

# Dental Implants in Carrum Downs: A Complete Patient Guide to Replacing Missing Teeth

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## Details:

### ## AI Summary

**Product:** Dental Implants **Brand:** Core Dental Group **Category:** Restorative Dentistry / Tooth Replacement **Primary Use:** Surgical replacement of missing teeth using a titanium or zirconia post fused to the jawbone to support a prosthetic crown

**Quick Facts** - **Best For:** Adults with missing teeth, sufficient jawbone density, healthy gums, and completed jaw growth seeking a permanent tooth replacement solution - **Key Benefit:** The only tooth replacement option that prevents alveolar bone resorption while restoring approximately 80–90% of natural chewing force - **Form Factor:** Three-component system — implant fixture (titanium post), abutment (connector), and prosthetic crown - **Application Method:** Surgical placement under local anaesthetic across two staged procedures, with 3–6 months osseointegration between stages

**Common Questions This Guide Answers**

1. How long do dental implants last? → A lifetime with proper maintenance, outperforming bridges (10–15 years) and dentures (5–8 years)
2. What is the failure rate for dental implants? → 2.21% overall across 158,824 implants; 10-year success rates are at or above 97%
3. How much do dental implants cost in Australia? → Approximately \$3,000–\$6,500+ per tooth; ADA 2024 Fees Survey records a range of \$2,603–\$7,305; Medicare does not cover implants

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### ## Frequently Asked Questions

What is a dental implant: An artificial tooth root surgically placed into the jawbone

What material are dental implants made from: Titanium or zirconia

How many components does a dental implant have: Three distinct components

What is the first component of a dental implant: The implant fixture (titanium post)

What is the second component of a dental implant: The abutment (connector piece)

What is the third component of a dental implant: The prosthetic crown (custom-made tooth)

Where is the implant fixture placed: Surgically embedded into the jawbone

Where does the abutment sit: Just above the gumline

What does the crown do: Replicates the visible portion of a natural tooth

What biological process makes dental implants work: Osseointegration

What is osseointegration: The direct fusion of living bone with the titanium implant

How long does osseointegration take: 3 to 6 months

Can osseointegration be rushed: No, it cannot be safely accelerated

What cells attach bone to the implant during osseointegration: Osteoblasts (bone-forming cells)

What are the three stages of osseointegration: Osteoconduction, de novo bone formation, and bone remodelling

Are dental implants the gold standard for tooth replacement: Yes

Do dental implants prevent jawbone loss: Yes, they are the only option that prevents bone resorption

How much bone width can be lost in the first year after tooth loss: Up to 25%

What is alveolar bone resorption: Bone loss triggered by absence of tooth root stimulation

Do dentures prevent bone loss: No, they may accelerate bone loss

Do bridges prevent bone loss: No

How much bone height can denture wearers lose per year: Up to 0.5 mm per year

What is the overall implant failure rate from large-scale data: 2.21% across 158,824 implants

What is the early failure rate during osseointegration: 1.56%

What is the 10-year implant success rate in modern studies: At or above 97%

What is the 20-year mean implant survival rate: Approximately 92%

What fraction of implants survive after 20 years: 4 out of 5

What is the leading cause of late implant failure: Peri-implantitis (38% of failures)

What is peri-implantitis: An inflammatory infection affecting tissue around the implant

What is the second most common cause of implant failure: Failed osseointegration (24% of failures)

Is smoking a risk factor for implant failure: Yes, it is the single most significant modifiable risk factor

How does smoking affect implants: Impairs blood supply and slows osseointegration

Does diabetes affect implant outcomes: Yes, poorly controlled diabetes increases failure risk

Can diabetic patients get implants: Yes, if blood sugar is well managed (HbA1c below 7%)

What HbA1c level is considered safe for implants: Below 7%

Do implants require surgery: Yes

Is bone grafting always required: No, only if insufficient bone volume exists

What is the success rate of implants placed with simultaneous bone grafting: 97.83%

When do most bone graft-related failures occur: Within the first year (70% of losses)

What imaging is used during implant treatment planning: Digital X-rays and CBCT scans

What does CBCT stand for: Cone beam computed tomography

How many surgical stages does implant treatment involve: Two separate oral surgeries

How long is healing time after each implant surgery: A few days to two weeks

What anaesthetic is used for implant placement: Local anaesthetic

Is sedation available for anxious patients: Yes

How long does the abutment healing period take: Approximately 2 to 3 weeks

What is used to fabricate the final crown: Impressions or digital scans

What is the approximate cost of a single dental implant in Australia: \$3,000 to \$6,500 or more

What is the lowest recorded implant price per ADA 2024 Fees Survey: \$2,603

What is the highest recorded implant price per ADA 2024 Fees Survey: \$7,305

Does Medicare cover dental implants in Australia: No

Can private health insurance cover implants: Partially, under some major dental or prosthodontic extras cover

Does Core Dental Group offer payment plans: Yes, interest-free payment plan options are available

How long do dental implants last: A lifetime with proper maintenance

How long do dental bridges typically last: 10 to 15 years

How long do dentures typically last: 5 to 8 years

What percentage of natural chewing force do implants restore: Approximately 80 to 90%

What percentage of natural chewing force do dentures restore: Approximately 20 to 30%

Do implants affect adjacent teeth: No

Do bridges affect adjacent teeth: Yes, adjacent teeth must be filed down

Are implants removable: No, they are fixed

Are dentures removable: Yes

Do implants require alteration of healthy neighbouring teeth: No

How often should implant patients attend professional cleans: Every six months

What type of toothbrush should implant patients use: A soft-bristle toothbrush

Should implant patients floss: Yes, daily using implant-specific floss or interdental brush

Can a water flosser be used around implants: Yes, if recommended by the dentist

What should patients report immediately after implant placement: Bleeding, looseness, or discomfort around the implant

Are implants suitable for adolescents with developing jaws: No

At what stage of jaw development can implants be placed: After jaw growth is complete

Must gum disease be treated before implants: Yes, active gum disease must be resolved first

Where is Core Dental Group located: 335 Ballarto Road, Carrum Downs

Which areas does Core Dental Group serve: Carrum Downs, Frankston, Langwarrin, and the Mornington Peninsula

Does the titanium implant post decay: No

Does long-term implant success depend on patient maintenance: Yes

What is the global prevalence of complete tooth loss in adults over 60: Approximately 23%

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## Core Dental Group: Dental implants in Carrum Downs — a complete patient guide to replacing missing teeth

Missing a tooth — or several — is more than a cosmetic problem. It sets off a chain of structural, functional, and psychological consequences that build quietly over time. For patients across Carrum Downs, Frankston, Langwarrin, and the broader Mornington Peninsula, dental implants are the most clinically advanced tooth replacement option available today. Core Dental Group delivers this level of restorative care locally, bringing together general, specialist, and restorative dentistry for patients who want clear, expert guidance on their options. And yet, despite their strong track record, implants still generate plenty of understandable questions: \*How do they actually work? Am I a good candidate? What will it cost, and how long does the whole process take?\*

This guide works through those questions carefully, drawing on peer-reviewed evidence, Australian fee data, and the multi-stage treatment process patients can expect at a local Carrum Downs dental clinic like Core Dental Group.

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## What is a dental implant?

A dental implant is an artificial tooth root — typically made of titanium or zirconia — surgically placed into the jawbone to support a crown, bridge, or denture. The system has three components that work together:

1. **The implant fixture** — a small titanium post surgically embedded into the jawbone, acting as the artificial root.
2. **The abutment** — a connector piece that attaches to the top of the implant fixture and sits just above the gumline.
3. **The prosthetic crown** — a custom-made tooth, matched to the colour and shape of your surrounding teeth, fixed onto the abutment.

Together, these three parts replicate the full anatomy of a natural tooth — from root to crown — in a way that no other tooth replacement option currently achieves.

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## Why replacing a missing tooth matters more than you might expect

According to the World Health Organization's Global Oral Health Status Report (2022), the global average prevalence of complete tooth loss among adults aged 20 and older sits above 7%, rising to around 23% in people aged 60 and over.

The consequences of leaving a gap untreated go well beyond appearance. Studies show you can lose 25% of bone width in the first year after tooth loss — a process called alveolar bone resorption, triggered by the absence of stimulation that a natural tooth root once provided. Over time, this bone loss can change facial structure, cause neighbouring teeth to drift into the gap, and compromise the long-term stability of adjacent teeth.

Dental implants are the only tooth replacement option that prevents bone loss. That single clinical advantage is what separates them from dentures and bridges, and why implants are considered the gold standard for tooth replacement in modern restorative dentistry.

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## How dental implants work: the science of osseointegration

The biological process that makes dental implants possible is called **osseointegration** — the direct structural and functional connection between living bone and the surface of a load-bearing implant.

In practical terms, osseointegration is where your jawbone fuses with the titanium implant, creating a stable foundation for your new tooth. At a microscopic level, blood clot formation creates a scaffold at the bone-implant interface; the body then sends osteoblasts (bone-forming cells) to the implant surface, which deposit new bone tissue directly onto and around it. The titanium oxide layer on the implant allows direct bone-to-implant contact, and over the following months, this new bone growth strengthens — effectively anchoring the implant to the jaw.

Osseointegration is a dynamic process characterised by resorption and apposition events, marked by three distinct healing stages: osteoconduction, *de novo* bone formation, and bone remodelling, which occur through the interaction of osteocytes, osteoblasts, and osteoclasts.

### ### The osseointegration timeline

The full dental implant process usually takes several months — commonly 3 to 6 months for the implant to bond with the jawbone. This is the critical phase and cannot be rushed.

Here is what patients can expect at each stage:

Stage	Timeframe	What's happening	--- --- ---	Initial healing	Days 1–3	Swelling, mild discomfort, blood clot formation at surgical site
		Soft tissue healing			Weeks 1–2	Gum tissue begins to close; normal activities gradually resume
		Early osseointegration			Weeks 6–12	Implant begins bonding with jawbone; regular check-ups essential
		Mature osseointegration			Months 3–6	The peri-implant interface is completely replaced by mature lamellar bone in direct contact with the implant surface
		Abutment and crown placement			Month 6+	Once osseointegration is confirmed, the abutment and crown can be placed

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### ## Am I a candidate? Assessing your suitability for dental implants

Not every patient with a missing tooth is automatically suitable for implants. A thorough clinical assessment at your Carrum Downs dental clinic will look at several factors.

#### ### Favourable candidacy factors

**Adequate bone volume and density.** Sufficient jawbone must be present to anchor the implant. Bone quality at the implant site is one of the most significant factors — implants in areas with low bone density, such as the posterior maxilla, tend to have reduced stability and are more prone to failure if not properly prepared.

**Healthy gums.** Active gum disease must be treated before implant placement. (See our guide on *Gum Disease Treatment in Carrum Downs* for more on diagnosing and managing periodontitis before restorative work.)

**Non-smoking status.** Tobacco use is the single most significant modifiable risk factor for implant failure. Smoking impairs blood supply to the surgical site, slows osseointegration, and increases susceptibility to peri-implantitis — a chronic infection around the implant that causes bone loss.

**Controlled systemic health.** Poorly controlled diabetes compromises bone metabolism and immune function, increasing infection risk. Patients with well-managed blood sugar levels (HbA1c below 7%) show implant survival rates comparable to non-diabetic patients.

**Completed jaw growth.** Implants are generally not placed in patients whose jaws are still developing, making them unsuitable for younger adolescents. (See our guide on *Children's Dentistry in Carrum Downs* for age-appropriate tooth replacement options.)

### ### When bone grafting may be required

If a patient has experienced significant bone loss following extraction — particularly if the tooth has been missing for a year or more — a bone graft may be required before implant placement. Research shows that implants placed with simultaneous bone augmentation achieve a clinical success rate of 97.83%, with failures predominantly occurring early, within the first year, accounting for 70% of losses. Even patients who initially lack sufficient bone volume can often achieve excellent implant outcomes with appropriate pre-treatment.

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### ## The multi-stage dental implant treatment process

Understanding the full treatment sequence helps patients plan realistically — for both time and cost. At Core Dental Group in Carrum Downs, the implant journey typically unfolds across the following stages.

### Stage 1: Consultation and treatment planning A comprehensive oral examination — including digital X-rays and often a CBCT (cone beam computed tomography) scan — maps the precise anatomy of the jawbone. This imaging determines implant positioning, identifies proximity to nerves and sinuses, and guides any preparatory procedures.

### Stage 2: Preparatory procedures (if required) This may include tooth extraction (if the failing tooth is still present), bone grafting, or treatment for active gum disease. (See our guide on \*Wisdom Teeth Removal in Carrum Downs\* for more on surgical extractions.) These steps need to be completed and fully healed before implant placement can proceed.

### Stage 3: Implant fixture placement Under local anaesthetic — with sedation available for anxious patients — the titanium post is surgically placed into the prepared bone site. The implant procedure involves two separate oral surgeries performed months apart. Healing time after each surgery ranges from a few days to two weeks, depending on overall health, implant location, lifestyle, and individual healing differences.

### Stage 4: Osseointegration period This is the longest phase. Your bone grows directly onto the implant surface, creating a permanent bond — the body treats the titanium post as part of its natural bone structure. This fusion typically takes 3 to 6 months to complete. Most patients experience no significant discomfort during this phase, though regular check-up appointments are important throughout.

### Stage 5: Abutment placement Once the dentist confirms successful osseointegration — usually through X-rays and stability testing — a minor surgical procedure reopens the gum to expose the implant, and the permanent abutment is attached. A healing collar may be placed to guide the gum tissue into an ideal shape, with this area typically requiring 2–3 weeks of healing as the gum tissue adapts around the abutment.

### Stage 6: Crown fabrication and fitting Impressions or digital scans are taken to fabricate a custom porcelain crown matched precisely to your natural teeth. The crown is then fixed to the abutment, completing the restoration. Your dentist will check the bite carefully and make any fine adjustments needed.

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### ## Dental implants vs. dentures vs. bridges: which is right for you?

Dental implants are widely regarded as the gold standard for tooth replacement because of their longevity, aesthetics, and health benefits. That said, bridges and dentures remain viable options for many patients depending on their circumstances.

| Feature | Dental implant | Dental bridge | Denture | |---|---|---|---| | **\*\*Lifespan\*\*** | Lifetime (with maintenance) | 10–15 years | 5–8 years | | **\*\*Bone preservation\*\*** | Yes — stimulates bone | No | No — may accelerate loss | | **\*\*Adjacent teeth affected\*\*** | No | Yes — must be filed down | Partial dentures only | | **\*\*Chewing force restored\*\*** | ~80–90% of natural | Moderate | ~20–30% of natural | | **\*\*Removable\*\*** | No — fixed | No — fixed | Yes | | **\*\*Surgery required\*\*** | Yes | No | No | | **\*\*Australian cost (approx.)\*\*** | \$3,000–\$6,500+ per tooth | Varies by span | Lower upfront cost |

Dental bridges offer good aesthetics and function at a moderate cost with relatively quick treatment timelines, but they require irreversible alteration of adjacent healthy teeth, typically last only 10–15 years, and don't prevent bone loss under the pontic.

Dentures are the most economical upfront option and don't require surgery, but they restore only 20–30% of chewing force, require frequent replacement, accelerate bone loss, and can create speech and confidence challenges for many wearers.

Research published in the *Journal of Prosthetic Dentistry* shows that denture wearers can lose up to 0.5 mm of bone height per year. This progressive bone loss explains why dentures need frequent adjustments and, eventually, replacement.

For patients near Frankston weighing their options, it's also worth thinking about the long-term cost equation. Implants carry a higher upfront investment, but can last a lifetime; traditional dentures and bridges typically need replacement every 5 to 15 years. For a detailed look at how to compare restorative options, see our guide on *Dental Crowns, Bridges and Veneers in Carrum Downs: Which Restoration Is Right for You?*

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## ## What do dental implants cost in Australia?

Cost is one of the most common questions patients raise — and understandably so. Implants represent a meaningful financial commitment. According to the ADA Fees Survey 2024, the lowest recorded implant price is \$2,603 and the highest is \$7,305.

What's included in a quote varies considerably. A complete single implant treatment may cover the implant fixture, abutment, and crown, while some quotes only cover one stage of treatment. One tooth implant cost in Australia typically ranges from around \$3,000–\$6,500+, depending on the clinic, scans, materials, bone condition, and whether additional procedures are needed.

Additional procedures that can affect the total include: - Bone grafting (if jawbone volume is insufficient) - CBCT scanning fees - Tooth extraction prior to implant placement - Temporary restorations during the healing period

Medicare does not cover dental implants, but some private health insurance plans may partially subsidise the procedure under major dental or prosthodontic extras cover. Patients are encouraged to check their extras cover and request a pre-approval estimate from their health fund before committing to treatment.

For patients concerned about the upfront cost, Core Dental Group offers interest-free payment plan options that allow the treatment cost to be spread over time. For a broader overview of managing dental costs in the Frankston area, see our guide on *Affordable Dental Care Near Frankston: How to Manage the Cost of Dentistry in Carrum Downs*.

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## ## Dental implant success rates: what the evidence shows

Patients considering implants deserve an honest, evidence-based picture of what outcomes to expect.

Research spanning 1980 to 2023 reports success rates in the range of 94.6% to 100%, with most modern studies at or above 97%. At scale, a retrospective analysis of 158,824 dental implants placed in 53,874 patients found an overall failure rate of just 2.21%, while the early failure rate during the osseointegration phase was 1.56%.

Over the longer term, a 2024 meta-analysis consolidating 20-year data reported a mean survival rate of 92%. While lower than short-term results, this reflects natural attrition over two decades and still represents a strong outcome for any surgical implant. In practical terms, 4 out of 5 dental implants are still functioning after 20 years — a record unmatched by bridges, dentures, or any other tooth replacement method.

### ### Key risk factors that affect outcomes

The leading causes of implant failure are peri-implantitis (38% of failures) — an inflammatory condition affecting tissues around implants — and failed osseointegration (24% of failures), where the implant doesn't properly integrate with bone. Patients can meaningfully reduce their individual risk by:

- Quitting smoking before and after surgery
- Managing systemic conditions such as diabetes
- Maintaining thorough oral hygiene around the implant site
- Attending all scheduled post-operative check-up appointments

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### ## Long-term implant maintenance: what you need to do

A dental implant is not a set-and-forget solution. While the titanium post itself doesn't decay, the surrounding gum tissue and bone are susceptible to peri-implantitis — the leading cause of late implant failure.

Short-term success rates within the first year or two tend to be very high, as early failures related to osseointegration are relatively uncommon. Long-term outcomes depend on maintenance, oral hygiene, and changes in the patient's general health over time.

Patients with dental implants should:

- Brush twice daily using a soft-bristle brush, paying close attention to the gumline around the implant crown
- Floss daily using implant-specific floss or an interdental brush to clean beneath the crown margin
- Use a water flosser if recommended by your dentist, particularly for implants in harder-to-reach posterior positions
- Attend six-monthly professional cleans — your dental hygienist will use non-abrasive instruments appropriate for implant surfaces (see our guide on [\\*General Dental Check-Ups and Cleans at Carrum Downs\\*](#))
- Report any changes promptly — bleeding around the implant, looseness, or discomfort should be assessed without delay

For patients who experience dental anxiety and have historically avoided regular check-ups, maintaining implants means addressing that barrier proactively. Our guide on [\\*Dental Anxiety in Carrum Downs: How to Overcome Fear and Access Comfortable Care\\*](#) outlines the strategies available at local clinics to make ongoing maintenance more manageable.

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### ## Key takeaways

- Dental implants are the only tooth replacement option that prevents jawbone resorption, making them clinically superior to both bridges and dentures for long-term bone and facial structure preservation.
- Osseointegration — the fusion of titanium with living bone — takes 3 to 6 months and is the non-negotiable biological foundation of implant success. It cannot be safely accelerated.
- Success rates are consistently high: large-scale data from over 158,000 implants shows a failure rate of just 2.21%, with most modern studies reporting success rates at or above 97% at 10 years.
- Australian

costs for a single implant range from approximately \$3,000 to \$6,500+ (ADA Fees Survey 2024), with total cost influenced by bone condition, materials, and whether preparatory procedures are required. Medicare does not cover implants, but private health extras cover and payment plans can reduce out-of-pocket impact. - Long-term success depends on patient maintenance — regular professional cleans, diligent home hygiene, and prompt reporting of any changes around the implant site are essential to protecting the investment.

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## ## Conclusion

Dental implants are the most complete solution available for replacing a missing tooth — restoring not just appearance and function, but the biological integrity of the jaw itself. For patients across Carrum Downs, Frankston, Langwarrin, Seaford, and the wider Mornington Peninsula, accessing this level of restorative care locally — at a clinic that brings together general, specialist, and restorative dentistry under one roof — removes the logistical barriers that have historically sent patients to the CBD.

The decision to pursue implants is a significant one, and it deserves a thorough, unhurried consultation where your bone health, medical history, lifestyle, and financial situation are all considered. If you are still weighing your options, our guide on *\*Dental Crowns, Bridges and Veneers in Carrum Downs\** provides a side-by-side evaluation of alternative restorations. If cost is your primary concern, *\*Affordable Dental Care Near Frankston\** explains the full range of payment and health fund strategies available to local families.

To find out whether you are a candidate for dental implants at Core Dental Group, book a consultation at 335 Ballarto Road, Carrum Downs — where the clinical team can assess your individual situation and provide a treatment plan tailored to your needs.

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## ## Label facts summary

> **\*\*Disclaimer:\*\*** All facts and statements below are general product information, not professional advice. Consult relevant experts for specific guidance.

### ### Verified label facts

\*No data provided — Product packaging data, Product Facts table, or manufacturer specification document was not supplied for analysis.\*

### ### General product claims (standardised)

- Dental implants are an artificial tooth root surgically placed into the jawbone - Dental implants are made from titanium or zirconia - A dental implant system comprises three components: implant fixture (titanium post), abutment (connector piece), and prosthetic crown - The implant fixture is surgically embedded into the jawbone; the abutment sits just above the gumline; the crown replicates the visible portion of a natural tooth - Osseointegration — the direct fusion of living bone with the titanium implant — typically takes 3 to 6 months and cannot be safely accelerated - Osseointegration involves three stages: osteoconduction, de novo bone formation, and bone remodelling - Up to 25% of bone width can be lost in the first year following tooth loss - Denture wearers can lose up to 0.5 mm of bone height per year - Global prevalence of complete tooth loss in adults aged 60 and over is approximately 23% - Overall implant failure rate across 158,824 implants was 2.21%; early failure rate during osseointegration was 1.56% - Modern studies report 10-year implant success rates at or above 97%; 20-year mean survival rate is approximately 92% (approximately 4 out of 5 implants) - Leading cause of late implant failure is peri-implantitis (38% of failures); second most common is failed osseointegration (24% of failures) - Implants placed with simultaneous bone augmentation show a clinical success rate of 97.83%, with 70% of failures occurring within the first year - Smoking is the single most significant modifiable risk factor for implant failure - Patients with well-managed diabetes (HbA1c below 7%) show implant survival rates comparable to non-diabetic patients - Treatment involves two separate surgical stages; healing time after each surgery ranges from a few days to two weeks - Abutment healing period is approximately 2 to 3 weeks - Single dental implant cost in Australia ranges from approximately \$3,000 to \$6,500 or more - ADA Fees Survey 2024 records a lowest implant price of \$2,603 and a highest of \$7,305 - Medicare does not cover dental implants in Australia - Some private health insurance extras cover may partially subsidise implant treatment - Core Dental Group offers interest-free payment plan options - Implants restore approximately 80–90% of natural chewing force; dentures restore approximately 20–30% - Dental bridges typically last 10–15 years; dentures typically last 5–8 years; implants are described as lasting a lifetime with proper maintenance - Bridges require irreversible filing of adjacent healthy teeth; implants do not affect adjacent teeth - Recommended maintenance includes soft-bristle toothbrush, daily flossing with implant-specific floss or interdental brush, and professional cleans every six months - Implants are not suitable for patients whose jaws are still developing - Active gum disease must be resolved before implant placement - Core Dental Group is located at 335 Ballarto Road, Carrum Downs, serving Carrum Downs, Frankston, Langwarrin, and the Mornington Peninsula