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IMPLANT CROWN • HOME CARE & MAINTENANCE

Your implant crown replaces the visible part of a missing tooth. Daily cleaning and regular professional maintenance help protect the gums, supporting bone and the components that hold your restoration in place.

1 Understand the components

The implant sits in the jawbone. An abutment connects it to the crown. Abutments are often titanium; materials vary.

Crowns may be screw-retained or cemented. Some crown-abutment units are combined. Ask about your design.

2 Clean gently, every day

Brush twice daily with a soft brush and fluoride toothpaste. Clean the gumline and between teeth daily using the floss, interdental brush or water flosser we recommend.

Ask us to demonstrate cleaning around your implant. Contours differ from natural teeth; technique depends on your design. Do not force floss or use sharp objects.

3 Check bite & cleaning access

Mild gum tenderness can follow crown placement, but should improve. Call if the bite feels high, biting hurts, food repeatedly traps, or floss cannot pass or shreds. Do not assume persistent pain or difficulty cleaning is normal. Bring night guards, retainers and aligners for a fit check. Do not force an appliance that no longer fits.

4 Protect the crown

Avoid ice, unpopped popcorn kernels and hard candy that can chip ceramic. Never use teeth as tools. Wear your prescribed night guard. Report chips, cracks or bite changes.

5 Loose crown? Call immediately

Call as soon as you notice rocking, clicking, movement or looseness, even if painless. This can happen weeks or years after placement. Avoid chewing on that side. Do not wiggle it, tighten it yourself or use glue. We must identify whether the crown, screw, abutment or implant is involved. If appropriate, we can tighten or replace a screw using the manufacturer's specified torque. Some problems require other repair or replacement.

6 If the crown or abutment comes off

Save all detached pieces in a clean container and call immediately for prompt assessment. Do not put loose parts back in your mouth or try to reattach them; they could be swallowed or inhaled. Gum tissue may change shape or grow into the space, making replacement harder if care is delayed. Prompt treatment may prevent added procedures. Surgery is not always needed.

7 No cavities, but gum disease risk

The implant and crown do not develop tooth decay, but surrounding gums and bone can become diseased. Peri-implant mucositis is gum inflammation; **peri-implantitis involves inflammation with loss of supporting bone.** Plaque buildup, prior gum disease, smoking and diabetes can increase risk.

Keep maintenance visits for gum, bite, stability and bone checks as indicated. Keep implant records; parts and tightening instructions vary by manufacturer.

QUESTIONS OR CONCERNS? PLEASE CALL THE OFFICE

Call immediately for a loose crown or detached parts. Also report bleeding, swelling, pus, foul taste or odor, gum recession, fever, persistent pain or trouble cleaning. Problems can develop without pain; keep routine maintenance visits.

Dr. Costella 415-453-0642

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Call 911: trouble breathing or swallowing, rapidly spreading face or neck swelling, severe allergic reaction, uncontrolled heavy bleeding, fainting, confusion or difficulty waking.