

# CARISBROOKE NEWS



## ANOTHER GREAT DAY FOR CARISBROOKE AT THE LEICESTER TIGERS EVENT

A very big thank you to everyone who attended the fantastic event at the Leicester Tigers rugby ground on Saturday 25th April 2015.

Along with our other sponsors Dentsply we were again privileged to support our local team to another winning match. The final score was Leicester Tigers 38, London Welsh 17.

Mike Hodgson opened the event with a warm welcome from the Carisbrooke referral team.

The presentations kicked off with Chris Meldrum and Alex Mond from Dentsply talking to the audience about Dentsply as a company and **"How they can support your Practice Growth"**. Alex went on to explain how the Relax Study Evenings offered at Carisbrooke work to help you grow your practice by restoring the implant crown after Carisbrooke have fitted the implant for your patient. Carisbrooke and Dentsply work together for these evenings to show you how to take impressions over the implant on one of our patients. You can then take your own impressions on study models having help and support whilst you do it. As you go through the procedure on your first patient Alex is happy to come to your practice and offer his support to ensure success.



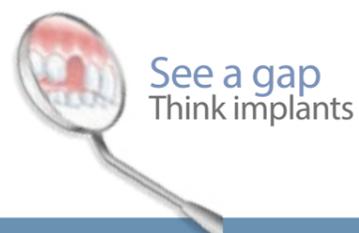
Saj Patel receiving his prize on Saturday of tickets for another Tigers match

## Restoring dental implants is simple and profitable

More and more general dental practitioners are discovering that restoring dental implant cases can be good for their patients, their practice and their career

Training, support and a mini prosthetics kit are provided FREE through the DENTSPLY Implants 'RELAX' programme:

- | Hands-on training (3 hours CPD)
- | Mini prosthetics kit (with first case)
- | Impressions and placement guide
- | Patient information
- | In-surgery support for first case
- | Local laboratory support
- | £100 education voucher



The most common implant treatments can be restored by the patient's own general dentist

Carisbrooke Dental Practice is an affiliated provider of the DENTSPLY Implants R&LAX training programme. Please contact the practice for more information on its next training event:  
**Carisbrooke Specialist Dental Practice, 238 London Rd, Leicester**  
**T: 0116 270 7030 E: referrals@carisbrookedental.co.uk**

## DATES FOR CARISBROOKE STUDY CLUB

If there are any topics that you would be interested in, please let us know.

**21st May 2015 at 6.30pm**

"Occlusion in Everyday Dentistry" – presented by Chris Dakin.

**11th June 2015 at 6.30pm**

"Hot from the Europerio meeting"  
 Presented by Cristina Romao Specialist Periodontist.

**16th July 2015 at 6.30pm**

"Orthodontic Diagnosis and use of IOTN"  
 Presented by Frances Mackay Specialist Orthodontist.

What to look for when assessing the developing dentition. The timing of intervention or referral. How to use The Index of Orthodontic Treatment Need.

Please contact Linda on **referrals@carisbrookedental.co.uk** if you would like to attend.



THE DATES OF OUR NEXT RELAX EVENINGS ARE:

**THURSDAY 18TH JUNE 6.30PM**  
 PRESENTED BY NEIL MILLINGTON

**THURSDAY 8TH OCTOBER AT 6.30PM**  
 PRESENTED BY MIKE HODGSON

MORE FROM THE TIGERS



**The theme of the clinical presentations was "Treatment Strategies for the Failing Dentition"**

Jose Zurdo Specialist in Periodontics gave an interesting and engaging presentation on:

- when to treat periodontally involved teeth and when to extract
- use of implants in periodontally high risk mouths
- periodontal treatment and treatment of peri-implantitis

This was followed by Neil Millington Specialist in Prosthodontics who gave an informative and passionate presentation concentrating on "Transition from failing dentition to full arch implant restorations" and the use of "Weld One and Affordable same day teeth" showing us interesting cases throughout.

IF YOU WOULD LIKE TO ATTEND ONE OF OUR EVENTS PLEASE CONTACT LINDA HALLAM TO RESERVE YOUR PLACE ON: [referrals@carisbrookedental.co.uk](mailto:referrals@carisbrookedental.co.uk)

This was followed by a relaxed afternoon of food drink and socialising with our guests. It was lovely to see both familiar faces and new faces. We were even fortunate enough to meet two of the players! Dan Cole and Ollie Bryant who answered lots of questions thrown at them by our guests.

We were also presented with a framed signed rugby shirt, then went out to watch the Tigers v London Welsh rugby game.

IF YOU WOULD LIKE TO REFER A PATIENT TO CARISBROOKE FOR SPECIALIST DENTAL TREATMENT OR WOULD LIKE TO REQUEST A REFERRAL PACK PLEASE CONTACT OUR REFERRALS CO-ORDINATOR MRS LINDA HALLAM AT [referrals@carisbrookedental.co.uk](mailto:referrals@carisbrookedental.co.uk)

**CASE STUDY PRESENTED BY JOSE ZURDO**

April 2015

**MANAGING FAILING DENTITIONS**

Often we are faced with patients who have neglected their dentitions, resulting in clinical situations involving complex treatment needs of different nature. They are often not sure what their options are when it comes to restoring their mouths and they find it difficult to understand the complexity of the treatment tending to shy away from having the work done. The cost of the treatment, the time involved, and the potential discomfort associated with the process can all act as barriers to treatment plan acceptance.

From our experience, a good diagnostic phase and the time spent in assessing the patient's needs, expectations and affordability is the most crucial aspect of planning complex cases.

**CLINICAL CASE**

Mrs M, a 50year-old lady attended for an implant consultation after years of not seeing a dentist. She is generally healthy and a non-smoker. She had a previous bad experience trying to adapt to a removable denture and her main fear was that dentures were her only option to restore her function.

Her main wish was to have more teeth to chew and to improve her cosmetics, ideally through some fixed reconstruction.

She presented with an ill-fitting full arch acrylic bridge in the upper jaw supported by six teeth, three of which had hopeless prognosis. She was under the impression that it was a final reconstruction, very patched-up as it broke several times during the first 3 years. It had been in the mouth for about 6 years, according to her, because she had "dramatically changed her eating habits to a softer diet".

She had a removable partial denture for the lower edentulous areas, which she never adapted to and hence it was never worn, however, she really missed her molars. She presented with a conventional bridge from 33 to 43 supported by 3 abutment teeth that were healthy and stable the bridge being reasonably well constructed.

The intra-oral photos (Figs 2-4) show a rather dramatic appearance of her upper bridge with gross amount of plaque, tartar and "patch-work" over the years. Nevertheless, she felt confident in cleaning her lower front teeth that did not show any clinical signs of inflammation and good bone levels.



Following clinical and radiographic exam including CT scan of both jaws we agreed that the best and only realistic treatment to satisfy her demands was a full-mouth reconstruction on implants in the upper jaw. A reasonable plan for the lower jaw was restoring the posterior segments with partial implant-supported bridges.

She was extremely keen on avoiding a temporary denture, if at all possible, and we decided to use 3 upper teeth (UR5, UL1 and UL3) to hold a temporary re-enforced lab-made bridge for her to have following extractions and during the healing phase of the implant treatment. This made Mrs M very happy, as she was able to avoid the dreaded denture altogether.



Further diagnostic investigation (wax-ups) involved determining the ideal position of the final teeth (fig 7) and of their supporting implants using 3-D diagnostic tools and adequate planning software followed by construction of surgical guides for the implant surgery. (Figs 8, 9, 10 and 11).



After complete healing of the implant surgery a new implant-supported temporary bridge was constructed in the upper jaw to allow the removal of the remaining upper teeth and further healing. The lower implants were restored with 2 implant bridges to replace the posterior segments and the posterior segments and the

upper bridge (fig 12 and 13) was used as a template for the construction of the definitive bridge.

**WITH CAREFUL PLANNING THE RESULTS WERE PREDICTABLE. AND WHAT A DIFFERENCE IT MADE FOR MRS M!**

She was a very happy lady full of confidence and that is our best reward!

**FROM THIS...**

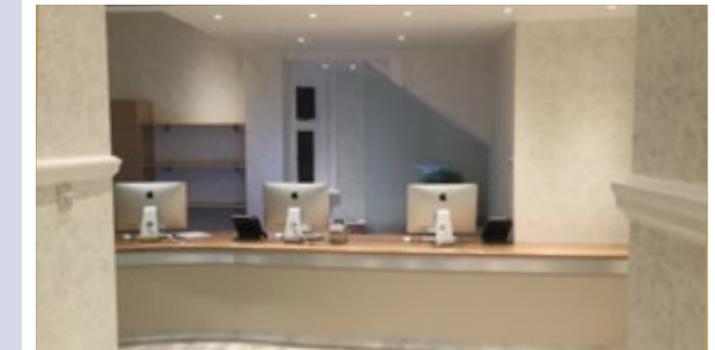


**TO THIS!**



Fig 12,13 -Still with the upper provisional bridge but with final bridges on lower jaw.

**'NEW LOOK CARISBROOKE'**



**What a lovely evening we all had as Carisbrooke partners invited referring dentists along to an open evening to see the "New Look Practice" on Thursday the 25th March following major refurbishment and also the launch of our study club.**

After drinks and canapés, and a chance to look around, Neil Millington gave a presentation on "How our CT scanner helped us ... and how it can help you". Neil, as usual, gave an interesting and engaging presentation followed by lots of questions.

We would like to thank Roger Gullidge and Neil Clarke from Archi Intelligence who joined us for the open evening. They are the designers who have been absolutely brilliant and kept everything ahead of schedule. We would also like to thank Diana Bayliss from Archi Intelligence for her wonderful efficiency and the team from CGL Services, the building company, for being such a great asset to the project They all worked so hard to make the project as easy as it possibly could be for us. Many thanks to you all for a superb finish, we are delighted.

Finally we would like to thank you all who attended for sharing the evening with us, and the great feedback we received – we all enjoyed your company.