# Surgical Considerations in Dental Prosthetics: Implant-Supported Restorations vs. Traditional Bridges

# Dr. Ali Mohammed Ali Aldossari<sup>1</sup>, Dr.Sarra Mohsen Bejad Alotaibi<sup>2</sup>, Dr. Mousa Yahia Karyri<sup>3</sup>, Dr. Abdullah Hassan Al Shari<sup>4</sup>, Dr. Ali Ahmed Asiri<sup>5</sup>, Dr. Rami Amin Gashgary<sup>4</sup>, Dr.Mashael Obaid Alshahrani<sup>6</sup>, DR. Raed Saleh Almanea<sup>7</sup>, Turki Farhan Omish Alharbi<sup>8</sup>, Dr<sup>.</sup> Mansour Ali Nasser Alhomaied<sup>9</sup>

<sup>1</sup>General dentist, East Riyadh Dental Center
<sup>2</sup>Consultant of Restorative Dentistry, East Riyadh dental center
<sup>3</sup>Senior registrar prosthodontist, King Saud medical city, dental hospital
<sup>4</sup>General Dentist, Ministry of Health
<sup>5</sup>Registrar of Advanced general dentistry, MOH
<sup>6</sup>Registrar in Endodontics, Riyadh Specialized Dental Center
<sup>7</sup>Restorative Dentist, Ministry of Health
<sup>8</sup>Dental Hygienist, East of RiyadhDental Center
<sup>9</sup>Family dentistry consultant, Riyadh East Dental Center

Received: 13.09.2024

Revised: 16.10.2024

Accepted: 28.11.2024

# ABSTRACT

**Introduction:** Dental prosthetics has performed a crucial role in rehabilitation of patients with the lost teeth for years by providing the needed function, esthetics, and improved quality of life. Of all the available options to replace missing teeth, dental bridges and implant retained prostheses are perhaps the most well-known. Though both therapeutic models are efficient they have the major distinctions contemplating surgeries, further results, and terms for patients. It is, therefore, important to consider several clinical, aesthetic, and economic factors to arrive at a decision between these options, though only by dental practitioners and the patients. It will always be helpful and relevant to remember the surgical aspects of these prosthetic solutions while dental technology and materials improve over time.

Aim of work: To examine the key surgical considerations in dental prosthetics, comparing implant-supported restorations and traditional bridges.

**Methods:** We conducted a comprehensive search in the MEDLINE database's electronic literature using the following search terms: Surgical Considerations, Dental Prosthetics, Implant-Supported, Restorations and Traditional Bridges. The search was restricted to publications from 2016to 2024 in order to locate relevant content. We performed a search on Google Scholar to locate and examine academic papers that pertain to my subject matter. The selection of articles was impacted by certain criteria for inclusion.

**Results:** The publications analyzed in this study encompassed from 2016 to 2024. The study was structured into various sections with specific headings in the discussion section.

**Conclusion:**The decision of whether to intervene surgically and provide implant supports or offer the more conventional bridgework depends on a number of factors, both surgical and functional as well as patients. On the one hand, the former has attractive features inherent to additive technologies while the latter has disadvantages typical for subtractive technologies, so the use of both technologies needs an individual approach in the dental prosthetics. An implant-supported restoration is the currently considered gold standard of patient care due to focuses on maintenance of treatment goals and integration with the body, while a traditional bridge is a more everyday structure offering reliable effectiveness at a lower cost. Since the technology in the field is on the right cultural bent, this combination of the aforementioned approaches is likely to increase and ensure that patients receive the best forms of prosthetic treatment for missing teeth. With this perspective and understanding of the challenges modern dentistry faces in prosthetics, dental practitioners and technicians have to go from identifying the problem and finding a solution in a creative yet sustainable manner to actually providing the patient with a new set of teeth that will increase that individual's quality of life.

Keywords: Surgical Considerations, Dental Prosthetics, Implant-Supported, Restorations and Traditional Bridges

## INTRODUCTION

Dental prosthetics have been used for many years to help people who have lost teeth to regain normal functions, facial esthetics, and general well-being (Palomares et al., 2018). Traditional dental bridges and implant supported restorations are among the most frequent treatment modalities used for tooth replacement. Both strategies were successful but focused on rather distinct principles of treatment, results, and patients' satisfaction with surgeries. Depending on the kind of restoration to be made, there are patient specific clinical, aesthetic and financial factors that form the basis for dentist- patient decision making in the selection of either one of these options. Research has shown that knowledge of the surgical side of these prosthetic solutions becomes more relevant as technology and dental materials improve (Jazayeri et al., 2018).

Conventional Fixed dental bridges have been the bulk of treatment modality for replacing missing teeth in dentistry for several years with a technique that is quite straight forward. They include the shaping of the neighboring teeth or natural teeth which holds the prosthetic crown or crowns that "bridges" the empty space. In essence, while this technique means that surgical intervention in the jawbone is not necessary it has its merits and demerits: it tends to sacrifice sound tooth structure and increases the susceptibility to secondary decay or failure of the teeth supporting the bridge. Further, traditional Implants do not solve any problems related to bone defects that always occur after extraction of the natural tooth and which have an ultimate outcome on the long term esthetical rehabilitation of the patient(Antonarakis et al., 2023).

Finally, implant-supported restorations offer a modern and highly resistant solution of the deficiencies of conventional bridges. These restorations include the implant surgery that entails fixing of titanium implants on the bone of the jaw as tooth roots. They act as anchor points to hold prosthetic crowns, bridges, or even a full arch, once they become embedded into the bone through osseointegration (Drago, 2020). Thus, implant-supported solutions are especially appreciated due to bone-sparing effects, exclusiveness of the neighbors' teeth involvement, and superior long-term anchorage. However, these benefits are accompanied by certain difficulties, such as the increased difficulty and expense of the surgical operation, as well as the primary requirement for adequate bone bulk and ideal matching of the patient's profile (Michalakis et al., 2024).

It was also found that these two approaches have vastly different surgical considerations, which directly influenced the treatment strategy and prognosis. Implant-supported restorations, should involve imaging, which is technically a surgical procedure, and the proper prosthetic design. To better assess the likelihood and potential success of graft incorporation we have addenda to consider including; the nature and quality of the bone that is transplanted, the closeness to other structural forms and the general health of the patient. Conversely, conventional bridges only need minimal tooth removal but call for stringent control to the shape and fit of the teeth and the prosthetic pieces (Joshi, 2022).

#### AIM OF WORK

This review focuses on the main issues to be addressed in the surgical field of dental prosthetics: implants compared to conventional bridges. That is why this literature review looks into the benefits and shortcomings of both approaches to regards to their clinical use and explains how advances in technologies are influencing the potential of restorative dentistry. Studying these two solutions, the specialists will be able to consider all nuances and select the most suitable option for each patient to achieve the best results in dogma and function while taking into account the necessity for health.

#### METHODS

A thorough search was carried out on well-known scientific platforms like Google Scholar and Pubmed, utilizing targeted keywords such as Surgical Considerations, Dental Prosthetics, Implant-Supported, Restorations and Traditional Bridges. The goal was to collect all pertinent research papers. Articles were chosen according to certain criteria. Upon conducting a comprehensive analysis of the abstracts and notable titles of each publication, we eliminated case reports, duplicate articles, and publications without full information. The reviews included in this research were published from 2016 to 2024.

### RESULTS

The current investigation concentrated on the key surgical considerations in dental prosthetics, comparing implant-supported restorations and traditional bridgesbetween 2016 and 2024. As a result, the review was published under many headlines in the discussion area, including:Implant-Supported Restorations: Surgical Precision and Integration, Traditional Bridges: Established Techniques and Considerations, Comparative Analysis: Implant-Supported Restorations vs. Traditional BridgesandThe Future of Dental Prosthetics

# DISCUSSION

Dental prosthetics is considered a critical component of dental treatment, as everyone with missing teeth does not only suffer esthetic and psychological consequences, but also has significant impairment in his/her oral function. Of these options, implant-supported restorations and traditional bridges are two methods which are

highly utilized and both have their respective surgical, functional and biomechanical implications. Despite being employed to reduce the problems associated with toothlessness, both techniques vary greatly in terms of process compilation, prognosis, and applicability (Joshi, 2022). The present review focuses on the surgical aspects of these two approaches of treatment, with special regard to the most relevant parameters guiding decision-making and patient outcomes. Making a contrast between implant-supported restorations and traditional bridges the essay exposes major strengths and weaknesses of both, as well as tendencies changing the picture in modern dentistry.

# **Implant-Supported Restorations: Surgical Precision and Integration**

Fixed prosthodontics is by far one of the superior forms of replacement technique for missing teeth by the use of dental implants. The surgeries involve analyzing the patient's oral and general condition since, for example, the volume of bone tissue, health of the soft tissues, and immune system predict the chances of successful implantation (Pedrinaci et al. 2024). Imaging practiced before the surgery for instance the cone– beam computer tomography (CBCT) aid in determining the density of the bones and other structures like nerves and sinuses. These detailed planning reduce surgical risks and also allows the correct positioning of the implant fixtures (Alshomrani, 2024).

In majority of cases during the surgical phase of implant treatment, the titanium or zirconia implants are screwed into the jawbone in the correct angulation and correct positions to ensure they are stable in the first instance. Computer aided implant surgery, or CAIS for short, as well as surgical robots have improved the accuracy of this procedure, thus lowering the chances of a certain level of failure and complication. Subsequent to the implant placement, osseointegrationa process which takes several months, whereby the implant implants itself into the bone. The amount of load that can be applied on the implant determines the osseointegration success of the technique in the long-run restoration procedure since implant failure occurs if osseointegration is poor (Weber et al., 2023).

One important prerequisite for implant supported prothesis is the treatment of the lack of bone volume, which is usually observed in patients with long- standing edentulism or severe periodontal diseases. Common procedures like bone grafting, sinus lifts and ridge augmentation are used to create better quality and quantity bone mass. These procedures add to technological concern and time for treatment but greatly enhance the chances of favorable implant treatment. The other variable is tissue maturation around the implant, which is important both in load bearing and esthetics, since well adapted healthy gingiva are effective in both functionalities. Several technical procedures are employed to enhance the status of the local soft tissue around implants, such as connective tissue grafting and guided tissue regeneration are commonly employed in implants (Nasr et al., 2016).

It has been agreed upon that implant-supported restoration is beneficial in the long term. It distinguishes itself by providing better stability, mimicking the natural functions of teeth and preserving alveolar bone by stimulation during mastication. Compared to bridges that use adjacent teeth in support, these restorations do not have such dependence, and thus, the risk of secondary complications such as carious lesions and structural weakening is reduced (Frisch et al., 2020). Implant therapy has some limitations, including high initial costs, prolonged treatment times, and high surgical complexity that may keep patients from considering it. Systemic factors such as diabetes, smoking, or down immunity can also negatively influence healing or osseointegration, thus needing thorough preoperative evaluation and patient education (Sadowsky, 2016).

#### **Traditional Bridges: Established Techniques and Considerations**

Traditionally, fixed bridges have been quite an alternative for missing teeth, especially when implants are not available because of financial constraints or anatomical or medical limitations. This involves preparing adjacent abutment teeth to the edentulous space for prosthetic structure support (Mandurino et al., 2023). Crown placement anchors the bridge by requiring reduction of the size of abutment teeth. Although less invasive than an implant procedure, this involves significantly altering healthy tooth structure and is an important consideration in treatment planning (Bedard& Cullum, 2016).

A traditional bridge tends to require a less complicated surgical procedure compared with implants because there is no bone integration or any other surgical grafting procedure; but the success of a traditional bridge is largely dependent on the health and stability of the abutment teeth and the surrounding periodontium. It is, therefore, necessary to address pre-existing dental conditions like decay or periodontal disease before starting the process of bridge placement to ensure stable support for the restoration. On the other hand, it may be necessary to perform endodontic treatment or post-and-core buildup on the abutment teeth to add superior strength when required, as in cases where the teeth are structurally compromised (Bedard& Cullum, 2016).

Whenever it comes to shorter timber journeys and saving money, it is preferable for bridges to be regarded as traditional. They can be built and moved quite fast and thus bring the restoration of functionality and aesthetics in weeks not months. On the other side, these bridges are supported by two or more teeth alongside them, bringing certain challenges. Reduction of tooth structure raises the risk of pulpitis, secondary caries and tooth

fractures which may threaten the long life of the abutment teeth. Conventional bridges do not deal with the consequence of absorption of alveolar-bone in the edentulous area resulting in aesthetic problems and making future rehabilitation procedures much more difficult (Mandurino et al., 2023).

Traditional bridges though quite usable in some given clinical conditions are also used under consideration of the latest advancements in implant dentistry. Compared to conventional fixed-type bridges, modern adhesive bridge designs, like resin-bonded bridges, offer an eminently conservative and tooth-preserving reliable result. The emphasis is finding further and better means of improving the effectiveness and durability of traditional prosthetic devices, thus moving the profession forward (Andreevski et al., 2018).

# **Comparative Analysis: Implant-Supported Restorations vs. Traditional Bridges**

Selection between implant-based restorations and conventional bridges is ultimately dependent on several different factors such as anatomy, finances, and medical considerations specific to the individual patient. From a surgical perspective, implant therapy is more complicated and longer in terms of treatment than prosthetic rehabilitation due to the osseointegration period and possible additional procedures (Ravidà, et al., 2019). The long-term advantages, such as stability, bone retention, and non-dependence on adjacent teeth, usually overshadow the initial hurdles. Alternatively, traditional bridges are quicker and less invasive options for financial restrictions or contraindications on surgery. However, they rely solely on abutment teeth and cannot prevent resorption of the bone (Selim et al., 2016).

Patient preference, overall health, and clinical competence also play a major role in treatment design. Younger patients with a good bone density as well as healthy mouth condition may have more advantage in having implants placed because of their longer effective lifespan and more natural function (Oladele et al., 2023). Older patients or those who are afflicted with comorbidities that prevent surgical interventions will find that traditional bridges are a more realistic solution. Advances in technology, diagnostic imaging, digital workflows, and biomaterials become built bridges between these two modalities, enabling clinicians to anticipate treatment accordingly to patient needs and expectations (Rahyussalim et al., 2016).

## **The Future of Dental Prosthetics**

Field of dental prosthetic branch is ever evolving and entering into a phase through which with the aid of advanced technology there will be perfection in both implant supported restorations and traditional bridges (Iosif et al., 2024). Revolutionizing the fabrication process through digital dentistry is CAD/CAM technology along with 3D printing, this making possible the production of custom prostheses in an exact manner and efficient time-wise through the use of digital pattern creation (Bida et al., 2024). Existing biomaterials such as these are zirconia and biocompatible polymers which are adding to the aesthetic and durability performance of both modalities. In addition, there are several advances in regenerative medicine, for example, stem cell therapy and growth factors, which may improve regeneration in bone and soft tissue and broaden the range of applications of implant therapy (Suhag, 2024).

Modern-day dentistry in contemporary times is client-oriented and patient-centric, where the emphasis is placed on informed decision making and customized treatment plans (Puri et al., 2024). With ongoing technology improvements directed toward cost reductions and affordability, it is reasonable to expect that implantsupported restorations will come to be rendered more possible options for yet another range of patients. Continued progress in bridge design and adhesive materials may ultimately mitigate some of the restraints of traditional prosthetics and keep them relevant during times of innovation in implantology (Zhang et al., 2021).

#### CONCLUSION

The important advances in dental prosthetics have left for patients an entire assortment of methods to treat their loss of teeth, implant-supported restorations being one and the traditional bridges the other two most commonly employed methods. Function and aesthetics may be restored using either one of the two means, but the processes differ widely in type of surgery, outcome, and applications as part of the long-term clinical management strategies. Fortunately, implant-supported restorations are one such revolution in the patient's ability to mimic nature structurally, biomechanically, and functionally and further improve the health of the existing alveolar bone and reduce the loading on adjacent teeth. Their success is completely dependent upon how well the surgery is planned, osseointegration, and in some cases bone grafting or tissue regeneration. Certainly, in terms of costs and timelines on treatment, it is indeed higher for implants, but they turn out to be better investments in the long run with their durability and stability while improving the overall health of the mouth and with lifetime benefit for many patients.

However, traditional bridges still provide interesting alternatives where implants may not be indicated due to financial, medical, or anatomical reasons. Bridges are a very convenient way of restoring the function and aesthetics, as their surgery is relatively simple and their duration is brief compared with others. Unfortunately, they entirely depend on the integrity of the abutment teeth. Furthermore, they can't avoid bone resorption in the edentulous area. Such limitations have made them less ideal for the long tern use. Some recent advancements in

adhesive materials and minimally invasive design have addressed some of these concerns, assuring bridges in modern-day prosthodontics.

In this case also, a combination of patient factors, clinical practice, and resources can prove helpful in deciding between these two options. With advances in technology, use of biomaterials, and regenerative medicine on the astoundingly progressive track, the separation of these modalities will become more substantially blurred in time, rendering solutions for patients any more individualized and effective. Accordingly, incorporation into practice will ensure optimal outcomes and contribute to the ever-evolving discipline of dental prosthetics.

# REFERENCES

- 1. Alshomrani, F. (2024). Cone-Beam Computed Tomography (CBCT)-Based Diagnosis of Dental Bone Defects. Diagnostics, 14(13), 1404.
- 2. Andreevski, A., Kovacevska, I., &Longurova, N. (2018). Modified Direct Composite Resin Bonded Bridge.
- 3. Antonarakis, G. S., & Carmichael, R. P. (2023). Management of missing teeth, dental implants, and prosthetic restoration in orofacial clefts. Cleft and Craniofacial Orthodontics, 517-541.
- 4. Bedard, J. F., & Cullum, D. R. (2016). Diagnosis and treatment planning for minimally invasive dental implant treatmen. In Minimally invasive dental implant surgery (pp. 3-27). John Wiley & Sons, Hoboken.
- 5. Bida, C., Virvescu, D. I., Bosinceanu, D. N., Luchian, I., Fratila, D., Tunaru, O., ... &Budala, D. G. (2024). Advances In Dental Prosthetics: The Role Of Cad/Cam Technology In Denture Fabrication. Romanian Journal of Medical and Dental Education, 13(1).
- 6. Drago, C. (2020). Implant restorations: A step-by-step guide. John Wiley & Sons.
- Frisch, E., Wild, V., Ratka-Krüger, P., Vach, K., &Sennhenn-Kirchner, S. (2020). Long-term results of implants and implant-supported prostheses under systematic supportive implant therapy: a retrospective 25-year study. Clinical implant dentistry and related research, 22(6), 689-696.
- Iosif, L., Ţâncu, A. M. C., Amza, O. E., Gheorghe, G. F., Dimitriu, B., &Imre, M. (2024). AI in Prosthodontics: A Narrative Review Bridging Established Knowledge and Innovation Gaps Across Regions and Emerging Frontiers. Prosthesis, 6(6), 1281-1299.
- Jazayeri, H. E., Kang, S., Masri, R. M., Kuhn, L., Fahimipour, F., Vanevenhoven, R., ... & Tayebi, L. (2018). Advancements in craniofacial prosthesis fabrication: A narrative review of holistic treatment. The journal of advanced prosthodontics, 10(6), 430-439.
- 10. Joshi, R. (2022). Implant Prosthodontics: Advances in Implant-Supported Restorations. Prosthodontics Revolution: Modern Techniques in Dental Restorations, 37.
- 11. Krawiec, M., Olchowy, C., Kubasiewicz-Ross, P., Hadzik, J., &Dominiak, M. (2022). Role of implant loading time in the prevention of marginal bone loss after implant-supported restorations: A targeted review. Dental and Medical Problems, 59(3), 475-481.
- 12. Mandurino, M., Di Domenico, G. L., Baldani, S., Collivasone, G., Gherlone, E. F., Cantatore, G., &Paolone, G. (2023). Dental Restorations. Bioengineering, 10(7), 820.
- Michalakis, K., Misci, S., Abdallah, A., Vasilaki, D., & Hirayama, H. (2024). Implant Supportive Maintenance for Fixed Prosthetic Rehabilitations: The Patient with the Complete Arch Fixed Implant– supported Rehabilitation: Prosthetic Concepts to Optimize Maintenance Protocols. Saving Dental Implants, 357-380.
- 14. Nasr, S., Slot, D. E., Bahaa, S., Dörfer, C. E., & El-Sayed, K. M. F. (2016). Dental implants combined with sinus augmentation: What is the merit of bone grafting? A systematic review. Journal of Cranio-Maxillofacial Surgery, 44(10), 1607-1617.
- 15. Oladele, I. O., Onuh, L. N., Agbeboh, N. I., Alewi, D. D., &Lephuthing, S. S. (2023). The relationship and functional links between human age, growth, and biomedical implants: A review on the application of bulk and nanomaterials. Nano Select, 4(7), 419-441.
- Palomares, T., Montero, J., Rosel, E. M., Del-Castillo, R., & Rosales, J. I. (2018). Oral health-related quality of life and masticatory function after conventional prosthetic treatment: A cohort follow-up study. The Journal of prosthetic dentistry, 119(5), 755-763.
- 17. Pedrinaci, I., Hamilton, A., Lanis, A., Sanz, M., &Gallucci, G. O. (2024). The Bio-Restorative Concept for Implant-Supported Restorations. Journal of Esthetic and Restorative Dentistry, 36(11), 1516-1527.
- 18. Puri, H., Maurya, M., &Khurana, A. (2024). Exploring the Relationship Between Patient Engagement and Satisfaction in Dental Clinics. Library Progress International, 44(3), 7591-7597.
- 19. Rahyussalim, A. J., Marsetio, A. F., Saleh, I., Kurniawati, T., &Whulanza, Y. (2016). The needs of current implant technology in orthopaedic prosthesis biomaterials application to reduce prosthesis failure rate. Journal of Nanomaterials, 2016(1), 5386924.
- Ravidà, A., Tattan, M., Askar, H., Barootchi, S., Tavelli, L., & Wang, H. L. (2019). Comparison of three different types of implant-supported fixed dental prostheses: A long-term retrospective study of clinical outcomes and cost-effectiveness. Clinical Oral Implants Research, 30(4), 295-305.

- 21. Sadowsky, S. J. (2016). Systemic Factors Influencing Dental Implant Therapy. Evidence-based Implant Treatment Planning and Clinical Protocols, 11.
- 22. Selim, K., Ali, S., &Reda, A. (2016). Implant supported fixed restorations versus implant supported removable overdentures: a systematic review. Open access Macedonian journal of medical sciences, 4(4), 726.
- 23. Suhag, D. (2024). Dental Biomaterials. In Handbook of Biomaterials for Medical Applications, Volume 2: Applications (pp. 235-279). Singapore: Springer Nature Singapore.
- 24. Weber, H. P., Margvelashvili-Malament, M., & De Souza, A. B. (2023). Clinical Applications of Digital Dental Technology in Implant Surgery: Computer-Aided Implant Surgery. Clinical applications of digital dental technology, 217-239.
- 25. Zhang, Y., Gulati, K., Li, Z., Di, P., & Liu, Y. (2021). Dental implant nano-engineering: advances, limitations and future directions. Nanomaterials, 11(10), 2489.