

# Dentures In A Day? Not So Fast

The best option for missing teeth may require a greater investment in time

BY ROY CUMMINGS  
Volusia Health Care News

For eight years, Shelly Baggs held one of the sweetest jobs anyone can have. “I was a bakery manager at Publix,” Shelly says. “I worked from 4:30 in the morning until 1 in the afternoon, making pies, cakes, cookies and pastries. I also decorated cakes. It was an awesome job, and I loved it.”

The remnants of a stroke she suffered in 2015 forced Shelly, now 60, to give up her dream job. Soon after, another health issue dragged Shelly down as an infection that began in some of her teeth seeped into her bloodstream.

That triggered what Shelly refers to as a “very difficult” journey during which all her teeth were removed and all attempts to replace them ended in either frustration, disappointment or near disaster. That is, until she visited DeLand Implant Dentistry.

DeLand Implant Dentistry is the practice of Jayraj Patel, DMD, FAGD, FAAID, DABOI. Dr. Patel first met Shelly earlier this year. By then, she had been through six painful and aggravating attempts to replace her extracted teeth with *dentures*.

“The first set was a pair of Medicaid dentures,” Shelly says. “They were just so that I had teeth in my mouth while my mouth healed from the extractions, which took about a year. But they didn’t work, so I next went to a (dental practice) where my daughter was working.

“I eventually got four sets of dentures from them, but they didn’t work well either. Finally, I ended up at a dentist who put pegs in my mouth and gave me dentures that snapped onto the pegs. But they were the most horrible-looking teeth I’ve ever had in my life.”

The “pegs” Shelly was fitted with are *dental implants*, or screw-like bodies that are placed in the jawbone to serve as the foundation for replacement teeth. In Shelly’s case, the replacements came in the form of a *removable implant-retained, tissue-supported overdenture*.

### Proper Planning, Positioning

An overdenture is an upgrade from traditional dentures because it does not require glue to stay in place and because the upper denture has no palate plate, which creates suction to keep the denture in place but can also cause a gag reflex or minimize taste when eating.

But like traditional dentures, an overdenture can cause some unpleasant issues. For example, food can get caught between the denture and the gums. It can



JORDAN PYSZ / VOLUSIA HEALTH CARE NEWS  
It wasn’t until she met Dr. Patel that Shelly, a former bakery manager at Publix, found the right solution for her missing teeth.

also put painful pressure on the gums, which are its primary support system.

“You also have to take them out and clean them every time you finish eating something, and yes, they have to come out at night because you can’t sleep in them,” Dr. Patel says. “But that wasn’t Shelly’s biggest complaint.

“When Shelly first came to me, she was saying, *I just can’t wear these things because they hurt my gums*. She also complained that they hurt the implants she has, and that’s because the implants are only there to retain the denture or hold it in place.

“The implants were not there to support the prosthesis, so the best alternative was to fit her with a *fixed implant-retained, implant-supported prosthesis* that stays in the mouth and places minimal pressure from chewing on the gums.”

Dr. Patel says this option is more representative of the way teeth naturally function and look, but it is also one that patients often pass on in an effort to save time and money when seeking a solution for missing teeth.

“In cases like this, proper planning, proper positioning of the implants and a full understanding of the patient’s tolerances are all critical to a positive outcome,” he says. “And when I say patient tolerances, I’m referring to a couple of things.

“One is finances because a patient will say, *I want this*, but when you tell them what this costs, they say, *Oh, I can’t afford*

*that, it’s too expensive*. So, then you go down the financial levels to find what they can afford.

“But you also have to determine whether the patient can tolerate those options. In this case, a lot of people would have easily adapted to what Shelly had. But she could not, so the overdenture was not the best option for her.”

### “He’s My Saviour”

Despite the overdenture not being the best option for her, Shelly was fit with it anyway. Dr. Patel says that’s not unusual. He says that at many dental implant practices, that has become the norm.

“You see a lot of advertisements for teeth in a day and things like that these days, but that doesn’t always work,” he says. “You can’t just offer one technique of putting teeth in a patient and then do that treatment for each and every patient who walks through your door looking for help.

“You have to evaluate each case individually to determine the best treatment for each patient. And Shelly is a good example of why. She went through this horrible ordeal wearing a prosthesis that didn’t work well for her, and she didn’t need to.”

She didn’t need to because there were other affordable options that could have been presented to her, including what Dr. Patel provided in finally resolving her situation, which was a *fixed-detachable or hybrid prosthesis*.

This option is different than the overdenture Shelly struggled with and is supported by the implants. It stays in the mouth at all times with the patient responsible for performing routine dental home care, but it can be removed by the dentist if needed for dental cleanings or repairs.

This option alleviated all the pain Shelly was feeling when she wore the overdenture and improved her convenience, as she no longer has to clean the prosthesis after every meal or take it out when sleeping.

“And I love them so, so much,” Shelly says of her new teeth. “I am so happy, so happy because that situation I went through with the other dentists, it just defeated me.

It really defeated me, but I’m coming out of it now thanks to Dr. Patel. Thanks to him, I’m eating anything I want again, and I’m not feeling any pain.

“And like I said, I could not be happier. Dr. Patel is such a nice man, and I couldn’t be happier with what he did for me. He is my savior.” ■

### Meet the DOCTOR

Jayraj Patel, DMD, FAGD, FAAID, DABOI/ID



earned his dental degree from the University of Florida College of Dentistry. His goal is to deliver comprehensive and compassionate care

to patients in a caring, comfortable and professional environment. He provides personalized and complete care using the latest technologies and treatment modalities with an aim to build long-term relationships with patients based on trust, respect and friendship. Driven by a deep passion to help patients, he is constantly pursuing advanced training through continuing education courses. He has extensive training in implant dentistry through the AAID MaxiCourse from Augusta University Dental College of Georgia and Comprehensive Implant Continuum from Implant Educators. He is certified to perform IV sedation in the dental office. He is a diplomate of the American Board of Oral Implantology/Implant Dentistry, a fellow of the American Academy of Implant Dentistry and Academy of General Dentistry.



**DeLand Implant Dentistry**  
JAYRAJ PATEL, DMD, FAGD, FAAID, DABOI/ID

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Dr. Jayraj Patel is known for his exceptional, caring attitude toward his patients and work. He is committed to delivering the most advanced, personalized dental care while offering patients a uniquely satisfying experience. Along with the staff of DeLand Implant Dentistry, he welcomes new patients and any questions concerning the range of services, which include cleanings, preventive care, sedation, and cosmetic, restorative, prosthetic and implant dentistry. For an appointment, call or visit the office.

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