally (T.C.) and eventually permanents (P.C.) often called a crown or a cap. The crown is connected to the implant by a neck replacement we call a **post (P)**.



The implant itself is actually "inert", it essentially does not "do" anything. It is the bone, if it exists in adequate quantity and quality that fuses with the implant. Though it sounds like "magic", it is actually an almost automatic biological process, a gift from G-d! The implant and post are made of a natural element in nature, titanium (Ti) or titanium oxide. Like other metals, in the presence of oxygen (air), it oxidizes much like your silver at home that tarnishes. This natural "tarnish" (TiO₂) amazingly is microscopically identical to bone. The bone feels so comfortable with it that it is stimulated to grow and fuse to the implant. This sounds unbelievable and almost is! The bond is so strong that unlike a tooth it can usually not be extracted, even with tremendous force. While this does not always happen, it often if not usually should last as long or longer than natural teeth. As they can not decay, they can potentially last a lifetime. When this fusion does not take place it's usually because the bone has not done its job, maybe due to past trauma (poor root canal material or the like). Interestingly enough when the bone fails to bond-("osseointegrate"), almost always new young bond moves in and a second attempt is highly successful. Nothing is "always" successful. The discovery of this phenomenon has revolutionized dentistry and people's lives! While set-backs do occur, and are disappointing, it is rare not to achieve eventual success.

Well, which is better, a bridge or an implant? This is a tricky question. Even assuming that both financial investments are comparable, while the implant is often the better of the two, sometimes a bridge which might cap two neighboring teeth might be equally or more justified, sometimes both a bridge and implant are the ideal. Of course if the adjacent teeth are relatively healthy, it would be a pity to grind them down in light of

the implant option. When there are no teeth on one or both sides of the empty space or multiple teeth are missing the implant is a great gift and an ideal solution.

Around the world typically it is still acceptable to place and restore implants by performing numerous surgeries, cutting, stitching, grafting and waiting months before getting an actual tooth (crown). Today, non-removable, transitional teeth/crown can usually be placed the same day, "within the hour" without extensive surgeries, cutting and stitching. This is not always the case, but is, more often then not, much thanks to advanced, non-invasive laser technology. Again, nothing is "always". There are usually no significant limitations, allowing you to eat and drink, right away, hot or cold, soft or hard. You may and should brush the implants normally, on the same day. While we don't recommend doing implants the day of a "wedding" or the like, most patients can function the same day, certainly the next day relatively normally.

The financial consideration is important as your treatment could involve a significant investment. None the less, it is important first to conclude what can be done, what cannot be done, what should be done, and what it is you would choose for yourself, money aside. Afterwards, of course, you need to deal with the financial considerations. We on our part will do everything we can to make possible for you the care you need and want.

Be prepared to smile again, bite into something you'd really enjoy, looking good and feeling good, in an amazingly fast and relatively simple way. With G-d's help you should enjoy your investment and efforts for many years to come.

If you haven't already done so we urge you to read our other informative articles on Dental Implants, Dental Lasers, "Implants and Teeth", "A Response to our Patients" among others. If you're coming from far or being treated overseas (not in Israel) it is important that you read our letter "Above and Beyond".

We look forward to changing your life - BE"H! It gives us tremendous satisfaction, fulfillment and the energy to go on providing this service for so many people. We thank our patients for their support and encouragement over the years and pray to be able to continue to do so for many years to come. We appreciate your referral of friends and family who would value our level of care and service.

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