

Crown & Bridge Dentistry Commonly Asked Questions

1. **Is there much discomfort during or after crown and bridge procedures?**

With modern local anaesthetics, there is virtually no pain during the procedures. The patient can expect some slight discomfort after visits similar to that following a visit for simple restorative dentistry (“fillings”).

2. **How long will I be in the chair? How many visits can I expect? How many weeks before my work is complete?**

Before proceeding with your crown and bridgework, you will receive a “Sequence of Treatment” which outlines the number of visits, the length of time for each visit, and the number of weeks required for total treatment. Providing that the patient is amenable, crown and bridge procedures are best performed with fewer, but longer visits. These may vary for one to four hours. Spending half a day in the dentist’s chair may sound ominous, however, several breaks are taken for visits to our washroom and for stretching (or for sneaking a mid-visit cigarette, if required). A ceiling television helps pass the time more quickly.

3. **Will I be without teeth at any time?**

At no time between visits will you be without teeth or aesthetically compromised. Temporary crown and bridgework made of a durable aesthetic plastic will be placed until the permanent work is ready.

4. **Are there any risks or potential problems in having crown and bridgework done?**

As with any dental or medical procedure, there are a few potential problems. These are listed below:

a. **Endodontics (Root Canal Treatment)**

Every dental procedure a tooth receives is an insult to it. The tooth is a living and vital structure and typically recovers without a problem from dental treatments. Teeth, however, remember all previous insults, which can be cumulative and the tooth may not recover. Sensitivity to temperature and other symptoms may indicate a root canal is necessary. A small percentage of teeth receiving crown and bridge treatment may require root canal therapy. Most commonly, the need for root canal treatment is determined before permanent cementation of the crown and bridgework. Symptoms can arise months, or even years later, at which time the root canal can be performed by access through a small hole in the top of the crown.

b. **I have seen other people with crowns that have a dark line at the gum line when they smile. Will my gums recede after the crown and bridgework?**

Crowns today do not need to have dark “gold margin” at the gum line. The porcelain can be brought right to the edge of the crown, hidden just below the gum line. Patients with thin gums may experience slight recession exposing a darker root surface. This is uncommon, but in a small percentage of cases may occur.

- c. Can the bridge break? Can porcelain chip? Will the bridge wear down with use?

The materials used for modern crowns and bridges are extremely durable, and with normal daily use will last long, if not longer, than the natural dentition. In today's busy and stressful society, however, some patients subject their teeth to abnormal wear and tear through clenching and grinding. This is called "Bruxism" and usually occurs when people are asleep. Consequently, the majority of "Bruxers" are unaware of the habit. The forces which can be generated are extraordinary and could result in chipped porcelain or even broken bridgework. Evidence of this common habit is usually noticeable before treatment starts and appropriate precautions can be taken. You may be a candidate for a "Night Guard" which is simply worn over the teeth at night to protect them.

- d. Will the teeth be sensitive after permanent cementation?

Patients often experience mild sensitivity to cold foods and air for a week or two after cementation. This typically subsides in a short period of time.

- e. Can crown and bridgework become uncemented and loose?

This is unusual with the "bonding" cements available today. It is most common in patients who are bruxing. Should any looseness be noticed by the patient, it is important to let us know since bacteria and food can cause decay beneath a loose crown.

- f. Are teeth which have had root canals more brittle?

It has been our experience that teeth with root canals and posts are more brittle, and may fracture if subjected to abnormal forces.

5. What is the long term prognosis? Is this a permanent restoration?
Are there any guarantees?

In the past, the dental profession as a whole has had good to moderate success with respect to the longevity of crown and bridgework. The average life span of such work in North America ranges from five to ten years. Many patients enjoy their crown and bridgework for twenty or thirty years, and often for a lifetime. The long term prognosis is closely related to the quality and care with which the dentist performs the crown and bridge procedures and the daily wear and tear the patient puts upon their dentition. Because of the many variables involved with the mouth, it is not possible to give guarantees. We do tell our patients, however, that should failures occur soon after completion, we will gladly rectify problems at minimum expense to them.