



30 August 2016

## Recommendation by the Council for Choices in Health Care in Finland (COHERE Finland): Implant-retained total prosthesis for the treatment of edentulous mandible

	<b>Recommendation clause</b>	The treatment of an edentulous mandible with a total prosthesis retained with two implants belongs to the publicly funded service choices in health care in Finland when the patient's ability to eat, speak or engage in other social interaction is impaired due to the instability or unsuitability of a total mandibular prosthesis.
Grounds	<b>Seriousness of the health issue</b>	Edentulousness affects nourishment, clarity of speech and social interactions. Poor nutrition makes people susceptible to many diseases and deteriorated constitution, which is emphasised in older age.
	<b>Impact</b>	The use of prostheses improves nourishment. Some users of detachable total prostheses have difficulties with the stability of the prosthesis. Implant-retained total prostheses have been found to significantly improve the patients' ability to chew and improve the patients' perceived quality of life when compared to detachable total prostheses.
	<b>Safety</b>	Implants have been used for over 30 years, and no significant health risks are involved. For each patient, a medical assessment of suitable methods of treatment and the treatment itself is carried out when it is possible and sensible taking into account the patient's illnesses, medication and functional capacity.
	<b>Cost</b>	In 2016, the production costs of a total mandibular prosthesis retained with two implants were EUR 2800–4000. Costs vary depending on e.g. used techniques and materials. With the current customer payment regulations, the share financed from public funds is about EUR 2150 for treatment provided at health centres and about EUR 250 for treatment provided by private service providers. The remaining production costs will remain to be paid by the patient. With prosthetic treatment, the patient always pays for the prosthesis and the dental laboratory costs, and, in most municipalities, the implant materials. Therefore, the patient will have to pay EUR 650–1850 for the treatment in public healthcare and EUR 2550–3750 for the treatment in private care.  There are no available statistics on the number of people aged 45 to 79 who experience problems with the instability or unsuitability of a total mandibular prosthesis. The maximum number of people who would benefit from an implant-retained mandibular prosthesis has been estimated at 18,000–27,000, based partially on research information and partially on expert experiences. However, based on experience, not all of them would like to have an implant-retained prosthesis. Taking into account the useful life of prostheses (usually 10 years) and the current personnel resources, treatment with implant-retained prostheses according to this recommendation would be performed on approximately 3000 patients every year. The annual funding to be paid from public funds is then about EUR 6.45 million.  When the current accumulated need for care has been met, the number of people requiring implant-retained prostheses will be significantly smaller due to the decrease in edentulousness.
	<b>Ethical viewpoints</b>	Patient equality is not realised with regard to the availability of prostheses or the financial possibilities of acquiring the prostheses. Teeth have a great effect on speech and other social interaction.
	<b>Procedure codes</b> (National healthcare classification of surgical procedures*, year 2016)	The manufacturing and installation process of implant-retained total prostheses can be described with the combined classifications of surgical procedures* ECW05+SPD10 or EBB10+EBB11+SPD10:  ECW05 Insertion of mini implant or screw, limited (1–2 implants) EBB10 Insertion of dental implant EBB11 Insertion of additional dental implant SPD10 Fitting and preparation of partial total prosthesis of teeth attached with implants
	<b>Background information and references</b>	More detailed justification and reference information can be found in the background memo: "Implanttiinnytteenen kokoproteesi alaleuan hampaattomuuden hoidossa"



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