



Dental Implant Maintenance

Implant retained teeth require ongoing care and maintenance to ensure that they remain healthy in the long term. Unlike teeth, decay is not possible in dental implants. However, gum disease is still possible around dental implants, and once established, it can be more difficult to manage in some cases than in normal teeth.

Gum disease is the biggest cause of failure of dental implants long term.

For this reason, it is important that you follow the cleaning instructions you have been given and maintain a good standard of oral hygiene. These include twice daily tooth brushing, daily interdental brushing (Picksters), flossing in some cases and X-floss in some cases. If you are still not sure about how to clean around your dental implants, please contact us to arrange an additional oral hygiene instruction visit with our dental hygienist.

It is important that you continue to attend for 6 monthly examinations to assess the health of all your teeth including dental implants, and so that any early potential disease can be identified and managed with minimal intervention.

It is also important to continue with 6 monthly hygienist visits, so that gum health can be maintained and to ensure gum inflammation and early gum disease is kept under control.

You should function with your dental implant retained tooth in the same way that you would function with a natural tooth. You should feel confident to bite and chew with your new tooth. Since there is no ligament between the dental implant and the jaw bone like in a natural tooth, you will not get the same feeling and feedback when you bite on a dental implant retained tooth. This is completely normal and you will get used to this in no time.

Since the biting feedback is different, it is possible you could apply excessive force through your dental implant retained tooth without realising. For this reason, you should avoid chewing very hard things on your implant, such as ice cubes and blocks of chocolate straight from the fridge.

If you have any further questions, please contact the practice on 07 54432011. Please sign below to acknowledge that you have read and understood the information explained above.

Patient Name:

Signature:

Date: