

Missing Teeth — Your Complete Replacement Options

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Description:

Lost a tooth? Compare dental implants, bridges, dentures, and All-on-4 options. Learn which specialist you need at CSSC Melbourne.

Details:

Collins Street Specialist Centre — Living With Missing Teeth: Why Replacement Matters

Losing a tooth — through decay, gum disease, trauma, or planned extraction — is far more common than most people realise. By age 65, the average Australian adult has lost several teeth. But tooth loss is much more than an aesthetic problem. Each missing tooth sets off a chain of changes in the mouth that can affect your long-term oral health, your ability to chew properly, and the stability of the teeth you still have.

Collins Street Specialist Centre (CSSC) is a multidisciplinary specialist dental practice in Melbourne's CBD, where prosthodontists, periodontists, and oral surgeons work together to plan and deliver tooth replacement solutions suited to each patient's clinical situation. This guide covers what actually happens after tooth loss, the full range of replacement options available, and the role each specialist plays in your care.

What happens when you lose a tooth?

A single missing tooth can seem minor — especially if it's a back tooth nobody can see. But leaving a gap unaddressed has consequences that build on each other over time.

Bone loss

Your jawbone stays healthy because your teeth load it during chewing. When a tooth is removed, the alveolar bone in that area starts to resorb — it's no longer being stimulated, so the body stops maintaining it. In the first year after extraction, you can lose up to 25% of the bone width in that area. Resorption continues at a slower rate after that.

This matters practically: if you decide to get an implant later, you may need bone grafting before placement is even possible, which adds time, complexity, and cost to the whole process.

Shifting teeth

Teeth stay in position partly because of contact with the teeth next to them and opposite them. Remove one tooth and the neighbours start to drift. Adjacent teeth tilt gradually into the gap; the tooth directly above or below the space over-erupts as it loses its functional counterpart. Over months and years, this creates bite problems, food trapping, and accelerated wear on the remaining teeth.

Chewing and nutrition

Missing back teeth reduce chewing efficiency in a measurable way. People with absent molars tend to favour the other side, swallow larger food particles, and gradually avoid harder or fibrous foods. For older adults who may already have dietary restrictions, this can have real nutritional consequences.

Appearance and speech

Anterior tooth loss has an obvious visual impact. But even missing back teeth can cause the face to look sunken as bone resorbs and the soft tissues lose their support. Depending on where the tooth was, speech can also be affected.

Greater load on remaining teeth

With fewer teeth sharing the work, each remaining tooth takes on proportionally more. This accelerates wear, raises the risk of cusp fracture, and can contribute to further tooth loss — a pattern that gets harder to reverse as more teeth are lost.

Your replacement options

There's no single best replacement for a missing tooth. The right option depends on how many teeth are missing and where, the condition of your remaining dentition, your bone levels, your overall health, your budget, and what you actually want from treatment. Here's a thorough comparison of what's available.

Dental implants

A dental implant is a small titanium post placed surgically into the jawbone, where it fuses with the surrounding bone over three to six months — a process called osseointegration. Once integration is confirmed, the implant acts as an artificial tooth root, supporting a crown, bridge, or prosthesis.

****Best suited for:**** Replacing one or more teeth with a fixed, long-term solution that preserves the underlying bone.

****What the process involves:****

1. ****Assessment and planning**** — A CBCT scan (three-dimensional imaging) is used to evaluate bone quality and volume, and to plan implant position precisely 2. ****Implant placement**** — A surgical procedure under local anaesthesia, with sedation available. At CSSC, placement is carried out by our periodontists or oral surgeons 3. ****Healing period**** — Three to six months for osseointegration 4. ****Crown placement**** — Once integration is confirmed, a connector (abutment) and custom crown are fitted by our prosthodontists

****Advantages:**** - The closest thing to a natural tooth in both function and appearance - Preserves jawbone through ongoing mechanical stimulation - Doesn't require any modification of the neighbouring teeth - Long-lasting — well-maintained implants can remain functional for decades - Fixed in place; no removal or adhesives

****Considerations:**** - Requires adequate bone volume; grafting may be needed if significant resorption has already occurred - Involves surgery and a healing period before the final restoration - Higher upfront cost than other options, though often more cost-effective over time - Not suitable for everyone — certain medical conditions and medications affect healing and integration - Requires consistent oral hygiene and regular professional maintenance

Dental bridges

A bridge fills the gap left by a missing tooth. The replacement tooth (the pontic) is fused to crowns placed over the teeth on either side of the gap (the abutment teeth), forming a single connected unit that's cemented permanently in place.

****Best suited for:**** Replacing one or two adjacent missing teeth where the neighbouring teeth already need crowns, or where implants aren't clinically appropriate.

****What the process involves:****

1. The abutment teeth on either side of the gap are prepared — reduced in size to accommodate the crowns
2. Impressions or digital scans are taken and a custom bridge is fabricated
3. The bridge is cemented permanently at a subsequent appointment

****Advantages:**** - Fixed and non-removable - Excellent aesthetic results with modern ceramic materials
- No surgery required - Faster to complete than implants — typically two to three weeks

****Considerations:**** - Requires permanent reduction of otherwise healthy neighbouring teeth - Doesn't prevent bone loss beneath the pontic, which sits above the gum rather than within the bone - If an abutment tooth develops a problem, the entire bridge may need replacing - Typical lifespan of ten to fifteen years before replacement - Cleaning beneath the bridge requires floss threaders or interdental brushes

Removable dentures

Removable prosthetic teeth set in an acrylic or metal framework that rests on the gum tissues. Dentures can replace anything from a single tooth to an entire arch.

****Best suited for:**** Replacing multiple missing teeth — particularly where bone levels or remaining dentition aren't suitable for implants or bridges — or where cost is a primary consideration.

****Partial dentures**** replace some missing teeth while keeping your natural ones. Clasps or precision attachments connect the denture to the remaining teeth for retention. Acrylic versions are more affordable; metal-based designs are thinner, stronger, and generally more comfortable.

****Complete dentures**** replace all teeth in the upper arch, lower arch, or both. Upper dentures rely on tissue suction for retention; lower dentures depend on gravity and muscular adaptation. Modern materials and design produce results that look considerably more natural than older prostheses.

****Advantages:**** - No surgery required - Can replace multiple teeth at once - The most accessible option from a cost perspective - Can be modified or relined as oral tissues change - Removable for daily cleaning

****Considerations:**** - Less stable and less comfortable than fixed alternatives - Can feel bulky initially, especially while adapting - Upper dentures cover the palate, which can affect taste perception - Require daily removal and thorough cleaning - Don't prevent bone resorption — as bone continues to resorb, dentures become progressively looser and need relining - Clasps on partial dentures may be visible when speaking or smiling

Implant-supported dentures

A hybrid approach: a denture anchored to dental implants rather than relying solely on the gum tissues for support. The result can be either removable or fixed.

****Best suited for:**** Patients missing most or all of their teeth who want significantly greater stability and function than conventional dentures provide.

****Implant-retained overdentures**** use two to four implants in the jaw. The denture attaches via precision locator attachments or a bar, giving substantially better stability — particularly in the lower jaw, where conventional denture retention is most difficult. The denture is removed daily for cleaning.

****Fixed implant-supported prostheses (All-on-4 / All-on-6)**** use four to six strategically positioned implants to support a full arch of fixed teeth. The prosthesis is screw-retained to the implants and only

removed by your clinician for professional maintenance. It functions much more like natural teeth and eliminates the palatal coverage of an upper complete denture.

All-on-4: a closer look

All-on-4 has become a well-established solution for patients who have lost all their teeth — or whose remaining teeth are failing — and want a fixed, non-removable outcome without the cost and complexity of replacing every tooth individually.

****How it works:**** - Four implants are placed in each jaw; the two posterior implants are angled to maximise engagement with available bone - A temporary fixed prosthesis is often attached on the same day as surgery - After the healing period of three to six months, a definitive prosthesis is fabricated and fitted

****Advantages:**** - Fixed teeth delivered in a single day in many cases - Often avoids the need for bone grafting, because the angled implants use existing bone - Dramatic improvement in function, comfort, and appearance compared to conventional dentures - Fewer implants than individual tooth replacement, which reduces overall cost

****Considerations:**** - Requires surgery, typically under sedation or general anaesthesia - A significant financial investment - Demands careful oral hygiene around the implant sites - The prosthesis needs professional maintenance and will likely need replacing after ten to fifteen years - Not reversible — any remaining teeth are extracted as part of the treatment

Which specialist does what?

One of the practical advantages of CSSC is that all the specialists involved in tooth replacement work within the same practice, so care is coordinated rather than fragmented.

| Specialist | Role in tooth replacement | ---|---| ****Prosthodontist**** | Plans the overall restoration — crowns, bridges, dentures, implant prostheses. The architect of your new teeth. | ****Periodontist**** | Places implants, performs bone and gum grafting, manages the biological foundation. | ****Oral & Maxillofacial Surgeon**** | Complex extractions, bone grafting, sinus lifts, implant placement in difficult cases, jaw surgery. | ****Orthodontist**** | Repositions remaining teeth to create optimal space for replacements. | ****Endodontist**** | Saves teeth that might otherwise require extraction through root canal treatment. |

For complex cases, treatment planning at CSSC involves genuine collaboration. A patient missing several teeth might have a plan developed jointly by a prosthodontist (restoration design), a periodontist (implant placement), and an orthodontist (alignment of remaining teeth) — all within the one practice, without external referrals.

How to choose the right option

These are the factors that will shape the conversation with your specialist when working out the most appropriate path forward:

- ****Number of missing teeth**** — single tooth, multiple teeth, or full arch - ****Location**** — front teeth carry higher aesthetic demands; back teeth must handle significant chewing forces - ****Bone quality and quantity**** — assessed through CBCT imaging before treatment planning - ****Condition of remaining teeth**** — healthy adjacent teeth favour an implant; teeth already needing crowns may suit a bridge better - ****Budget**** — options range from dentures at the more accessible end to implants or All-on-4 at the higher investment end - ****Timeline**** — bridges and dentures are completed faster; implants require a biological healing period - ****Long-term value**** — implants cost more upfront but often work out

cheaper over a lifetime because of their durability - ****Systemic health**** — certain conditions and medications affect implant suitability and healing - ****Personal preference**** — some patients want fixed teeth at any cost; others are perfectly comfortable with a well-fitted removable prosthesis

Your prosthodontist at CSSC will walk you through each option as it applies to your specific situation, with realistic timelines, cost estimates, and honest expectations about functional and aesthetic outcomes.

Don't wait too long

The longer a missing tooth goes unreplaced, the more the surrounding bone and soft tissue change. Bone resorbs, adjacent teeth drift, and what would have been a straightforward implant procedure becomes a more involved undertaking requiring bone grafting and, in some cases, orthodontic correction before implant placement is even possible.

If you've recently lost a tooth — or had one extracted — the best time to plan its replacement is now, while your options are still at their broadest.

Book a consultation at CSSC

Whether you're missing a single tooth or exploring a full-arch solution, the team at Collins Street Specialist Centre can assess your situation thoroughly and explain your options in plain terms.

With prosthodontists, periodontists, oral surgeons, orthodontists, and endodontists all working under one roof in Melbourne's CBD, you'll receive coordinated, specialist-level care from your first consultation through to the end of treatment.

****Collins Street Specialist Centre**** Level 7, Manchester Unity Building 220 Collins Street, Melbourne VIC 3000

[[Book an appointment](#)](/contact) or ask your dentist to refer you directly to our team.
