



# IMPLANT DENTISTRY

*Simplified, Predictable, and Profitable  
The Newsletter*

## *Implants: Increasing the Odds of Clinical Success*

*Dr. Keith Rossein*

Implantology can be divided into two stages - surgical placement and the restorative technique. Finally there is a complete system that easily bridges the gap between surgical placement and restorative technique. The MTI-MP Modular Transitional Implant and Prosthetic System handles both of these situations by filling this long existing void. And the good news is that the dentist can utilize the MTI-MP implants with any of the implant systems and procedures now in use.

It is widely accepted that proper provisionalization is a major key to success in restorative and cosmetic dentistry. Within the more specialized area of implantology, the transitional restoration takes on an even more important role.

Depending on the scope, implants with the prosthetic restorations can cost the patient many thousands of dollars. To allay the patient's initial concerns and to obtain their acceptance of the treatment, patients can be informed that now replacement of their missing teeth is made at the beginning of the surgical/restorative procedures. Likewise, since clinical success with endosteal implants is dependent upon various factors, amongst them an "unloaded" 3-6 month healing period, the MTI is "just what the doctor ordered".

A. The immediate restoration supported by MTI implants protects the surgical sites and prevents loading and stress on the submerged fixtures during the healing periods.

B. The immediate restoration supported by MTI implants allows longer periods of time, if necessary, for healing of implants and technical delays of prosthetic construction.

C. The immediate restoration supported by MTI implants provides for the precise transfer of vertical dimension and other markings for the articulation of models for laboratory constructed restorations.

D. While patients are not without teeth at any time, they can indicate their preference as to size, form, and color of teeth for their permanent restoration.

E. Patients prefer a MTI fixed provisional restoration over removable ones, and this contributes to overcoming the psychological barrier of accepting the lengthy treatment plan in the first place.

F. The clinicians can collect fees at the outset of the treatment with-

out the usual 4-6 months waiting period to be paid for the service.

The Dentatus MTI system is time-saving, as the entire procedure can be performed chairside, and the restoration is constructed with the following 3 MTI components.

1. Gingival Protective sleeves are placed over the protruding MTI implants to prevent soft plastic material from interlocking under the wider implant heads.

2. Ti. Connective Bars inserted through the implant slots are formed with light finger pressure to follow the curve of the edentulous ridge distributing evenly the load.

3. Plastic Modular Copings that are placed in a "parallel manner to each other" over the implant and Ti. bar are luted with small amounts of light cured composite.

The expandable copings make-up for discrepancies in parallelism allowing for stress free seating of the provisional restoration. In addition to the "splinting effect", the bar provides cross arch stabilization.

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tion and lateral distribution of forces.

After trying in the interconnected Ti. Bar and coping assembly, a vacuum form representing the intended restoration is filled with soft temporary material and placed in position. (It is important to Vaseline the soft tissue first.)

When polymerized, the provisional restoration is removed, trimmed, and polished and secured with a temporary cement that will allow for easy removal.

When retrofitting a functional denture, it should be relieved to fit passively over the interconnected Ti. bar and modular copings. The assembly is then attached with a soft consistency resin to the denture. Occlusal interferences known to be the cause of serious problems should be eliminated at the end of the procedure.

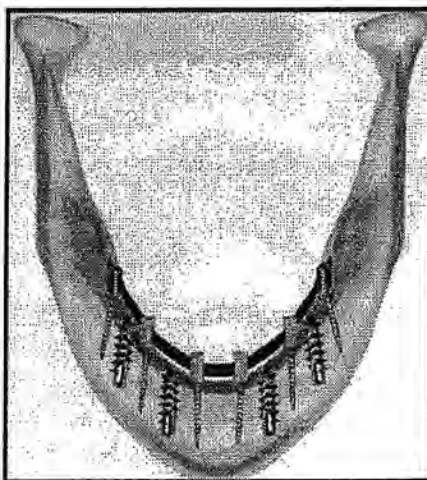
It is important to note that before a failing bridge and/or teeth are removed, an alginate impression is taken for making a stone model. This will be greatly useful in the fabrication of temporaries. The model, however, may need to be altered before making the vacuum formed template to accommodate space for the MTI heads and components within the template.

A recent addition to the MTI system are silicone protective plastic caps to cover the exposed MTI implants during the intervals be-

tween surgical placement and the temporization procedure. These are necessary in situations where scheduling between the surgeon and the prosthetic dentist is in conflict. However, it is important that the MTI implants are splinted and put into function at the earliest.

*Complete instructions and other information is available from Dentatus USA Ltd. 1-800-323-3136 and from Dentatus AB Sweden.*

Implantology has made major strides in the last 20 years becoming more acceptable and more predictable. The Dentatus Modular Transitional Implants and Prosthetic System has raised implantology to a new level and should be utilized by any practitioner using implants in their treatment protocol.



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