



There's an alternative to a dental implant

Dr. Tony Druttman, Specialist in Endodontics

Your dentist may have told you that your tooth has to be extracted and can be replaced with an implant. Is there an alternative? Although a dental implant is recognised today as an excellent long-term solution, keeping original teeth is always better. That's why you should consult an endodontist (root canal specialist). Often a 'condemned' tooth can be saved and restored to full use.

Making a decision is not always easy and a number of different factors need to be taken into account. This article may help you to ask the right questions to make an informed decision.

What is a dental implant?

The implant is a titanium screw that is placed into the jawbone to which an artificial crown can be attached (Fig.1). It is designed to replace the natural tooth, both in terms of function and aesthetics. It requires an adequate quantity and quality of bone for the implant to become secure. If there is insufficient bone then various additional procedures may be required to enhance the amount of the existing bone, such as grafting natural or artificial bone.



Fig 1. Implant By Dr Michael Zybutz: Root canal treatment by Dr Tony Druttman

What are the alternatives to implants?

Provided the natural tooth is still in place, root canal or endodontic treatment may be an alternative to an implant. This involves the removal of the dental pulp (nerves and blood vessels) from the root canals of teeth. The canals are cleaned and shaped and a root filling is placed to seal the canals (Fig. 1). Although it can be technically more difficult than the placement of an implant, a root canal treatment may be a more appropriate solution, provided it is carried out properly.

Factors influencing extraction

1. How much of the tooth is left?

The most important factor is the amount of tooth remaining that shows above the gum line, on which a crown can be attached and the tooth restored to give a functional and aesthetic result. If very little of the original tooth material remains, then although technically the tooth can be root-filled and restored, the final result may not be strong enough to last any length of time. (Fig 2)

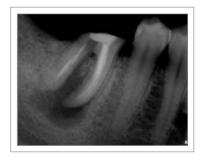


Fig 2. X-ray of a molar tooth with all of the tooth above the gum line destroyed.

Although restoration would be technically possible, the tooth would be very weak. The better decision would be to replace it with an implant

2. How technically difficult is it to save the tooth?

Some teeth are much easier to root treat than others. Those with a single canal at the front of the mouth are often more straightforward than molars, which have multiple canals that may be quite curved. The problem is that replacing molar teeth with implants is not always easy, either through lack of bone or because of major nerve channels that could be damaged if the implant is placed too deep. Sometimes, previous root fillings can fail and these teeth are recommended for extraction and implants. However these teeth can be successfully root-treated again,



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provided this is done by a specialist with the requisite skill, experience and equipment. (Figs 3a + 3b)

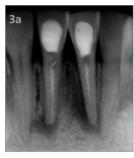




Fig 3a Inadequately root filled teeth showing infection at the root tips Fig 3b Re-root treated showing healing of bone after eight months

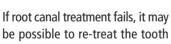
3. How much bone is left around the tooth?

The amount of bone required to keep a tooth in place is less than that required to place an implant. Having said that, if there is enough bone to secure an implant, it may be a better solution than keeping a loose tooth.

4. What are the chances of success?

Success rates for both root canal treatment and implants are high. However there are no guarantees. Implants can fail to osseo-integrate (create a biological fusion with the bone) with the bone and there are no published figures for these failures. Implants can be difficult to place in exactly the right position and this can be critical especially at the front of the mouth.

Inadequate treatment planning can lead to serious aesthetic failures (Fig 4) and at times correction of an underlying aesthetic problem can be enormously challenging (Fig 5). If an implant does fail, then it has to be removed.



either surgically or non-surgically. If that fails, the tooth would then have to be extracted.





Fig 5a Front tooth with a fractured root
Fig 5b Tooth has been extracted and an implant
placed. By Dr. Michael Zybutz

Whether the tooth is root treated or replaced with an implant, success will depend to a large extent on the experience of the dentist carrying out the treatment. This may also influence his or her advice on the proposed treatment.

Questions to ask your dentist

- Is there an alternative to tooth extraction and an implant?
- Can the tooth be saved by root canal treatment?
- How difficult is the root canal treatment and would a referral to a specialist be advisable?
- How long is the tooth likely to last if it is kept?
- What would be the situation if the treatment proposed were to fail?

If you have doubts about having your tooth extracted, consult another dentist or a specialist. The General Dental Council has lists of endodontic specialists in your area.

About Dr Tony Druttman

Dr. Tony Druttman, MSc. B.SC. B.Ch.D, is an Endodontics consultant with two practices in Central London. He teaches Endodontics at the Eastman Dental Institute for Oral Healthcare Sciences. He has lectured in the UK and at international congresses on wide-ranging topics dealing with root canal treatment.

after the placement of two adjacent implants

Fig 4. Poor aesthetic result