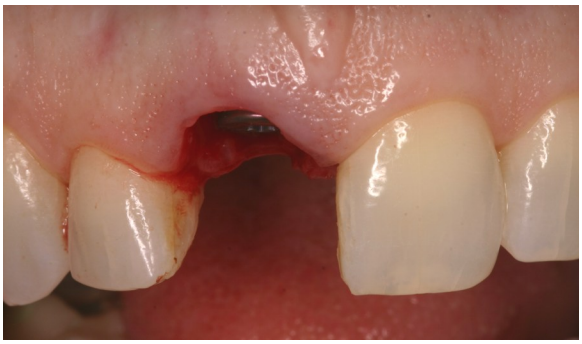
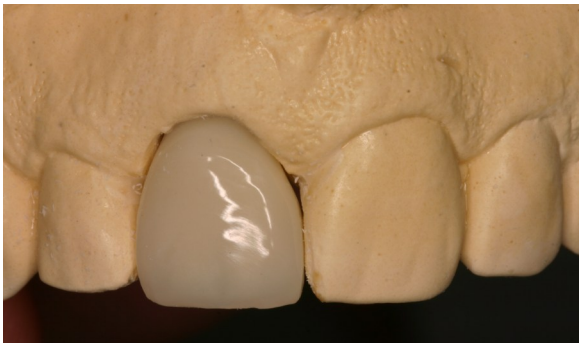
NORTHSTATEPERIO
PERIODONTICS & IMPLANTOLOGY

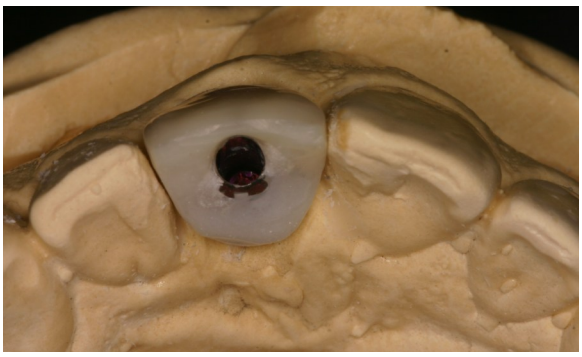
Perio News

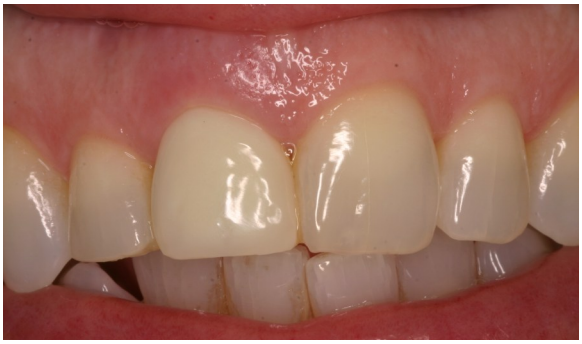
This newsletter represents our opinion about current periodontal treatment and technologies.

Implant Provisionals









In the previous newsletter, we discussed criteria for successful immediate implants. As a follow-up, this newsletter will review another important facet of implant dentistry, provisionals.

With proper implant placement and stability and excellent soft tissue management, provisionals on immediate or delayed implants can be predictable temporary replacements. Provisionals avoid the need for removable replacement. Each provisional is made to fit the specific implant site.

The emergence profile of the abutment/crown through the gingival tissues is the critical area for optimal esthetics. If the emergence profile is not correct, the crown will appear "constricted" and not have the appearance of a natural tooth. A provisional provides control of the emergence profile in all 3-dimensions.

On the left, implant #8 was immediately placed with excellent primary stability. An impression was taken at the time of the surgery and the provisional was lab-fabricated and delivered the next day. The soft tissues are healthy and the papillae are maintained/supported to prevent black-triangles. Occlusion was adjusted as needed.

The impression and delivery chair-time is around 25 minutes total. Once the bone and soft tissues have healed for 10-12 weeks, then any adjustments to the soft tissues or provisional can be made to achieve symmetry with #9.

For the final restoration, a custom abutment/crown or a screw-retained crown will help mimic the exact dimensions and contours of the soft tissues and the provisional.

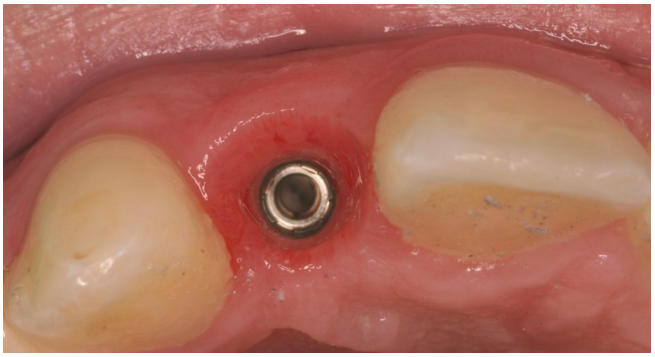
Additional Provisional Benefits

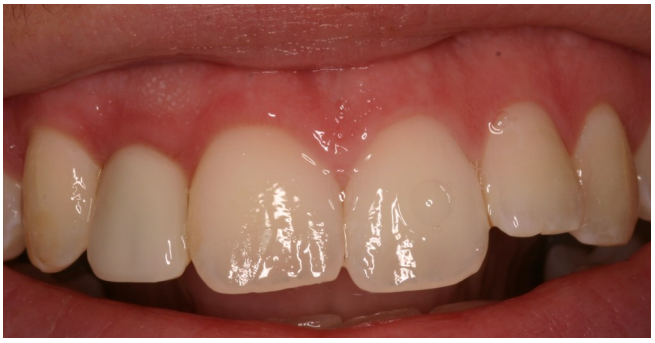
1. Serves as an *immediate fixed* tooth.

2. Allows adjustment to ensure ideal contact point locations to best support the papillae.

3. Provides ideal emergence profile 3-dimensionally to best mirror the look of a natural tooth.

4. Takes the guesswork out of how to achieve the proper final abutment/crown contours for ideal soft tissue management long term.





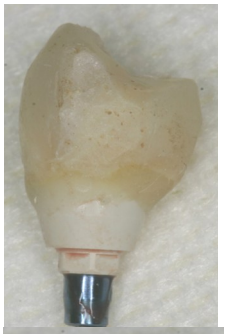
Chair-side

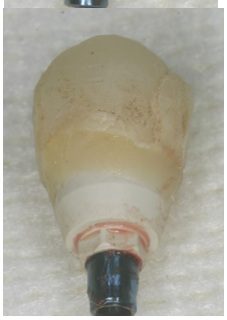
1. Fewer parts mean lower costs.

2. Increased chair-time can make up for lower "costs"; no wait time on lab.

3. The provisional must be taken out to close any open margins and to remove any excess cement.

4. If the crown margins trap plaque and food, the tissues will get inflamed and bleed.





Lab-Fabricated

1. More parts means higher fabrication fee.

2. But shorter chair-time

3. No plaque traps from open margins and no cement. This is very important.

4. Smooth contours for excellent tissue response and minimal to no inflammation.

5. Tissue heal optimally.

In conclusion, regarding future implant consultations, please let us know if we need to consider provisionalizing an implant. We will coordinate this care with your office. An important point to consider is lab turn around time. Preferably, the provisional should be delivered no later than the next day due to changes in implant stability during initial bone healing. With good communication and planning, we can provide this high level of dentistry service to our patients.

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