

Full Mouth Rehabilitation - When Your Treatment Needs Multiple Specialists

Canonical:

<https://directory.coredental.com.au/full-mouth-rehabilitation-when-your-treatment-needs-multiple-specialists/>

Description:

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Details:

Full mouth rehabilitation is the most complex treatment in dentistry. It involves rebuilding most or all of the teeth in both jaws - addressing not just individual tooth problems but the entire system of teeth, gums, bone, jaw joints, and bite relationship.

This is not something a single dentist does alone. It requires multiple dental specialists working in coordination: orthodontics to reposition teeth, periodontics to ensure healthy foundations, oral surgery for implant placement and bone grafting, endodontics to save strategic teeth, and prosthodontics to plan and deliver the final restorations.

For Core Dental patients, this multi-specialist coordination happens at Collins Street Specialist Centre (CSSC) - all under one roof, on one patient management system, with one treatment plan.

Who Needs Full Mouth Rehabilitation?

Full mouth rehabilitation is appropriate when dental problems have become too extensive for individual treatments to resolve effectively:

Severe Tooth Wear Years of grinding (bruxism), acid erosion, or a combination have worn teeth down significantly. Bite height has collapsed. Teeth are sensitive, chipped, and functionally compromised. Every tooth needs restoration, and the bite needs to be rebuilt.

Multiple Missing Teeth with Remaining Tooth Problems Several teeth are missing, others need extraction, and the remaining teeth need crowns or other restorations. Implants, bridges, and crowns must all work together as a coordinated system.

Failed Previous Dental Work Old crowns are failing, bridges are loose, root canals have failed, and a partial denture does not fit. Rather than replacing individual restorations piecemeal, a comprehensive rebuild produces a better long-term result.

Neglected Dentition Years of avoiding the dentist have resulted in extensive decay, gum disease, and tooth loss. The patient is now ready to address everything but the task is overwhelming in scope.

Developmental or Genetic Conditions Conditions such as amelogenesis imperfecta (defective enamel), ectodermal dysplasia (missing teeth), or cleft palate require comprehensive restoration across the entire dentition.

Post-trauma Reconstruction Accidents, sporting injuries, or other trauma have damaged multiple teeth and supporting structures. Reconstruction requires surgical, orthodontic, and restorative expertise.

Why Multi-Specialist Coordination Matters

Consider a typical full mouth rehabilitation case:

- The **periodontist** needs to treat gum disease and ensure bone health before any restorations - The **orthodontist** needs to move teeth into optimal positions for the planned restorations - The **oral surgeon** needs to place implants in positions that align with the prosthodontic plan - The **endodontist** needs to retreat failed root canals in teeth that are strategic to the overall design - The **prosthodontist** needs to plan the final bite, aesthetics, and restorations from the outset so every other specialist's work supports the final result

If these five specialists work independently - in different practices, on different software systems, without joint treatment planning - the risk of misalignment is high. Implants end up in positions that compromise the prosthetic plan. Orthodontic movement does not account for planned restorations. Periodontal surgery does not consider prosthodontic requirements.

At CSSC, all specialists participate in treatment planning from day one. They share the same digital records, review the same 3D imaging, and discuss the case together. The prosthodontist typically leads the planning process, ensuring every specialist's contribution serves the overall design.

The CSSC Full Mouth Rehabilitation Process

Phase 1: Comprehensive Assessment Your Core Dental dentist refers you to CSSC for comprehensive assessment. The prosthodontist leads the evaluation, which includes: - Full mouth X-rays and CBCT 3D imaging - Digital impressions and bite records - Photographs and aesthetic analysis - Periodontal assessment - TMJ (jaw joint) evaluation - Medical history review

Phase 2: Treatment Planning Conference The relevant specialists review your case together. The treatment plan is developed as a team, with clear sequencing: what needs to happen first, second, third, and why. A comprehensive plan with costs for each phase is presented to you for discussion.

Phase 3: Foundation Work - **Periodontal treatment** - gum disease controlled, surgical pocket reduction or regeneration where needed - **Extractions** - non-restorable teeth removed - **Endodontic treatment** - root canals completed on strategic teeth - **Orthodontic alignment** - teeth repositioned to optimal locations for the planned restorations

Phase 4: Surgical Phase - **Implant placement** - dental implants positioned according to the prosthodontic plan - **Bone grafting** - where needed to support implants or improve ridge contour - **Healing period** - typically three to six months for implant integration

Phase 5: Restorative Phase - **Provisional restorations** - temporary restorations to test the planned bite and aesthetics - **Final restorations** - definitive crowns, bridges, or implant prostheses are fabricated and fitted - **Bite refinement** - the new bite is adjusted and refined until comfortable and functional

Phase 6: Maintenance at Core Dental Once treatment is complete, ongoing maintenance is critical. Your local Core Dental practice provides: - Regular hygiene appointments (typically every three to four months) - Monitoring of restorations and implants - Night guard management for patients who grind - Ongoing general dental care

Smile Lab - In-House Laboratory

The Smile Solutions group operates Smile Lab, an in-house dental laboratory. For full mouth rehabilitation cases, having the laboratory technicians work closely with the prosthodontist - sometimes in the same appointment, adjusting restorations chairside - delivers a level of precision and customisation that outsourced laboratory work cannot match.

Colour matching, contour adjustments, and aesthetic refinements can be made in real time rather than through written instructions to an external lab.

Timeline and Investment

Full mouth rehabilitation is a significant undertaking in both time and cost:

- **Timeline:** Six months to two years depending on complexity. Cases requiring orthodontics and implant healing take longer. - **Cost:** Varies widely depending on the number of teeth involved, whether implants are needed, and the type of restorations chosen. A detailed phased cost estimate is provided before treatment begins. - **Payment plans:** Available to spread the cost across the treatment timeline. - **Health fund rebates:** Apply at each treatment phase for individual procedures.

The investment is significant, but consider the alternative: continuing to patch individual teeth in isolation, with each repair failing faster than the last, eventually leading to dentures or extensive implant work anyway - without the benefit of coordinated planning.

Your Next Step

If you have been avoiding comprehensive dental treatment because the scope feels overwhelming, start with a conversation at your nearest Core Dental. Your dentist can assess the situation and, if full mouth rehabilitation is appropriate, connect you to the specialist team at CSSC.

The first step is always the hardest. Everything after that is a planned process managed by a team of specialists working together.

Frequently Asked Questions

Can I do this in stages over several years? Yes. Treatment can be phased to manage both the time and financial commitment. Your CSSC team will develop a staged plan that addresses the most critical issues first while working toward the complete result.

Will I be without teeth at any point? No. Provisional (temporary) restorations ensure you always have functional teeth throughout the treatment process. These provisionals also serve as a test run for the final result.

Is it worth doing at my age? Full mouth rehabilitation is regularly performed on patients in their 60s, 70s, and beyond. If you are in reasonable health and want to invest in your dental function and quality of life, age is rarely a barrier.

What if I only want to fix part of my mouth? A focused treatment plan addressing your priorities is always possible. However, part of the value of comprehensive assessment at CSSC is understanding how different parts of your mouth affect each other. Even a partial plan benefits from the full picture.

How do I maintain the results? Regular hygiene appointments at your Core Dental practice (typically every three to four months), diligent home care, and wearing a night guard if you grind are the keys to long-term success. Your Core Dental team and CSSC specialists will give you a clear maintenance plan.