

Alternatives to Dental Implants

An alternative to dentures or implants may be fixed dental bridges for individuals in their teenage years and older.

Removable dentures can be uncomfortable and awkward where only one or two teeth are involved. Dental implants involve having a false tooth fixed to a titanium post that has been screwed into the jawbone and in some cases, bone grafting may be necessary as the dental ridge is often missing. Dental implants are also not advised for growing individuals particularly in the upper jaw.

What is a fixed dental bridge?

Fixed dental bridges are false teeth that are anchored onto one or both neighbouring teeth in order to replace one or two missing teeth. The false tooth known as a pontic is mechanically fused to the bridge framework and attached to the adjacent tooth/teeth either by an adhesive wing or full coverage crown, thereby bridging the teeth together.

Types of fixed dental bridge

There are essentially two types of dental bridge:

- Minimal preparation resin bonded fixed bridges
- Conventional full preparation fixed bridges

The majority of fixed bridges for teenagers and young adults will be resin bonded in nature. Today conventional crown based fixed bridges are usually only considered when the adjacent supporting teeth are broken down and damaged and would require a crown restoration anyway.

Benefits of dental bridges

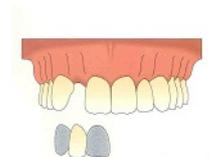
Minimal preparation resin bonded fixed bridges are relatively easy and painless to do.

A bridge will improve:

- smile and confidence
- bite as a result of fixed rather than removable false teeth. speech as a result of filling spaces and avoiding a plate in the roof of the mouth
- reduce gum disease and tooth decay due to reduced food accumulation around removable dentures.

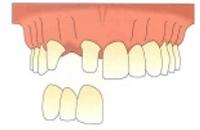
Resin Bonded Fixed Bridges

Sometimes called 'Maryland' or adhesive bridges. These dental bridges don't involve crowning the adjacent teeth and only require minimal preparation. The replacement tooth/teeth is generally made from porcelain and is attached via metal wings bonded to the adjacent teeth using a strong resin that is hidden from view. This type of bridge is particularly suitable where adjacent supporting teeth are intact and can be used to replace both front and back teeth.



Conventional Fixed Bridges

With a conventional fixed bridge, the false tooth, or pontic, is anchored to new crowns attached to the teeth either side of the gap. These bridges are usually made from porcelain with a precious metal sub-structure for strength. Although this form of bridge is strong and retentive it does involve significant preparation of the supporting teeth which may have a detrimental long term effect on their survival time.



How long do dental bridges last?

Dental bridges require the same level of care and attention as natural teeth. Providing a good oral hygiene program is maintained, good diet and regular dental check-ups, a high quality dental bridge can last 10-15 years or longer. Generally conventional fixed bridges last a little longer than adhesive fixed bridges but require more complicated work to manage when they fail.

Caring for a dental bridge

Even the best fitting bridge will still have gaps around and beneath it, and these can quickly accumulate damaging debris if a strict hygiene regime is not followed. Particular attention to the false tooth that forms the bridge should be paid, cleaning and flossing regularly. Extra dental hygiene care should also be given to the supporting teeth either side of the bridge, as without these, the bridge will fail. Regular appointments with a Dental Hygienist will help maintain healthy teeth and gums surround a bridge.

What Age can you have Bridges

For minimal preparation adhesive bridgework there is no absolute age barrier. However this form of tooth replacement may be considered following the development of permanent teeth in the teenage years and when any orthodontic treatment has been completed for those requiring orthodontic / restorative treatment solutions to restore their dentition.

It is strongly advised against the use of full preparation conventional bridgework in the younger age group and generally only advised that this form of treatment today is for patients who have significantly restored/ discoloured/ broken down teeth adjacent to the spaces requiring tooth replacement.

Supporting a normal lifestyle

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