

TEETH IN THE TWILIGHT YEARS



YOU HAVE PROBABLY READ ABOUT THE MANY DIFFERENT WAYS YOUR NATURAL teeth can be replaced. The fabrication of implants, dentures and bridges has been mentioned in the same breath as the slicing of bread. It is that easy.

Those articles written by experts are **not** wrong. Removing your natural teeth is always easier than making an effort to rehabilitate and maintain them. Just like how it's always easier to have your broken arm sawn off and replaced with a prosthetic one at the A&E hospital ward. Wait a minute! Isn't one of the primary aims of medicine to heal and repair what is natural until it is no longer possible? Do we always have to remove teeth just because we are getting older and it seems simpler to just replace them with "fake" ones?

Maintaining our teeth as we age is not very different from how it is done earlier in life. If your oral hygiene standards are adequate **and** you have been seeing a good dentist regularly for your check-ups, it is uncommon to require any complex treatment for your teeth unless there is an acute unpredictable event.

Most, if not all man-made objects fail with time, dental fillings and procedures included. Some have great longevity (e.g. amalgam fillings), some have much shorter lifespans (e.g. tooth-coloured fillings, bleaching procedures), and some can last for moderate spans of time (e.g. a root canal treated tooth with a crown). Imagine an environment which is constantly wet, teeming with bacteria, and is frequently required to withstand grinding, shearing and compressive forces – that's what dental fillings have to put up with and so unsurprisingly, regular maintenance and checks are necessary.

These checks may include the following:

- Checking existing fillings for leakage, underlying decay or corrosion. If so, they have to be replaced before they get worse. Tooth-coloured fillings have a higher replacement rate vis-à-vis amalgam fillings.
- Reinforcing large fillings in teeth with caps or crowns. This allows the stresses that are generated in your mouth daily to be more evenly distributed throughout the teeth and this helps to prevent fractures. It also makes each tooth easier to clean due to the smaller surface area in which bacteria can penetrate the tooth.
- Teeth with older, larger fillings may also be indicated for root canal (or endodontic) treatment if there are signs and symptoms of a toothache. Sometimes endodontic treatment is indicated to prevent a toothache, especially if an old filling has underlying decay or/and is very near the pulp (the part of the tooth that is alive and gives the tooth sensation).

- Teeth with older crowns (e.g. 10 years or more) will require closer monitoring even if there are no signs of decay or discomfort. The cement (or dental "glue") that holds the crown on each tooth usually hydrolyses (or disintegrates in a wet environment) after a number of years in the mouth. A new crown, or even endodontic retreatment, may be necessary to bring the tooth back to health and equilibrium.

The above checks and measures are not exhaustive and applicable for all ages of dental fillings and all patients. The situations mentioned do not require any extraction of your natural teeth per se either. There are, however, two general situations where tooth removal is imminent and necessary:

- Extensive loss of tooth structure from decay or fracture. Unlike an old house with a nice piece of land where rebuilding is possible, we cannot grow a natural tooth from scratch (as yet).
- Deep vertical fractures that extend into the bony level. Until there is cement/dental "glue" that binds teeth with vertical fractures, it is only a matter of time before bacteria makes its way through even the tiniest crack line.

Good dentistry is a multi-disciplinary team-based effort that starts with your "hometown" dentist whom you see on a regular basis. For example, getting your root canal treatment done by an endodontist (a specialist in root canal treatment) makes the treatment more predictable, and much quicker and seamless as well. If there are complications, your endodontist is in a much better position to manage the situation than someone who only does the procedure sporadically. Remember that there are more ways to save teeth than most people realise. Seek the advice of a clinician who is just as keen to help you save your teeth. ■

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