



IMMEDIATE FULL ARCH LOADING (IFAL)

Immediate Full Arch Loading Dental Implant Treatment (IFAL)

Introduction

We have recommended that you would be suitable to undergo an Immediate Full Arch Loading procedure (IFAL). IFAL consists of placing dental implants in a full jaw, or both jaws, and attempting to place an immediate provisional or temporary restoration in place on the same day. It is essential that patients undergoing this treatment fully understand the challenges and detail of the procedure, and this information is designed to assist in that process.

Before any patient commences with Immediate Full Arch Restoration, or indeed any full arch restoration with implants, it is important to understand that this is a complex procedure where complications do and are likely to occur.

Some of the best scientific evidence available for the long-term survival of full arch restorations suggest that almost all patients will suffer some form of complication, either minor or major, during the first ten years of having their full arch restoration.

It is for this reason that The Campbell Clinic go to such lengths to plan cases and to discuss cases with patients in advance of treatment. It is extremely important though, that as a patient undertaking such treatment, you are aware of this and accept that complications may occur and that The Campbell Clinic will do all it can to assist you if complications do occur.

If you have any questions regarding this information or the procedure itself, please address these with the Clinical Team at the practice in advance of your procedure. It is essential that you feel fully informed regarding the positive and possible negative aspects of treatment before you proceed.

The IFAL team

IFAL is a complicated surgical and restorative procedure which requires multiple clinical staff and detailed clinical techniques. The diagnosis and planning of an IFAL procedure is critical and patient selection is paramount in all cases. To this end you will meet many members of the team as you proceed through your IFAL treatment journey including:

1. A surgeon who will extract teeth (if necessary), place dental implants and provide bone grafting procedures as required.
2. A clinician who will provide sedation.
3. A restorative dentist who will connect the initial temporary/provisional restoration on the day of surgery and construct the final restoration approximately three months later.
4. A clinical dental technician who will make the initial provisional restoration and surgical guides prior to the surgical appointments.
5. An implant treatment coordinator who will co-ordinate your treatment and contact you before and after treatment to ensure that all is well.
6. An expert dental hygienist who will ensure that your mouth is clean prior to the surgery taking place, and who will ensure that ongoing maintenance after the procedure is optimal.

The procedure itself

IFAL generally proceeds under intravenous sedation with placement of dental implants and attempted placement of a provisional restoration made in acrylic. This follows a period of extensive diagnosis and planning which will cover approximately four visits, plus the hygiene therapy ensuring that your mouth is as clean as possible. During the planning stages you will undergo dental impression, x-rays, full dental examination, a dental CT examination and assessment for sedation. We will only proceed to recommend IFAL if we deem that you are suitable for this, and not all patients are for various reasons.

Conventional Loading (CL)

The alternative procedure to IFAL (for patients who are losing all of their teeth or who do not have teeth) is a process known as conventional loading (CL). This involves placing the dental implants, and then allowing the area to heal for approximately three months before a restoration is placed. This would mean wearing a temporary denture which may or may not be supported by mini implants instead of placing an immediate restoration.

Comparing IFAL with CL

Many patients believe that IFAL is the best possible option, but if a patient is not suitable for IFAL the results can be disastrous. On recommendation from the clinical team at The Campbell Clinic, we will explain why you would be suitable for one procedure over another, and subsequently which we recommend. This process is applied when considering IFAL and CL. Conventional loading is generally preferred in patients who have suffered serious gum disease unless otherwise indicated by the staff at The Campbell Clinic.

IFAL - the procedure on the day

Generally, the procedure starts in the early morning (approximately 8am) and patients are sedated using single drug Midazolam sedation to ensure their comfort. Patients also receive local anaesthetic to ensure they are comfortable during the surgical phase. Following this, a sterile procedure is undertaken to remove remaining teeth (if required) and to place a number of dental implants. It may be necessary to place a different number of implants than are initially planned depending on the clinical circumstance which occurs. We generally place between four and six dental implants with or without grafting as required.

Following successful placement of the implants and placement of stitches, the restorative clinician will then attempt to fix the provisional/temporary restoration to the existing implants (not all implants maybe engaged on that day). The provisional restoration is essentially a cut back denture made of acrylic with a metal strengthener in place. Due to this, it is essential that the transition between denture and gum at the front of the mouth is not visible and this involves removal of bone in this area to ensure the transition line between denture and gum is high under the lip. It depends on the individual case as to how much bone needs to be removed. Conventional loading (CL) does not require bone removal in this fashion.

Procedures generally take the entire day and patients generally leave the practice between 3pm and 5pm, although finish timescales are variable on an individual patient basis. Patients are given full instructions and all medications as required. Alongside some form of snack in the middle of the day to ensure they feel well.

Patients are followed up extremely carefully by the practice with the use of clinical examinations and x-rays as they proceed to final restoration. This is either a definitive metal and porcelain restoration and / or a high quality acrylic and metal restoration, whichever is most suited to the case. The final restoration is usually completed around four months following surgery.

Advantages of IFAL against CL

- Patients generally receive an immediate fixed in restoration on the day of surgery.
- Patients do not have to wear a removable temporary denture.
- The initial surgery and restorative phase are carried out in one day under sedation.

Potential downsides of IFAL

- It is sometimes not possible to place as many implants as we would like, due to clinical circumstances despite the amount of planning that is undertaken.

- On occasion it is not possible to fix the provisional restoration into the patient's mouth on the implants, due to clinical circumstances. At the present time this has never happened for an IFAL case at The Campbell Clinic, but remains a possibility in all cases and patients should be aware that they may in fact be required to wear a denture for the three month healing period if clinical circumstances dictate.
- The provisional restoration placed is an acrylic (plastic) restoration which can be fragile. Patients need to be extremely careful regarding the use of this restoration and fracture of the restoration is possible. It is for this reason that we suggest to patients during the healing period, from initial surgery to definitive restoration, that no major life events should be booked. For example events such as weddings, major holidays etc. to ensure disappointment does not occur if fracture of provisional bridge occurs. If fracture of the provisional bridge occurs The Campbell Clinic will repair this as soon as possible.
- Please refer to the standard warnings for implant surgery and restorative dentistry listed in the 'Dental Implant' booklet which you will have received in addition to this specific IFAL information.

IFAL Treatment Guarantee Information

The Campbell Clinic is delighted to offer a guarantee for patients undergoing immediate full arch reconstructions (same day teeth reconstruction).

This is a demonstration of our attention to detail in the provision of dental implant treatment, and our experience as a group of clinicians in providing many thousands of dental implant procedures successfully.

In otherwise healthy individuals who have not had extensive treatment for gum disease, and who do not smoke, we are delighted to offer a 10 year guarantee on implant restorations, including survival of the dental implant and the prosthetic (tooth) component associated with this.

This means we will (where possible) cover the cost of replacement of the dental implant and / or the prosthetic component of the dental implant where loss or breakage occur during normal, reasonable usage.

This guarantee is dependent upon patients attending for recommended maintenance appointments throughout the guarantee period, and is invalid if appointments are not attended. It is impossible for us to maintain a complicated dental implant situation, or advise on possible remedial treatment, if patients do not attend for their maintenance appointments.

Alterations to the guarantee are as follows

- Patients with extensive, treated gum disease are at higher risk of peri-implant disease prior to implant treatment being carried out. In these cases

we are happy to offer a five year guarantee under the same terms as the ten year guarantee listed above.

- For patients who are smokers or recently stopped smoking there is an increased risk of complications associated with dental implants. For these patients we are happy to offer a five year guarantee as with patients with previously treated gum disease.
- Exceptions to the guarantee process include wear and tear of components such as denture locator abutments and their components as listed above.

Photography and Video for Teaching and Marketing

We photograph almost all cases at the beginning, during and end of treatment, and occasional film the procedure. Any such images are stored securely as they form part of your treatment and clinical record.

As an experienced specialist practice, we teach other dentists and dental professionals regarding IFAL procedures. With your consent, your photographs and videos may be added to our teaching and marketing portfolio. If used they will be fully anonymised before being utilised as a teaching aid in lectures, for patient education, or on social media sites for marketing.

If you do not wish your case to be photographed or filmed at all, please discuss this with your surgeon at the early stages of your treatment. If at anytime you wish to withdraw your consent for the use of your photographic or filmed images, please contact us.

www.campbell-clinic.co.uk

Tel: 0115 9823 913

The Campbell Clinic
Edwalton Business Park
Landmere Lane
Nottingham
NG12 4JL