

Advances In Prosthodontics™

New Findings & Best Practices for Cosmetic & Restorative Dentistry

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Do you have a patient who's been buying time but is ready for a long-term solution?



Here's the story of a patient who was referred from another dental professional...

If you have a patient with several missing, broken or worn teeth— or severe gum recession—they may be a candidate for oral rehabilitation and esthetic enhancements with the assistance of an advanced Prosthodontist.

Read more on the next page...

◆ Do you want another opinion on a complex case? Or to meet and share ideas?

There are many ways we can help each other by working together on complex cases and by sharing knowledge and experience.

With your reputation for quality dental care, and my experience with restorative treatments, we can work together on advanced cases and both benefit!

If you'd like to meet to discuss a treatment, or talk on the phone about how we can help each other, please call or email me with specific days and times when you're available to talk or meet.

CASE SUMMARY: Esthetic Treatment of Lower Anterior

Dr. Bryan Jacobs, Prosthodontist

Patient “Pete” was referred to me by another dental professional in the area who was busy with their practice, and Pete’s needs were more complex than they wanted to manage.

Pete presented with severely eroded gums, especially in the lower anterior. He and his dentist wanted to keep lower premolars and molars, and have kept #22-27 for a number of years by splinting them all with resin. You can see that there was virtually no bony support.

As a prosthodontist, I have experience with complex cases and coordinating with a patient’s general dentist and other dental specialists to achieve the best in function and esthetics for patients.

The treatment sequence for Pete included the following:

- Extractions, grafting, and all 3 implants completed in a single procedure.
- A fully-guided surgical guide was digitally fabricated by combining CBCT data and virtual wax-up of planned restoration.
- A screw-retained final prosthesis was fabricated to replace teeth and soft tissue (zirconia with facial layering and stain).
- Reducing the size of the prosthesis to 3 incisors to fit the space.
- Occlusal guard made to protect the prosthesis.

The challenges with this case were:

1. Creating a prosthesis that was hygienic by carefully shaping the tissue-facing surface.
2. Esthetically blending with recession on adjacent natural teeth.
3. Limited space for screw access, requiring guided surgery.

I gave Pete my full warranty and sent him back to the referring office for long-term care. I give all referred patients a warranty and refer them back to the general dentist for regular hygiene unless advised otherwise by the referring office, depending on the patient and treatment. If you have comments or questions about how I treated Pete from this example, please email me at:

bryanjacobs@dentalprofessionals.com



Do you have a patient in Pete’s situation? Or another complex case?

If you have a question about a case and want another opinion, give my office a call. Or, if there’s a case that you want to work together on, please fill out and send in the enclosed referral form.

My office and I will take great care of your patient and keep you informed. Other dentists refer to me as **The Complex Case Specialist™** because I perform complex cases every day.



Quickly Get the Latest Research On Procedures & Materials For Better Outcomes...

What Implant Is That?

Radiographic identification of dental implants

Sahiwal IG, Woody RD, Benson BW, Guillen GE; J Prosthet Dent. 2002 May;87(5):543-77.

Problem and Purpose

The identification of dental implant bodies in patients without available records is a considerable problem due to increased patient mobility and to the large number of implant systems with different designs. The purpose of this study was to document the designs of selected implants to help clinicians identify these implants from radiographic images.

Materials and Methods

More than 50 implant manufacturers were contacted and asked to provide implants with dimensions as close as possible to 3.75 mm (diameter) x 10 mm (length). Forty-four implants were donated, separated into threaded and non-threaded categories, and further sorted into tapered and non-tapered categories. The implants were examined visually, and features on the entire circumference and length of each implant were recorded and categorized as coronal, midbody, or apical.

Radiographs were made of these implants at 0 degrees, 30 degrees, 60 degrees, and 90 degrees horizontal rotation combined with -20 degrees, -10 degrees, 0 degrees, +10 degrees, and +20 degrees vertical inclination relative to the radiographic beam and film. A total of 20 images per implant were taken and examined to identify consistent, unique features that would aid in implant identification. At a 20 degrees vertical inclination, vital features of implants were distorted enough to be deemed unrecognizable. Therefore, only those observations made from radiographs between -10 degrees and +10 degrees vertical inclination were used for implant identification purposes.

Results and Conclusion

All implants could be recognized from radiographs made between -10 degrees and +10 degrees vertical inclination. A series of tables describe the 44 implants according to coronal, midbody, and apical features. Information from this study should help dentists identify non-threaded and threaded endosseous implants from radiographic images.

Thoughts

Try using WhatImplantIsThat.com – a free “search engine” to quickly identify dental implants these studies inspired. At this website you can search hundreds of x-rays from a dental implant library and sort through them by process of elimination. Or, if you want to hold up a mobile device to a patient’s radiograph for even easier identification, you can download a dental implant identification mobile APP based off the online dental implant library at: WhatImplantIsThat.com/mobile

You can accomplish the same thing with either the free website or the mobile app. There is a one-time charge for the app, which covers the cost of development and maintenance to provide this resource to the dental community.

Have A Laugh: Carved Watermelon...

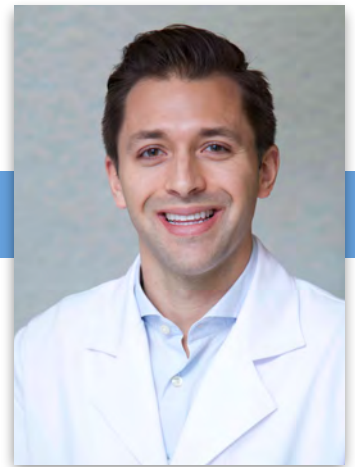
I hope I made you smile during your busy day! I take the care of patients referred to me very seriously, including knowing how to educate them so they feel comfortable.

It's my goal to help every patient understand even the most difficult procedures, so they can regain the function and esthetics they desire.



Dr. Bryan P. Jacobs

DMD, MS, Prosthodontist ♦ The Complex Case Specialist™



About Dr. Jacobs' specialization:

As a Prosthodontist, Dr. Bryan Jacobs specializes in fixed and removable prostheses, dental implants, and all phases of esthetic dentistry.

Dr. Jacobs' prosthodontic training and experience make treatments of complex cases more successful, including the following examples:

- Patients with ill-fitting dentures, severely worn or damaged teeth can receive a single dental implant or a full arch of natural-looking teeth.
- Patients who have suffered from traumatic injury, congenitally missing teeth, or a chronic condition can receive oral prostheses, which may be a combination of dental implants, crowns, bridges, or veneers.
- Patients with severe neglect of their oral health can receive a full reconstruction to restore function and esthetics.

Dr. Bryan Jacobs practices prosthodontics at Dental Professionals in Chicago and Skokie, working with GP's and other dental specialists to restore the smiles and confidence of patients facing a difficult diagnosis.

A Special Message To Fellow Dental Practitioners:

“As the referring dentist, you know your patient's mouth and have key insight into your patient's needs. I want to work with you to provide your patients with the best possible treatment outcomes. I will treat your patient in a manner that will reflect well on you and strengthen your relationship with your patient. I am here to make you look good! When your patient's care is completed, they are referred back to your office for their ongoing dental care. I am grateful for your collegueship and trust with your patients!”

Dr. Jacobs' has an easy online referral form at: DentalProfessionals.com/referring-doctors

◆ Why other dental professionals work with a Prosthodontist

Prosthodontists are specialists in implant, esthetic, and reconstructive dentistry.

1. You have a patient requiring complex treatment outside of your typical practice.

Examples include patients with vertical dimension discrepancies, severely resorbed ridges, inadequate interarch space, TMJ, severe bruxism, traumatic tooth loss, or congenital abnormalities.

2. You have a patient with complex needs that may drain your time.

If your patient may require treatment from several specialists, Prosthodontists can help because they are trained to appropriately stage and manage complex treatment plans.

3. You have a demanding patient who wants perfect esthetics.

Examples include patients with a high smile line or needing a single tooth replacement in the esthetic zone. A Prosthodontist is trained in selecting the best solutions for high-demand patients.

4. You have a question and want to discuss a case with a colleague to ease your mind.

A Prosthodontist can be an excellent resource for you to ask questions because they are trained in many types of complicated treatments. For example, you may want to consult or refer to a Prosthodontist for complex implant-supported restorations. A Prosthodontist can work with you or complete the treatment for you to achieve the best in both function and esthetics.