

## Porcelain and Gold Bridges

### About the proposed treatment

Treatment involves preparing two or more exposed teeth for the bridge at or below the gumline so that they may retain a series of caps (*crowns*) which in turn support one or more false teeth (*pontics*). Bridges may also be used to restore or improve the appearance of damaged, discolored, misshapen or poorly spaced teeth.

Treatment involves two phases, including preparation of the teeth and completion of treatment. In preparing the teeth for a bridge, some of the teeth at or above the gumline is removed to create the foundation for the crowns that support the bridge.

Treatment is completed in several steps. A temporary bridge is often placed with a medicated temporary cement while the bridge is being created. Once a temporary bridge has been placed, it is essential to return to have the permanent bridge placed as soon as it is ready. Because a temporary bridge is not intended to function as well or for as long as a permanent bridge, failing to return promptly could lead to the deterioration of the temporary bridge, resulting in tooth decay, gum disease, infections and problems with your bite. A long delay could also mean that the permanent bridge may no longer fit well and the whole procedure will need to be repeated from the start.

At a later appointment the bridge is placed with a special dental cement. A bridge is placed permanently only once you have approved the size, shape and color of the restoration.

### Benefits and alternatives

The proposed treatment is intended to restore missing tooth or teeth and improve the appearance and strength of your remaining teeth by improving the way your bite fits together. Depending on your needs, an alternative treatment would include correcting your bite with orthodontic treatment by closing the gap left by the missing tooth or teeth. Other treatments may include implants (metal pins placed in the bone which would replace a tooth root) and removable prosthetics (partial dentures that are removed from the mouth during cleaning and at bedtime).

### Common risks

**1. Reaction to anesthesia:** To keep you comfortable while your teeth are being prepared, you will receive a local anesthetic. In rare instances patients have an allergic reaction to anesthetic, which may require emergency medical attention, or find that anesthesia reduces their ability to control swallowing, which increases the chance of swallowing foreign objects during treatment.

**2. Irritation to nerve tissue:** Preparing a tooth may irritate the nerve tissue (called the *pulp*) in the center of the tooth, leaving your tooth feeling sensitive to heat, cold or pressure. Treating such irritation may involve using special toothpastes or mouth rinses or possibly treating the pulp itself (called *endodontic* or *root canal treatment*).

**3. Stiff or sore jaw joint:** Holding your mouth open during treatment may temporarily leave your jaw feeling stiff and sore and may make it difficult for you to open your mouth wide for several days afterwards. Treatment also may leave the corners of your mouth red or cracked for several days.

**4. Changes to your bite:** A bridge may alter the way your bite fits together and make your jaw joint feel sore. This may require adjusting your bite by altering the biting surfaces of the bridge or adjacent teeth.

**5. Gum disease:** The lower edge of the crowns that support the bridge and the false tooth or teeth are usually designed to rest near the gumline, which may increase the chance of gum irritation, gum recession, infection or decay. Proper brushing and flossing at home, a healthy diet and regular professional cleanings are essential to helping prevent these problems. You will be shown how to properly care for your bridge, which requires special techniques and dental hygiene aids to keep the gums supporting teeth healthy.

**6. Porcelain damage:** Because porcelain is a brittle material, there is a risk that the *porcelain may break with heavy biting or hard food. Gold crowns and pontics (false teeth) would not as likely be damaged given the same circumstances.* In front teeth the risk of damage is lessened by the comparative decrease in force and grinding involved. This, when coupled with the increased importance of esthetics, makes the porcelain bridge the primary choice in front teeth. In back teeth, the choice of either gold or porcelain should be carefully weighed. Porcelain crowns and pontics on back teeth cannot usually be repaired and loss of some of the porcelain will affect its appearance and function. However, the underlying metal copings and substructure of a porcelain bridge will still continue to cover and protect the tooth. Normally it is recommended that with such damage, the bridge be replaced. In many cases where the teeth further back would be less visible, the back portion of the bridge is made to be gold while further forward, more esthetic porcelain crowns are used. This combination gold and porcelain bridge would have white gold or platinum instead of the usual gold.

**Consequences of not performing treatment**

If you do not have restorative treatment, existing problems caused by the position of your teeth could result in further discomfort and possible damage to your jaw joints. For teeth that have received root canal treatment, failure to place a crown could lead to pain, infection and possibly the premature loss of the tooth. Prolonged missing teeth could result in posterior bite collapse. Posterior bite collapse occurs when teeth around the space and the tooth or teeth that would normally bite the missing tooth or teeth move into the empty space. When this occurs, the teeth become misaligned resulting in a poor bite, crooked teeth, and an increased chance of decay and gum disease. This in turn could lead to more loss of teeth, pain and discomfort.

Every reasonable effort will be made to ensure that your condition is treated properly, although it is not possible to guarantee perfect results. By signing below, you acknowledge that you have received adequate information about the proposed treatment, that you understand this information, and that all of your questions have been answered fully. *You also assume the risks inherent in an all or partial porcelain bridge opposed to the preferred choice of an all gold bridge.*

**I give my consent for the proposed treatment as described above.**

**I refuse to give my consent for the proposed treatment as described above. I have been informed of the potential consequences of my decision to refuse treatment.**

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Patient's last name	Patient's first name	Patient's ID#
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Patient's signature	Date
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Dentist's signature	Date
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Witness's signature	Witness's name	Date
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