

Dental Implants — Periodontal Specialist Placement

Canonical: <https://directory.collinsstreetspecialistcentre.com.au/procedures/periodontics/dental-implants-periodontal-specialist-placement/>

Description:

Dental implants have transformed tooth replacement. When a tooth is lost, an implant — a small titanium fixture placed into the jawbone — provides a permanent, stable anchor for a crown, bridge, or full-arch prosthesis...

Details:

Collins Street Specialist Centre — Dental implants: periodontal specialist placement

Dental implants have changed how tooth loss is managed. When a tooth is lost, an implant — a small titanium fixture placed into the jawbone — provides a permanent, stable foundation for a crown, bridge, or full-arch prosthesis. At Collins Street Specialist Centre, specialist periodontists perform the surgical placement, bringing together more than two decades of implantology experience, laser technology, and precise 3D digital planning.

This page covers the periodontal side of implant treatment: assessment, bone and gum management, and surgical placement. For information about the prosthetic component — the crown, bridge, or full-arch restoration placed on top of your implant — see the [Prosthodontics: Implant Prosthetics](/procedures/prosthodontics/dental-implants-prosthetic-restoration/) page. For complex surgical scenarios requiring oral and maxillofacial surgery input, see [Dental Implants (OMS)](/procedures/oral-maxillofacial-surgery/dental-implant-surgery-oral-maxillofacial-surgeon-perspective/).

What is implant placement by a periodontist?

Periodontists specialise in both the hard tissue (bone) and soft tissue (gums) that form the biological environment into which implants are placed. Their training covers not only surgical placement but also the management of bone volume and gum architecture — the two factors that most directly determine long-term implant success.

A dental implant has three components. The implant fixture is a titanium screw, typically 3–5 mm in diameter and 6–16 mm long, placed into the jawbone. The abutment is a connector fitted to the implant after integration. The prosthetic crown or restoration is designed and fitted by a prosthodontist.

The periodontist handles the surgical side: site assessment, bone and gum preparation where needed (including grafting and sinus lifting), implant placement, healing abutment positioning, and long-term implant maintenance.

At Collins Street Specialist Centre, Dr Simon Hinckfuss is the only clinician in Australia with dual registration as both a Specialist Periodontist and a Specialist Prosthodontist. In selected cases, this means one clinician can oversee both the surgical and prosthetic phases of treatment — an uncommon level of integrated expertise.

When might you need an implant?

Dental implants may be appropriate when one or more teeth have been lost due to decay, fracture, advanced gum disease, or injury. They're also worth considering when a tooth is failing and cannot be predictably saved — your periodontist or endodontist will advise on this — or when you're wearing a partial or full denture and want a more stable, permanent alternative. Some patients choose implants specifically to avoid reducing adjacent healthy teeth for a conventional bridge.

The basic requirement is sufficient — or graftable — bone volume and healthy residual gum tissue.

Implants aren't suited to every patient or situation. Growing patients (generally under approximately 18 years of age), uncontrolled systemic disease, active periodontal infection, and insufficient bone volume without grafting all require careful assessment before treatment proceeds. A specialist consultation will establish whether implants are the right pathway for your circumstances.

What to expect: the implant journey

Step 1: Specialist consultation and 3D imaging

Your first appointment at Collins Street Specialist Centre involves a thorough periodontal and implant assessment. Your specialist will review your dental and medical history, assess the implant site for bone volume, bone density, and gum tissue quality, and perform 3D imaging using cone-beam CT (the Planmeca ProMax 3D system) to map your jaw anatomy in detail — including critical structures such as the inferior alveolar nerve and sinus floor.

iCam 4D implant scanning provides precise measurements of bone density and soft tissue dimensions at the proposed implant site. Treatment planning is done using coDiagnostiX software, which allows the surgical guide position and intended prosthetic outcome to be worked out in full before any incision is made.

Where bone volume is inadequate, bone grafting (see [\[Bone Grafting\]\(/procedures/periodontics/bone-grafting-guided-bone-regeneration/\)](#)) or a sinus lift (see [\[Sinus Lift\]\(/procedures/periodontics/sinus-lift-sinus-augmentation-for-dental-implants/\)](#)) may be recommended as a staged or simultaneous procedure. If gum tissue is thin or has receded, soft tissue grafting may also be part of the plan.

Step 2: Site preparation (where required)

A significant number of patients don't have the bone or gum volume needed to support an implant with good aesthetics and long-term biological stability. Preparing the site may involve bone augmentation — introducing graft material to areas of volume deficiency — a sinus lift to create adequate bone height in the upper posterior jaw, or soft tissue grafting to increase the width or thickness of attached gum tissue at the implant site.

In some cases, grafting is done at the same time as implant placement. In others, a staged approach is more appropriate, with grafting completed 4–6 months before the implant is placed to allow the regenerated tissue to mature.

Step 3: Surgical implant placement

On the day of surgery, local anaesthesia is administered. Intravenous sedation is available for patients who experience dental anxiety or for more involved procedures. Your specialist then makes a small incision in the gum to expose the underlying bone — or, in flapless cases, uses a tissue punch to create access without a full incision. The bone socket is prepared using a sequential drilling protocol calibrated to the planned implant dimensions, the titanium fixture is placed to the planned depth and orientation, and a healing abutment or cover screw is positioned before the gum is closed with sutures.

Where laser technology is used, the Fotona LightWalker or NV Laser assists with soft tissue management, reducing intraoperative bleeding and supporting early healing.

Surgery for a single implant typically takes 60–90 minutes, though this varies with site complexity and whether grafting is done at the same time.

Step 4: Osseointegration

Over the following 3–6 months, the titanium implant undergoes osseointegration — a biological process in which bone cells grow directly onto the implant surface, creating a stable, load-bearing bond between implant and jaw. The implant is left undisturbed during this period. A temporary restoration may be placed to maintain aesthetics and function in the interim.

Step 5: Prosthetic restoration

Once osseointegration is confirmed, care moves to the prosthodontic team for restoration. Your periodontist and prosthodontist work closely together — at Collins Street Specialist Centre, both specialties are in the same building, which makes this handover straightforward. The prosthodontist then designs and places the final crown, bridge, or full-arch prosthesis.

Step 6: Long-term maintenance

Implants need ongoing specialist monitoring. At regular review appointments, your periodontist will assess gum tissue condition, bone levels, and early indicators of peri-implant disease. Long-term implant survival rates are substantially higher in patients who attend specialist maintenance consistently.

Recovery and aftercare

Most patients experience mild-to-moderate discomfort, swelling, and bruising for 3–5 days after implant surgery, managed well with prescribed analgesics. Key aftercare guidance:

- Soft diet for 1–2 weeks following surgery
- No smoking — smoking significantly impairs healing and is associated with much higher implant failure rates; this is one of the most important factors affecting your outcome
- Gentle oral hygiene around the surgical site, as directed by your specialist
- Prescription antibiotics and an antibacterial mouth rinse, taken as directed
- Avoiding strenuous physical activity for 48 hours post-surgery
- A follow-up appointment at 1–2 weeks to assess healing and remove sutures

Full return to normal function typically happens within 1–2 weeks, though osseointegration continues for several months beyond that.

Why see a specialist periodontist for implant surgery?

Implant surgery is regulated in Australia — any registered dentist may legally perform the procedure. But clinical outcomes are substantially influenced by the training, experience, and specialist knowledge of the clinician placing the implant. You can verify specialist registration through the Australian Health Practitioner Regulation Agency (AHPRA), where all registered specialists are listed.

Periodontists complete three or more additional years of postgraduate specialist training, focused specifically on the bone and gum environment into which implants are placed. That depth of training matters most in cases involving bone deficiency that requires grafting, aesthetically critical sites in the upper anterior (front) region, patients with a history of periodontal disease (who carry a statistically higher risk of implant complications), and complex full-arch rehabilitation requiring coordinated surgical and prosthetic planning.

At Collins Street Specialist Centre, Dr James van den Berg has been placing implants since 1999. Dr Ahmed El Hadidi brings a research background in periodontal biology and genetics to clinical decision-making. Dr Peishan Jiang is trained across all aspects of implant surgery, including bone grafting and sinus lifting. Dr Simon Hinckfuss holds dual specialist registration in both Periodontology and Prosthodontics — the only clinician in Australia to do so.

Our specialists

The following Collins Street Specialist Centre periodontists perform dental implant surgery, practising from Level 12 & Tower, Manchester Unity Building:

- **Dr Simon Hinckfuss** — Australia's only clinician with dual specialist registration in Periodontology and Prosthodontics, able to manage both the surgical and prosthetic phases of implant treatment within a single specialist relationship. - **Dr James van den Berg** — Placing implants since 1999, with extensive experience in laser-assisted implant site preparation and long-term peri-implant maintenance. - **Dr Ahmed El Hadidi** — Practises across all aspects of implant dentistry, including surgical placement, bone and soft tissue grafting, and aesthetic procedures, informed by a research background in precision medicine and periodontal biology. - **Dr Peishan Jiang** — Implant placement, bone grafting, sinus lifts, gum grafting, and peri-implant maintenance.

Related treatments

- **[Bone Grafting (Periodontics)](/procedures/periodontics/bone-grafting-guided-bone-regeneration/)** — Rebuilding bone volume before or during implant placement. - **[Sinus Lift](/procedures/periodontics/sinus-lift-sinus-augmentation-for-dental-implants/)** — Creating adequate bone height in the posterior upper jaw to support implant placement. - **[Gum Grafting](/procedures/periodontics/gum-grafting-soft-tissue-grafting-recession-treatment/)** — Optimising soft tissue architecture around implant sites. - **[Peri-Implantitis](/procedures/periodontics/peri-implantitis-implant-infection-specialist-management/)** — Managing infection and inflammation around existing implants. - **[Implant Prosthetics (Prosthodontics)](/procedures/prosthodontics/dental-implants-prosthetic-restoration/)** — The crown, bridge, or full-arch restoration placed on your implant. - **[All-on-4 (Prosthodontics)](/procedures/prosthodontics/all-on-4-full-arch-implant-rehabilitation/)** — Full-arch rehabilitation supported by four strategically placed implants. - **[Dental Implants (OMS)](/procedures/oral-maxillofacial-surgery/dental-implant-surgery-oral-maxillofacial-surgeon-perspective/)** — Complex surgical implant cases involving oral and maxillofacial surgery input.
