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Implanting CONFIDENCE

For those who have lost teeth, replacements can turn their lives around



Walter Richard Weis/Staff Photographer

Dr. Vahik Messerkan, left, and Dr. Tony Daher fit Bea Orr with a set of dental implants in La Verne.

By La Rue Novick | Staff Writer

EA ORR smiles a lot these days. She's got a beautiful smile that would rival Hollywood's toothiest grins.

But less than a year ago, Orr didn't even want to be seen in public.

Most of her teeth had fallen out and those few remaining were discolored with rot. An aggressive form of gum disease left untreated had wreaked havoc on her mouth.

Orr explained that a few years ago she had to give up her job as a real estate agent and take care of an ailing mother who has since passed away. She didn't have time to work, much less worry about her teeth. But after her mother died, Orr had time to see what had become of her mouth. And quite frankly, she felt embarrassed and ashamed.

"Your teeth (are) your No. 1 asset," Glendora resident Orr, 58, said. "It's "The thought of having dentures at 58 just didn't sit right with me."

- Bea Orr, dental implant patient

your image, especially if you are a happy person and laugh a lot. Your teeth should look good."

Orr knew she'd have to do something, so she looked in the phone book and found Dr. Tony Daher, a prosthodontist in La Verne who specializes in tooth restoration and replacement. From the first time she met him at her consultation on Oct. 21, she felt immediately comfortable, she said.

Daher carefully explained the options to her. Because Orr had lost so many teeth already, she could either get dentures or go with permanent dental implants. Orr chose the implants because she felt she was too young to have dentures for the rest of her life.

"The thought of having dentures at 58 just didn't sit right with me," Orr said.

Orr first had to be screened to make sure she was a good candidate for implants. Daher needed to know if she had enough jawbone to undergo the implant procedure, so he ordered a CAT

Her jawbone was sufficient. If it had not been, an oral surgeon could have performed a bone graft to build up her jawbone for implants.

For the implant procedure, a tiny hole must be drilled into the jawbone for each titanium implant, which acts as an anchor

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Thomas R. Cordova/Staff Photographe Bea Orr, 58, of Glendora would rather have dental implants than deal with dentures. Top left photo

Options in replacing teeth

shows Orr before dental implants.

Bea Orr's implant story is an extreme one. Most implant cases involve people missing a single tooth, not all of them.

When teeth are lost, the ability to speak or chew is impaired. It can be difficult to maintain a proper diet. Missing teeth also cause the jawhone in that area to deteriorate. Without the support of the missing tooth or teeth, the person's facial muscles could begin to sag, making the person look older, according to information published by the American Dental Association.

Generally, the three main options for replacing a missing tooth are an implant, a fixed partial bridge or a removable partial denture.

Implants have been around for more than 20 years, but they are better than ever now, said Dr.

Walter Richard Weis/Staff Photographer

Dr. Daher uses a cast of

the patient's mouth to

design a custom fit for

the implants.

Tony Daher, a prosthodontist who specializes in tooth restoration in La Verne.

An implant is a titanium screw placed in the jawbone where it will fuse with the bone over a period of time, usually four to six months depending on how quickly a patient heals. The implant acts as an anchor, or the root, for a prosthetic crown, the visible part of the implant.

Implants with crowns look and feel like real teeth, are very stable and last a lifetime. (The crowns might have to be replaced at some point, but will last many years if taken care of properly.)

Not everyone can

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for a prosthetic crown which will later be fitted on top of the implant. The titanium implant eventually becomes fused with the bone and essentially becomes the root of the prosthetic crown, according to the American Dental Association.

Orr first had to have all of her remaining teeth removed, which she did on Dec. 4. She was fitted with temporary dentures, which provided her teeth right away and gave her mouth time to heal from the gum disease.

On March 19, Daher took Orr's dentures, cut them apart and removed all the teeth to be placed as a temporary fixed bridge. The fixed bridge is the bridge that connected the teeth together so Orr wouldn't have to have one implant per tooth, Daher said.

Dr. Vahik Meserkhani, an implantologist from Loma Linda University where Daher sometimes teaches, drilled five tiny holes in Orr's bottom jaw bone. Daher sat in on the procedure because he decides where the titanium implants must go and has to oversee each procedure.

"I'm the captain of the team," Daher said.

Orr's mouth was numbed before surgery. The procedure took a few hours. At the end, Orr left with 10 prosthetic teeth set as a temporary bridge over the five implants.

Daher referred to the temporary bridge as a template for the permanent bridge. With the template, he is able to work out all the aesthetics of the permanent bridge, such as the bite and the color and shape of the teeth, he said.

"It's like a blueprint," he added. "This is standard for prosthodontic work. We take it the extra mile."

Orr would have to wait at least three or four months for her gums and jaw to heal before Daher could replace the temporary bridge with a new permanent fixed bridge of 12 teeth, Daher said. She will get her permanent bridge in another month or so and then she will get her upper teeth done.

Orr said she's anxious to get her upper teeth done because she's "so jazzed about how the bottoms feel."

Already she's in heaven. The temporary implants look and feel like her own teeth.

"Oh my God, you don't even believe it," Orr said. "It's just unbelievable. I forget that they're even there."

Just for the bottom row of implants, Orr has spent about \$12,000. Insurance did not cover any of the expense because it is considered a cosmetic procedure. Some cases

will cost less, others more.

Daher said, "All of the money she has spent has become nothing" because of how confident Orr feels now.

Orr definitely agrees.
"I'm smiling all the time,"
Orr said. "What? Are you
kidding? That man gave me my
life back."

La Rue Novick may be reached by phone at (909) 483-9328 or by email at larue.novick@dailybulletin.com

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get implants. Patients must be in good health, have no gum disease and have sufficient jawbone for the surgery. Patients will most likely have to get a CAT scan done to make sure that have sufficient bone for the procedure.

An implant can be placed for just one tooth or for more than one that are connected together to form a permanent implant bridge.

Prices range for different specialists. Daher, who keeps up-todate with the latest technology, charges \$3,000 for a single implant. For a full-mouth restoration (complete top and bottom), patients will pay upward of \$25,000 to \$28,000. Dr. Daniel Gardiner, an Upland periodontist specializing in gum disease who also does implants, charges about \$3,300 for one implant. Gardiner does not do full-mouth rehabilitation.

A fixed partial bridge (or denture) replaces the missing tooth with an artificial tooth, called a pontic, that is connected to two crowns. The teeth immediately adjacent to the missing tooth must be filed down so that the bridge can be cemented into place. Only a dentist may remove a fixed partial bridge. Fixed partial dentures are more stable and comfortable than removable partial dentures.

Dentists and prosthodontists can do bridges. Prices vary, but the bridge usually costs around \$700 to \$800 per unit (or crown).

A removable partial denture is the least expensive of the three options, and is used when more than one tooth is missing. Generally, the elderly or someone who has lost teeth in an accident benefit from removable partial dentures.

The artificial teeth are attached to the pink or gum-colored plastic

base connected by a metal framework. The unit can readily be removed for cleaning and is easy to

Partial dentures range in price, but the average is \$2,500 for one side of top or bottom teeth. The price is around \$6,000 for full upper and lower dentures.

As for which option is best, that depends on the individual patient's needs and financial means. Some dental specialists say implants are best simply because they are a permanent solution and don't rely on filing down other teeth to be anchored in the mouth.

In 2002, the ADA reported that use of implants has been on the rise since 1997. But the ADA has no conclusive information about which option is most used today.

The ADA recommends people talk with their dentist or prosthodontist about which option would best suit them and their lifestyle.

 Sources: the American Dental Association at the <u>www.ada.org</u> and the California Dental Association at <u>www.cda.org</u>

-La Rue Novick, Staff Writer