



NORFOLK
DENTAL
SPECIALISTS

Life-transforming dentistry

Prosthodontic Treatments



What is Prosthodontic Treatment?

The speciality of dentistry that focuses on reconstruction and replacement of missing, broken or worn teeth. Prosthodontic treatment aims to improve masticatory function (chewing) and also the appearance of your smile, so that your teeth, jaws and chewing muscles all work in harmony. Different materials and techniques are used to achieve these outcomes.

What options are available?

- Dentures
- Composites
- Crowns, onlays, veneers
- Implants
- Bridges

Tell me more about each of these: Crowns, Onlays and Veneers

These are generally known as 'indirect restorations' and are custom made in a Dental Laboratory. They may be used in the following situations:

- Broken down tooth
- Fractured tooth
- Decay underneath an existing crown
- Improvement in aesthetics of an existing crown or veneer or tooth
- After a root filling to support a weak tooth
- A heavily restored tooth, structurally weak and at risk of fracture
- A cracked tooth
- Significantly altering the form of a tooth in relation to adjacent or opposing teeth



Teeth prepared for crowns.



Gold and ceramic restorations fitted.



Gold and metal ceramic crowns.



Ceramic crowns.

What does this treatment involve?

These restorations are usually made from metal, porcelain or a metal covered with porcelain. The preparation of a crown involves the use of local anaesthetic. Depending on the type of restoration, a layer of the tooth is reshaped. Impressions are usually taken either conventionally or digitally. A temporary restoration is usually made. On a separate appointment the temporary is removed, and the crown/onlay is tried and cemented in. Occasionally in aesthetic cases, or more complex restorative treatments several visits may be required for impressions, measurement and planning prior to the fitting of the crowns.

Dentures

Also known as false teeth. Removable dentures replace missing teeth and gum. Full dentures replace all of the teeth in one arch. Partial dentures replace a number of missing teeth. Commonly, dentures are made of acrylic or metal (Cobalt-Chrome). Each material has certain advantages and disadvantages. For full/complete dentures Acrylic is generally the material of choice although metal-based dentures may be more suitable in certain circumstances. Where a suitable number of teeth are still present a metal based denture is the preferred choice for partial denture.



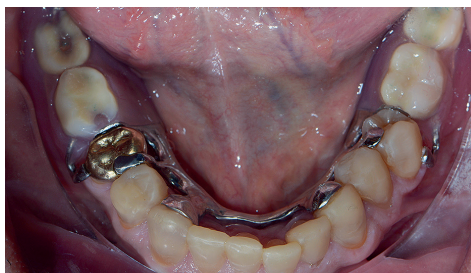
Unrestorable teeth.



Missing teeth replaced with dentures.



Chrome denture (left) and denture in mouth (right).



Factors to be aware of prior to proceeding:

Dentures are removable mechanical substitutes for missing living tissues and as such will exhibit movement when chewing food, talking and when the tongue and muscles of the mouth move. This improves with time as you get used to the denture.

Some patients experience changes in speech following the fitting of new dentures but this usually resolves quickly. Learning to chew satisfactorily with new dentures usually requires time (weeks-months). Adaptation is required – new memory patterns (neuromuscular control) must be established in order for the muscles of the tongue, cheeks and lips to keep the dentures in position. This is not something you need to actively 'learn' but need to allow time for your mind and body to learn

Saliva flow changes, but this usually resolves quickly. The denture will feel "big" to begin with, potentially providing a feeling of fullness; Cheek, lip and tongue biting may occur but again usually resolves with time. Occasionally some of our patients require denture fixative in order to keep the dentures more secure. I would expect the use of fixative to be largely unnecessary but is sometimes needed.

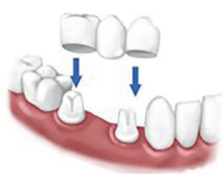
Careful handling and cleaning of the dentures is required, because they can break if dropped on to a hard surface. In the event the new denture is unsatisfactory for you, we will need to consider a more complex option to support the denture – i.e. dental implants.

Bridges

A dental bridge is essentially just a false tooth to replace a missing one. The reason it is called a bridge is because it is anchored in place using one or more remaining teeth on either side. These crowns then attach to the existing teeth (or implants, if required), so a bridge is formed.

DIFFERENT TYPES OF BRIDGES

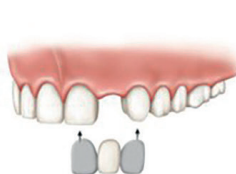
- **Conventional bridge:** Involves reshaping the tooth on either side of the missing tooth and connecting the '3 teeth' together in one bridge.
- **Resin-bonded bridge:** The pontic or false tooth is held in place using a metal wing which is 'bonded' to the back of usually one of the adjacent teeth using a special type of cement. These bridges are typically for replacing a front tooth.
- **Implant supported bridge:** Similar to a traditional bridge but supported by dental implants and not natural teeth. In most cases, when an implant supported bridge is used, one implant is placed in the front of the tooth loss area and one behind. After that, restoration (bridge) can span the entire space creating a beautiful end result.



Traditional Dental Bridge



Cantilever Bridge



Maryland Bridge



Implant-Supported Bridge

Our team

All the dentists at NDS are highly experienced – either registered specialists or with accredited postgraduate qualification - in their chosen fields of Periodontology, Implantology and Prosthodontics. They are committed to excellence in patient care and providing successful treatment outcomes in a kind, gentle, and caring environment.

Hamed Karimi - Practice Principal

(BDS (Edin), MSc (Lond), MClintDent (Lond), FDS, MRD RCS (Eng)

A specialist in Periodontics, Hamed is a graduate of Edinburgh University and has a Fellowship in Dental Surgery from the Royal College of Surgeons of England. He specialised with a distinction from Guys Hospital (King's College, London). He works exclusively in dental implants and periodontics and also lectures regularly, both locally and further afield, on these subjects.



"Our primary concern is the health of your mouth. So, first and foremost, we seek to focus on helping you either maintain – or regain – optimal dental and gum health.

In a perfect world, nobody would ever need remedial treatment, which is why we place such a premium on straightforward oral hygiene education and monitoring for our patients. But, in the real world, accidents and wear and tear are almost inevitable. So when the need arises, we aim to offer you the very best possible implant, periodontal and prosthodontic treatments – solutions that will return you to near-perfect oral health."

Our fees

To ensure that you fully understand our costs before undergoing any treatment, we discuss and explain all your fees clearly and include them in the treatment plan letter we send to you after your initial assessment. As we deal with every patient individually, each treatment plan reflects your particular needs and expectations. You'll find the latest fee guide and price list on our website.

- Whilst we prefer payment by BACS using your unique patient number, we do accept cash and most debit/credit cards
- We encourage 'Pay As You Go', where you make payments in stages over the course of treatment, normally after each visit. This policy reduces our administrative charges
- To help spread the cost of your treatment, we can also offer a monthly, interest-free facility usually over a six month period. Terms and conditions apply: please feel free to ask for details of this option at reception.



Our practice

NDS is a specialist, rather than general practice, specifically dedicated to providing specialist treatment.

You'll find us on the corner of Victoria Street near the inner ring road - opposite the site of the old Norfolk and Norwich Hospital. We offer limited on-site parking, but there are several car parks nearby (marked on the map), and the main bus station is only a few minutes' walk away.



