

Advances In Prosthodontics™

New Findings & Best Practices for Cosmetic & Restorative Dentistry

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COMPLEX CASES:

Dr. Joe Meng &
Dr. Graham Meng
Both Have Specialized
Training & Skill To Help
with Patients in
These Situations
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Do You Have a Patient with Severe Wear?



Here's the story of a patient who was referred from another dental professional...

If you have a patient with several missing, broken or severely worn teeth — or failing restorations — they may be a candidate for oral rehabilitation with the assistance of an advanced Prosthodontist.

Read more on the next page...

◆ Do you want another opinion on a complex case? Or to talk and share ideas?

There are many ways we can help each other by working together on complex cases and by sharing knowledge and experience.

If you'd like to discuss a difficult procedure, or talk on the phone about how we can help each other, please call or email our office with specific days and times when you are available.

More Examples

Stay informed on new findings and best practices for cosmetic and restorative dentistry.

See more examples of complex cases online:



AdvancedProsthodontist.com
/ Meng

Full Mouth Reconstruction on Natural Teeth and Single Tooth Dental Implants

by Joe Meng, DDS, MS, FACP, Board Certified Prosthodontist — *Meng Dentistry*

Patient “Bob” was referred to me by his general dentist due to severe wear from grinding. The dentist requested that I evaluate Bob for restoration of his collapsed vertical dimension of occlusion (VDO). Bob inquired about full mouth extraction and full mouth implant treatment, which I will discuss more at the end of this case presentation.

Bob presented with severe tooth wear from acid erosion and attrition, with secondary supraeruption of anterior sextants. I suspected obstructive sleep apnea due to multiple anatomic risk factors and reported symptoms. Bob also had multiple restorations failing due to material failure or recurrent caries, and failing endodontic treatment.

As prosthodontists, we have experience with complex cases, and can plan multi-stage treatments that coordinate with a patient’s general dentist and other dental specialists.

Bob’s treatment sequence included the following phases:

Phase 1 — Accurate Diagnosis

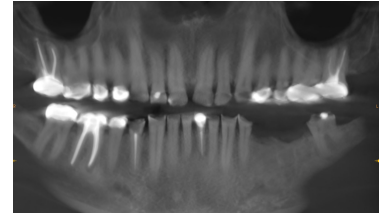
- A review of Bob’s history suggested acid erosion most likely due to gastric reflux. I discussed with Bob that gastric reflux and bruxism are both related to undiagnosed obstructive sleep apnea.
- Bob was referred to our sleep practice (Sleep Better Montana), for a home sleep test and diagnosis. Bob was determined to have moderate obstructive sleep apnea.

Phase 2 — Upper Arch Restorations, and Prep of Lower Arch

- Performed osseous crown lengthening #6-11, 21-27.
- Prepared maxillary arch for new crowns, with transitional bonding of the lower dentition to open VDO and create the necessary restorative space. Transitional bonding was performed due to Bob’s need to phase treatment for financial reasons. Tooth #5 was determined to be structurally non-restorable after caries excavation.
- Delivery of upper definitive zirconia crowns, with long-term milled temporary crown for tooth #5.
- Extracted teeth #5, 29, 30 and placed implants in sites #5, 19, 20, 29 and 30.
- Prepared the mandibular dentition for crowns and impressions for single tooth dental implants.

Continued on next page...

Initial



Crown Lengthening



Provisionals with Lower Transitional Bonding



Final Result

◆ Do you have a patient in Bob’s situation? Or another complex case?

If you have a question about a case and want another opinion, give our office a call. Or, if there’s a case that you want to work together on, please fill out and send in the enclosed referral form. We will take great care of your patient and keep you informed. Dental professionals refer to us as **The Complex Case Specialists™** because we perform complex cases every day.

Phase 3 — Delivery of Final Restorations

- Final zirconia and gold crowns were placed.
- Fabricated a mandibular advancement device for treatment of obstructive sleep apnea, and to protect against risk of further bruxism.

Major Challenges for this Treatment

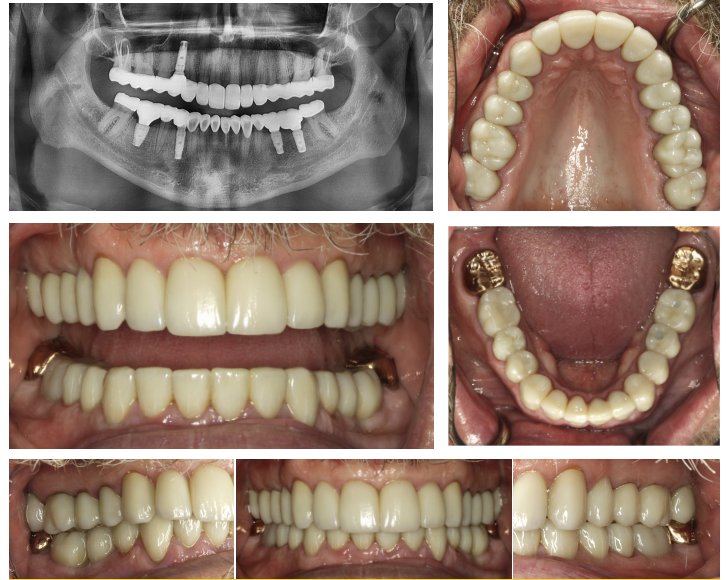
1. Inadequate remaining coronal tooth structure and restorative space due to severe tooth wear and compensatory supraeruption of teeth.
2. Uneven occlusal planes.
3. Management of recurrent caries under existing crowns requiring laser gingivectomy and limited crown lengthening with Er:YAG laser during preparation.
4. Controlling Bob's parafunctional forces in the future — hopefully treatment of his obstructive sleep apnea will help this cause.

Prosthodontic Tip

If you see significant tooth wear from acid erosion or attrition, be curious about untreated obstructive sleep apnea.

Regarding the “over promotion” of full mouth implant treatments . . .

Bob originally thought he would be best served with full mouth implant treatment. We find this is a common patient request due to the significant efforts by many dental groups offering All on X treatments. We offer this treatment and it can be truly life-changing. However, we believe saving restorable and strategic teeth is still the best treatment for most patients, unless significant risk factors cannot be controlled (such as with advanced periodontal disease or other reasons for terminal dentition). Often the patient simply needs to know all their treatment options. We frequently use the phrase, “Our job as dentists should be to make the patient worse at the slowest possible rate,” to help the patient understand the value of being conservative. Again, dental implants are a wonderful replacement option for missing or truly non-restorable teeth, but in many cases there is nothing a dentist can provide that is superior to the biology of one's natural teeth. Aside from being resistant to dental caries, dental implants offer no biologic advantages over healthy natural teeth, and do come with other long-term maintenance challenges that many providers fail to disclose. **If you would like to discuss a case, please let us know.**

Final Result

If you have a patient with a complicated dental problem, it would be our pleasure to help with diagnosing, planning, or treatment execution for complex cases. **When patients are referred,** we refer them back to their general dentist for regular hygiene, unless advised otherwise by the referring office, depending on the patient and treatment. If you would like assistance in helping a patient with a complicated dental problem, please call our office, or email us at:

info@MengDental.com

Smile Comparison

◆ How can a Board Certified Prosthodontist assist you and your dental team?

We specialize in the treatment of complex cases, usually involving several procedures over months of care. The next time you see a challenging case, please feel free to call us and we can discuss treatment planning or we can help you with any part of the treatment.

Our goal is to be a resource for your office by helping manage difficult and time-consuming procedures, restoring the function and esthetics that the patient desires, then referring them back to your office for their ongoing care.

ABOUT OUR SPECIALTY PRACTICE



Joe Meng
Board Certified
Prosthodontist

Meng Dentistry is a comprehensive, specialty dental practice that focuses on the restoration and replacement of missing teeth with natural-looking, well-fitted, comfortable prosthetic teeth primarily using dentures, implants, and crowns. The specialists at Meng Dentistry have training and private practice experience that make treatments of complex cases more successful, including the following examples:

- Patients with ill-fitting dentures, severely worn or damaged teeth can receive a single dental implant or a full arch of natural-looking teeth.
- Patients who have suffered from traumatic injury, congenitally missing teeth, or a chronic condition can receive oral prostheses, which may be a combination of dental implants, crowns, bridges, or veneers.
- Patients with severe neglect of their oral health can receive a full mouth rehabilitation to restore function & esthetics.

In addition, Meng Dentistry is equipped with an **in-house dental lab**, for your referred patients to receive custom restorations from the best materials using the latest technology..



Graham Meng
Board Certified
Prosthodontist

Learn more about how they can help your patients by scanning this QR code:



Personal Message To Fellow Dental Practitioners:

“As the referring dentist, you know your patient’s mouth and have key insight into your patient’s needs. We want to work with you to provide your patients with the best possible treatment outcomes. We will treat your patient in a manner that will reflect well on you and strengthen your relationship with your patient. We are here to make you look good! When your patient’s care is completed, they are referred back to your office for their ongoing dental care. We are grateful for your collegueship and trust with your patients!”

Our Pledge

When your patient is referred:

- ✓ We will only treat what your patient needs.
- ✓ We will send you updates.
- ✓ We will be part of your team, not take over your patients.

◆ Why other dental professionals work with a Board Certified Prosthodontist

These are the most common reasons why other dentists refer to a Prosthodontist:

- **Failing Restorations** — Broken or worn prosthetics, or poorly-fitting dentures
- **Implant Complications** — Mal-positioned or loose implants, or multiple systems
- **Severe Wear** — Advanced attrition from grinding or erosion, and collapsed vertical
- **Terminal Dentition** — Perio disease or neglect, requiring extractions and prosthetics
- **Edentulous Problems** — Resorbed ridges or lack of bone, wanting a fixed solution
- **Occlusal Issues** — Advanced mal-occlusion, jaw discrepancies, canted plane
- **Challenging Esthetics** — Un-esthetic restorations, high smile line, high expectations
- **Missing Anteriors** — Central incisors from trauma or laterals from genetics

These “complex cases” may drain your time — how to help these patients:

Prosthodontists can be a resource to ask questions or help properly stage and manage complex treatment, often involving multiple specialists and providers over months of care. They can coordinate repair or replacement of teeth with fixed or removable prosthetics, to give patients ideal function and esthetics, then refer the patient back to you.