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Components Of The Holistic Approach To Dentistry

REPLACING MISSING TEETH

Whenever teeth are lost – for whatever reason – a decision needs to be made whether or not to replace it/them. Not all teeth need to be replaced, contrary to what mainstream dentistry says. Second molars – 12-year molars - the last molars in the mouth, generally do not need to be replaced. Most all patients I have seen with missing second molars do not “miss” them. And because second molars are closest to the jaw joint hinge, they get the most force.



Here is a patient who saw a dentist who did *extensive* sinus grafting surgery to be able to place an implant in a second molar area and had multiple complications during the healing phase. 2 years later, the abutment fractured and the crown fell off – think of the force that takes.

The first molars – 6-year molars – are a main chewing tooth, that a different situation. The other thing dentistry says is that surrounding and opposing teeth will shift and move if not replaced. Again, it is rare that I see this. I find that the tongue and lip muscles accommodate and help keep teeth in position. Another reason for good photographs – they help monitor teeth positions. If things are moving, then that may be a rationale for replacement. Obviously another reason is if the tooth is in the “smile zone” and that concerns the patient. In other words, is the missing tooth/teeth affecting comfort, function, health, esthetics and/or overall stability? If so, then you may have a valid rationale for replacement.



If a decision is made to replace the tooth/teeth, there are several options. One is a dental implant or implants. We use the Bicon system because it has several biological advantages, See <https://www.bicon.com/patient/index.html>



Another option is a traditional non-removable bridge. The disadvantage of this approach is that the adjacent teeth will need treatment so they can serve as anchors. If the teeth are in perfect shape, this means that those teeth will need to be prepared when they don't need it for other reasons. If the adjacent teeth need restorations anyway, then this approach makes more sense. The diagram shows the adjacent teeth being crowned. They quite often don't need crowns and can serve as abutments with more conservative inlay or onlay preparations.



A third option is a removable partial denture. They were traditionally made with a metal alloy framework but now can be done with a biocompatible, thermoplastic material called Valplast. See <https://www.valplast.com/patients-1> These work well when there are multiple missing teeth. They can also be done when you are replacing only one or two teeth. The disadvantage is that it is removable and there may have some movement during function. The surrounding teeth need to be in good shape either naturally or with good restorations, if needed.

So the decision to replace missing teeth and if so, how, needs to be made on an individual basis. All the factors that go into the holistic decision-making approach need to be taken into consideration.