

IMPLANTOLOGY TODAY

■ AUTUMN 2006

The quarterly newsletter of Cavendish House Implant Centre



WELCOME TO: CAVENDISH HOUSE



CAVENDISH HOUSE IMPLANT CENTRE IS A REFERRAL BASED CLINIC LOCATED IN CAMBRIDGE. WE ACCEPT REFERRALS FROM COLLEAGUES FOR THE FULL RANGE OF DENTAL IMPLANT BASED TREATMENTS.

computer software for the treatment planning and surgical execution of the All-On-4 technique, flapless surgery and electronic monitoring of hypnotic activity during IV sedation. The latter project is being carried out with help from the universities of Cambridge and Bristol and is due for publication soon.

EXPERIENCE AND EXPERTISE

Both of our implantologists, [Stuart Ellis](#) and [Richard Millhouse](#) first started working with dental implants in the early 1990s and have amassed a huge amount of experience in both hospital and private practice. We hope that you enjoy reading this newsletter and if you would like to discuss any of your cases prior to referral please feel free to telephone or email us.

A warm welcome to the new look newsletter from Cavendish House Implant Centre. We have now increased the frequency that you will receive the newsletters from biannually to quarterly. We have also increased the number of recipients to reflect the continued enlargement of our referral base.

To those of you unfamiliar with our

Implant Centre we are located in Cambridge, just off the A14, which offers patients easy access from all over the South and East of England.

RESEARCH AND SURGERY

In addition to our surgical practice we are also involved in a number of research studies. Our current projects include work on virtual reality

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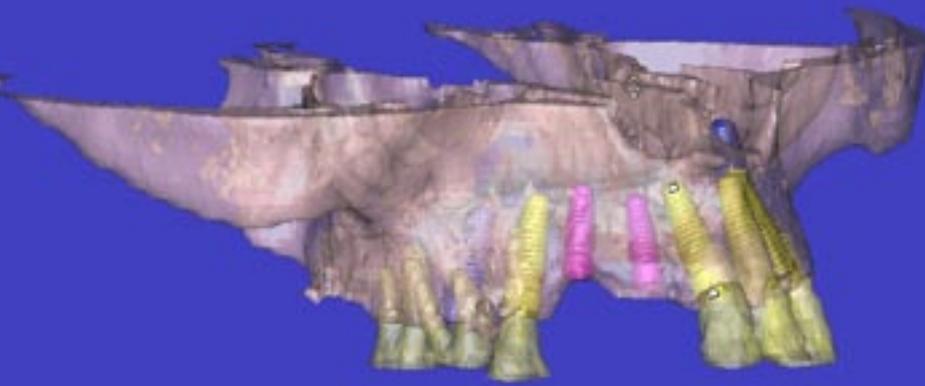
PAGE ONE: Welcome to Cavendish House Implant Centre

PAGE TWO: Virtual reality software and flapless implant surgery. Implants in perio patients

PAGE THREE: We explain why, at Cavendish House, we only use Nobel Biocare implants

PAGE FOUR: How to refer your patients





Do CT scans and steriolithographic surgical guides greatly increase the costs to the patients?

CONVENIENCE VS COSTS

Although digital CT scans and steriolithographically produced surgical guides are quite expensive additional items, in most of the complex cases the overall cost to the patient for treatment is no different to the conventional full flap approach thanks to the reduction in surgery time.

Using computers to place implants in three dimensional cross sectional images rather than raising a large mucoperiosteal flap and simply 'eyeballing' the bone ridge greatly improves treatment safety. It also reduces the surgery time required and hence reduces this part of the costs for the patient. Patients also greatly appreciate the reduced time they spend under the surgeons knife!

VIRTUAL REALITY: FLAPLESS

WITH THE MARRIAGE OF DIGITAL CT SCANNING DATA AND VIRTUAL REALITY SOFTWARE IT IS NOW POSSIBLE TO FULLY PLAN EVEN THE MOST COMPLEX CASES FOR A FLAPLESS APPROACH

The pain and swelling suffered after a traditional implant operation is mainly down to the soft tissue reflection. Flapless surgery enables patients to suffer vastly reduced levels of pain and swelling.

GOING DIGITAL

The goal is to simplify the operative procedure and reduce the pain inducing soft tissue trauma. It is the advent of digital CT scanning and 3-dimensional virtual reality computer software that has enabled

this goal to become a reality.

Following a digital CT scan we are now able to visualise the bone and place the implants in three dimensions on the computer screen. Using radiopaque teeth in CT stents we can plan the implant positions from both the prosthetic and the surgical perspectives.

FLAPLESS SURGERY

A steriolithographic surgical stent is constructed, which can be either tooth or mucosa supported. This stent contains precisely aligned drill guides which allow the preparation of the osteotomy holes without any mucosa reflection. The result is a patient with minimal postoperative pain or swelling and a much faster operative time.

PERIODONTAL DISEASE AND IMPLANTOLOGY

There remains great debate on whether or not implants have a reduced prognosis in patients with a history of periodontal disease. Although implants are not surrounded by a periodontium it seems increasingly likely that they may be adversely affected by periodontal pathogens. For this reason it is good practice not to place implants in a patient with unstable periodontal disease and poor oral hygiene.





OPTIONS: WHICH SYSTEM?

WITH A PLETHORA OF IMPLANT SYSTEMS ON THE MARKET, WHICH IS THE BEST ONE TO USE? ARE THERE BIG DIFFERENCES? WE EXPLAIN WHY WE EXCLUSIVELY USE NOBEL BIOCARE IMPLANTS.



NARROWING DOWN TO ONE

Although we have experience of a number of implants systems, about 2 years ago we decided to only use Nobel Biocare implants. We have found that, in our experience, the Nobel implant system offers easier treatment options for the patient and a very high success rate.

Further articles in following newsletters will focus on each implant in turn.

BEING THERE AT THE BEGINNING

Nobel Biocare have a long history in dental implantology. It all started in 1978 when the then parent company, Bofors AB, joined forces with the now famous Professor Branemark to produce the Branemark implant system. This went on to be the world leader and to the present day over 7 million Branemark implants have been placed worldwide.

FURTHER DEVELOPMENT

The Swedish parent company eventually set up Nobel Pharma (which later became Nobel Biocare) to concentrate solely on the dental market. Nobel then developed the Replace Select system and, more recently, the NobelSpeedy, Nobel Groovy, Nobel Direct and Nobel Scalloped ranges.

No one type of implant is suitable for every patient and we feel that the large choice in the Nobel Biocare range offers us the greatest degree of flexibility for treatment planning.

The two main Nobel implants that we use are the Replace Select range and the SpeedyGroovy range. Replace Select is an ideal implant for immediate placement as it is tapered and self tapping. The Nobel Speedy Groovy is an excellent implant to use in softer maxillary bone. The innovative implant tip is sharp so as the implant is inserted into the underprepared hole the tip pushes bone to the side, This widens the ridge and provides high initial primary stability.

THE TI-UNITE SURFACE

All of the implants that we use at

Cavendish House are coated in the unique biomaterial, TiUnite.

TiUnite is an osseointegrative surface coating which provides a combination of controlled titanium oxide texture

and porosity. This coating has been shown to promote the rapid deposition of new bone onto the surface of the implant and so promote predictable osseointegration. The TiUnite surface also improves the attachment of the soft tissues around the implant neck with the formation of a junctional epithelium and firm adherence of the underlying connective tissue.

“No single implant system is suitable for every patient. We feel that the wide choice of products in the Nobel Biocare range offers the greatest degree of flexibility for our patients”

REFERRALS: HOW TO REFER

NEXT ISSUE:

In the winter issue we will describe the Nobel Replace Select implant system, which is our most commonly used implant. We will also describe the All-On-4 concept for treating the resorbed edentulous jaw.



We are happy to accept referrals either by telephone, post or email.

REFER ONLINE

The Implant Centre's website (www.cavendish-implants.com) has an online referral form that can be used to refer your patients.

REFERRAL PACKS AVAILABLE

If you would prefer not to refer by letter or online we have a referral pack with pre-printed forms and pre-paid envelopes available on request. Just call us on 01223 322622 and we will send one out to you

Referrals can be either made by: -

- Letter
- Email
- Online
- Referral pack

Contact us at

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"We never forget the trust given to us by our referring colleagues. No referred patient is ever accepted for any treatment other than the implant treatment that they were referred for."

Stuart Ellis BDS MSc DPDS MFGDP(UK)

Practice Principal

