

Advances In Prosthodontics™

New Findings & Best Practices for Cosmetic & Restorative Dentistry

INSIDE THIS ISSUE

CASE SUMMARY:

Full Mouth Reconstruction for a Patient with Advanced Periodontal Disease

Background
pages 1-2

Treatment Phase 1
page 2

Treatment Phases 2 & 3
page 3

Final Result,
Important Note, and
Prostho Tip
page 3

COMPLEX CASES:

Dr. Joe Meng &
Dr. Graham Meng
Both Have Specialized
Training & Skill To Help
with Patients in
These Situations
page 4

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Do You Have a Patient with Periodontal Disease?

Before



After



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 for a Patient with Advanced Periodontal Disease

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

Patient “Mark” came to our specialty practice after his general practitioner recommended an upper All-On-X treatment plan. Mark presented with a maxilla affected by generalized chronic severe periodontitis and a mandible with generalized moderate periodontitis, with localized areas of severe involvement. Both arches were classified as Stage IV. Although he did not have significant plaque and calculus, bleeding was present on all deeper sites and supraeruption was present in all 4 quadrants.

After attending periodontal maintenance appointments three to four times a year for decades, he already knew the time would come when he’d have to lose many teeth. He was also aware of failing root canals and that several upper and lower teeth were getting loose. His concern was that he was retiring and moving to a remote island in Hawaii, so he would not have the consistent access to care that he has had for his adult life. He wanted a comprehensive fixed solution.

Upon a comprehensive examination, further complications presented: a Class 3 malocclusion, a high smile line, and pneumatized and anterior placed maxillary sinuses. He didn’t recall his bite relationship being this way, and has worn an oral appliance for Continuous Positive Airway Pressure (CPAP) for over 20 years. In his situation, without treating the whole mouth, the prognosis of his implant reconstruction would be significantly reduced due to unideal occlusal forces on his dentition, especially during the healing phase.

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.

Mark’s treatment sequence included the following 3 phases:

Phase 1 — Initial Treatment

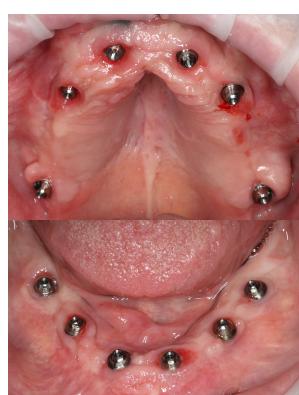
- After digital planning and pre-surgical workup, we determined that we could correct his occlusal relationship.
- Teeth were removed.
- Alveoplasty was performed to the predetermined marks.
- Implants were placed according to the PATZI protocol.

We verify twice to get the final restorations right.

Continued on next page...



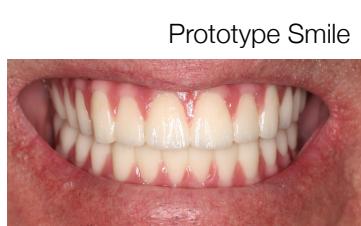
Initial



Implant Placement



Surgical Temps



Prototype Smile

Final Result

◆ Do you have a patient in Mark’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 see the enclosed referral info sheet to learn more about what you and your patient can expect when referring to our specialty office. 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 2 — Immediate Loading

- Excellent anchorage was obtained in all arches.
- Immediate loading utilizing a digital workflow and in-office 3D printed bridges was completed.
- After 3 months of healing, integration was confirmed.

Phase 3 — Final Delivery

- A model-less full digital workflow was utilized over 3 visits and 3 weeks to take new records of implants, soft tissues, and occlusion.
- The final titanium bar with zirconia overlay sleeves was delivered.
- Mark was placed on a 6-month recall interval.
- An occlusal guard was delivered to control any nighttime habits.
- Mark started using a CPAP after the healing phase as mandibular advancement appliances are contraindicated during healing. Given the risk of bite change, he plans on staying with the CPAP as long as possible.

Important Note

When planning a full arch implant reconstruction, especially in the maxilla, current methodology favor minimal or no cantilevers. Pre-surgical evaluation showed Mark's anatomy wouldn't permit implant placement beyond the first premolars, and bone and tissue adjustment was needed to properly position the prosthetic-gum transition line relative to his smile.

Prostho Tip

Advances in implant design and surgical techniques now allow for less invasive treatment in patients with difficult anatomy or severe bone resorption. Using alternative anchorage sites like the pterygoid or zygomatic regions enables ideal implant positioning, sufficient anterior-posterior spread, and immediate provisionalization. These procedures can be performed under conscious sedation in our office, without significantly increasing cost or invasiveness, while delivering excellent clinical results.

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

Final Result



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



Graham 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.

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 colleagueship 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.

◆ Have you seen a patient in one of these situations?

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.