

Dental Implants — Periodontal Specialist Placement

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Dental Implants — Periodontal Specialist Placement

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. At Collins Street Specialist Centre, the surgical placement of dental implants is performed by specialist periodontists who combine over two decades of implantology experience with advanced laser technology and precise 3D digital planning.

This page focuses on the periodontal dimension 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](/prosthodontics/dental-implants-prostho/) page. For complex surgical scenarios requiring oral and maxillofacial surgery input, see [Dental Implants (OMS)](/oral-maxillofacial-surgery/dental-implants-oms/).

What Is Implant Placement by a Periodontist?

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

A dental implant consists of three components: 1. **The implant fixture** — a titanium screw, typically 3–5 mm in diameter and 6–16 mm long, placed into the jawbone. 2. **The abutment** — a connector fitted to the implant after integration. 3. **The prosthetic crown or restoration** — designed and fitted by a prosthodontist.

The periodontist manages the surgical aspects: site assessment, bone and gum preparation if required (grafting, sinus lifting), implant placement, healing abutment placement, and long-term implant maintenance.

At CSSC, one of our periodontists, Dr Simon Hinckfuss, is the only clinician in Australia holding dual registration as both a Specialist Periodontist and a Specialist Prosthodontist — meaning that in selected cases, a single clinician can manage both the surgical and prosthetic phases of implant treatment.

When Might You Need an Implant?

Dental implants may be appropriate when:

- One or more teeth have been lost to decay, fracture, advanced gum disease, or injury - A tooth is failing and cannot be predictably saved (your periodontist or endodontist will advise on this) - You are wearing a partial or full denture and seeking a more stable, permanent alternative - You are missing teeth and wish to avoid grinding down adjacent healthy teeth for a bridge - You have sufficient (or graftable) bone volume and healthy residual gum tissue

Implants are not suitable for everyone. Growing patients (under approximately 18), uncontrolled systemic disease, active periodontal infection, and insufficient bone volume without grafting are all factors that require assessment. A thorough consultation will determine whether implants are appropriate for your situation.

What to Expect: The Implant Journey

Step 1: Specialist Consultation and 3D Imaging

Your journey begins with a comprehensive periodontal and implant assessment. Your specialist will:

- Review your dental and medical history - Assess the site of missing teeth for bone volume, bone density, and gum tissue quality - Perform 3D imaging using cone-beam CT (our Planmeca ProMax 3D imaging) to generate a precise, three-dimensional map of your jaw anatomy, including critical structures such as the inferior alveolar nerve and sinus floor - Use **iCam 4D implant scanning** for precise measurement of bone density and soft tissue dimensions at the implant site - Develop a digital treatment plan using coDiagnostiX software, which allows the surgical guide position and prosthetic outcome to be planned before a single incision is made

If bone volume is inadequate, bone grafting (see [\[Bone Grafting\]](#)(/periodontics/bone-grafting-perio/)) or a sinus lift (see [\[Sinus Lift\]](#)(/periodontics/sinus-lift/)) may be recommended as a staged or simultaneous procedure. If gum tissue is thin or receded, soft tissue grafting may also be required.

Step 2: Site Preparation (Where Required)

Many patients present without the bone or gum volume needed to support an implant with ideal aesthetics and long-term stability. Preparing the site may involve:

- **Bone augmentation** — adding bone graft material to areas of volume deficiency - **Sinus lift** — elevating the sinus membrane to create bone height in the upper back jaw - **Soft tissue grafting** — increasing the width or thickness of attached gum tissue at the implant site

In some cases, grafting is performed simultaneously with implant placement. In others, a staged approach is more appropriate, with grafting performed 4–6 months before implant placement.

Step 3: Surgical Implant Placement

On the day of surgery, local anaesthesia is administered. Intravenous sedation is available for anxious patients or for more complex procedures. Your specialist then:

- Makes a small incision in the gum to expose the bone (or, in flapless cases, uses a tissue punch to create access without a full incision) - Prepares the bone socket using a sequential drilling protocol - Places the titanium implant fixture to the planned depth and orientation - Positions a healing abutment or cover screw, then closes the gum with sutures

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

Surgery typically takes 60–90 minutes for a single implant, though this varies with site complexity and whether grafting is performed simultaneously.

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. During this period, the implant is left undisturbed. A temporary restoration may be placed to maintain aesthetics.

Step 5: Prosthetic Restoration

Once osseointegration is confirmed, your care transitions to the prosthodontic team for restoration. Your periodontist and prosthodontist work in close coordination — at CSSC, both specialties are based in the same building, making this handover seamless. The prosthodontist designs and places the final crown, bridge, or full-arch prosthesis.

Step 6: Long-Term Maintenance

Implants require ongoing maintenance. Your periodontist will monitor the biological health of the implant — gum tissue, bone levels, and early signs of peri-implant disease — at regular review appointments. Long-term implant survival is significantly higher in patients who attend specialist maintenance.

Recovery and Aftercare

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

- **Soft diet** for 1–2 weeks - **No smoking** — smoking significantly impairs healing and is associated with markedly higher implant failure rates - Gentle oral hygiene around the surgical site - Prescription antibiotics and an antibacterial mouth rinse as directed - Avoid strenuous exercise for 48 hours - Follow-up appointment at 1–2 weeks to assess healing and remove sutures

Full return to normal function typically occurs within 1–2 weeks, though the implant continues integrating for several months.

Why See a Specialist Periodontist for Implant Surgery?

Implant surgery is regulated in Australia — any registered dentist may legally perform the procedure. However, the outcomes of implant treatment are substantially influenced by the training and experience of the clinician placing the implant.

Periodontists complete three or more additional years of postgraduate training specifically focused on the bone and gum environment into which implants are placed. This specialist knowledge is particularly

valuable for:

- Cases involving bone deficiency requiring grafting - Aesthetically critical sites in the upper front teeth - Patients with a history of periodontal disease (who carry higher risk for implant complications) - Complex full-arch rehabilitation

Dr James van den Berg has been placing implants since 1999. Dr Ahmed El Hadidi brings a precision medicine approach informed by genetic research. Dr Peishan Jiang is trained in all aspects of implant surgery including bone grafting and sinus lifting. Dr Simon Hinckfuss holds the unique distinction of dual specialist registration in both Periodontology and Prosthodontics.

Our Specialists

The following CSSC periodontists perform dental implant surgery, operating from Level 12 & Tower, Manchester Unity Building:

- **Dr Simon Hinckfuss** — Australia's only clinician holding dual specialist registration in Periodontology and Prosthodontics. Uniquely positioned to manage both surgical and prosthetic phases of implant treatment.
- **Dr James van den Berg** — Specialist implantologist since 1999, with extensive experience in laser-assisted implant site preparation and peri-implant maintenance.
- **Dr Ahmed El Hadidi** — All aspects of implant dentistry including surgical placement, bone and soft tissue grafting, and aesthetic procedures. 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)** — Rebuilding bone volume before or during implant placement.
- **Sinus Lift** — Creating bone height in the posterior upper jaw for implant placement.
- **Gum Grafting** — Optimising soft tissue around implant sites.
- **Peri-Implantitis** — Managing infection around existing implants.
- **Implant Prosthetics (Prosthodontics)** — The crown, bridge, or full-arch restoration placed on your implant.
- **All-on-4 (Prosthodontics)** — Full arch rehabilitation with four implants.
- **Dental Implants (OMS)** — Complex surgical implant cases involving oral and maxillofacial surgery.