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Comparative Characteristics of Methods for Constructing Complete Removable Denture

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Abstract. Study of removable dentures designs and features of occlusal relationships, taking into account the current level of development of gnat ology.

Key words: gnat ology, acrylic prostheses, complete removable denture, vomiting reflex, arch, dental implants,

Introduction.

Dentures (also known as false teeth) are prosthetic devices constructed to replace missing teeth, and are supported by the surrounding soft and hard tissues of the oral cavity. Conventional dentures are removable (removable partial denture or complete denture). However, there are many denture designs, some which rely on bonding or clasping onto teeth or dental implants (fixed prosthodontics). There are two main categories of dentures, the distinction being whether they are used to replace missing teeth on the mandibular arch or on the maxillary arch.

A complete denture (also known as a full denture, false teeth or plate) is a removable appliance used when all teeth within a jaw have been lost and need to be prosthetic ally replaced. In contrast to a partial denture, a complete denture is constructed when there are no more teeth left in an arch, hence it is an exclusively tissue-supported prosthesis. A complete denture can be opposed by natural dentition, a partial or complete denture, fixed appliances or, sometimes, soft tissues.

Complete dentures are prone to a variety of displacing forces of differing magnitude as they are resting on oral mucosa and are in close proximity with tissues that are constantly changing due to the action of muscles. Consequently, for complete dentures to be retentive and stable, the retentive forces that hold the dentures in place must be greater than the ones aiming to displace it. Obtaining maximum stability and retention is one of the biggest challenges in full denture construction.

Most doctors and dental technicians do not know how to use modern articulation system plastering models in an occlude, placing teeth on glass and other outdated principles for designing dentitions in complete removable dentures lead to countless corrections of occlusal surfaces and bases, their relocation, alteration and refusals of patients to use such constructions. The presence of clinical and laboratory stages of the manufacture of complete removable dentures, a variety of proposals and methods indicate the difficulty and unresolved problem.

Thus, the study of issues related to the design of complete removable dentures in accordance with the current level of development of gnat ology, allowing to take into account the natural movements of the lower jaw, seems relevant to us.

One of the most budget options for restoring the dentition. Acrylic plastic dentures are aesthetic the color of the artificial gum is selected individually. The undoubted advantage of an acrylic prosthesis is a simple repair in case of breakage. The most common reason for a structure split is a fall on the tile in the bathroom-dentures require careful operation and storage.

The load on the jaw when wearing acrylic prostheses is distributed evenly. However, acrylic dentures do have disadvantages. A complete prosthesis closes the palate, which does not allow the patient to fully feel the taste of food often such prostheses provoke vomiting reflex and diction disorders, which causes inconvenience in the process of adaptation.

Acrylic can provoke an allergic reaction, which narrows the scope. When choosing this option of prosthetics, we recommend consulting with an allergist.

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When wearing an acrylic prosthesis, you will have to give up solid food and smokers need to give up a bad habit. The material absorbs odors, which are not easy to remove. The prosthesis requires careful hygiene. The porous structure of acrylic gets dirty quickly. The undoubted advantage of complete removable dentures is the price. The cost of these products is significantly lower than with prosthetics on implants.

In addition, removable dentures have practically no contraindications, with the exception of an allergic reaction. Designs are universal and suitable for almost all patients.

The disadvantages include the gradual loss of bone tissue under the prosthesis. Unfortunately, this process cannot be stopped due to the load on the jaw.

Of course, the disadvantage of dentures is the inconvenience that patients face during their operation: dietary restrictions, food jams, problems with diction.

Conclusion:

When we doctors achieve effective suction of maxillary and mandibular dentures, our patients are satisfied and our work brings us great satisfaction.

However, effective suction does not solve all the problems that specialists face in the process of making complete removable dentures. Only one of the components of successful prosthetics.

In addition to simple cases, there are also complex ones, when for treatment it is necessary to take into account the features of occlusion, problems with the position of the jaws, gums, the movement of prostheses in three planes during chewing, technical problems in the manufacture of prostheses, salivation and many other aspects.

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