Instructions Given During Insertion of Complete Denture

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Dental prosthesis

Dental prosthesis is an artificial replacement of one or more teeth and associated dental/alveolar structures. And the prosthesis either fixed that is cemented on the abutment teeth, or removable which can be removed from the mouth and replaced at will. The removable denture is either partial or complete denture [1].

Complete Denture (C.D)

Complete Denture (C.D) is a removable dental prosthesis that replaces the entire dentition and associated structures of the maxilla or mandible. It needs five visits to the clinic and the last one is the visit of construction of C.D. that should include many instructions [2].

Objectives of Complete denture

- Restoration of the function of mastication
- Restoration of the distributed facial dimensions and contours (esthetics)
- Preservations of the remaining tissues in health
- Satisfaction, pleasing and comfort of the patients
- Correction of speech due to loss of natural teeth

Instructions given to the patient

- Limitation of the dentures: It is mechanical substitutes for oral living tissue. Individuality of a patient, not compares him to other persons, and educates the patient to the fact that every mouth is different.
- Remove dentures from mouth at night: The patient should remove the denture at night because the denture will exert excessive pressure on the bone of both maxilla and mandible which lead to increase the rate of resorption of the bone that will lead to flat ridge and consequently loss of retention and stability.
- Expected tissue response: Such as increase saliva at the time of insertion because the C.D. is consider a strange things, but this with time will decrease gradually [2,3].
- Appearance and C.D: Patient must understand their appearance will become more natural with time, strange bulky muscle tension will improve after the patient relax and more confident. If the patient is unhappy with their appearance occasionally the anterior teeth must be changed.
- Evaluating the denture esthetic: This is done by evaluating the patient lip support, high lip line, low lip line. These factors are usually examined thoroughly during try-in stage, simple verification would be sufficient.
- Speaking with Complete denture: The problem of speaking will disappear and the tongue adapt within a few weeks. Patient could be advised to read aloud and repeat words or phrases that are difficult to pronounce which contain letters such as "s", "sh", so the patient should read the newspaper out loud or “talk back” to the television if he is alone. In natural environment: the rugae enhance speech, but in a denture speech is affected due to the absence of rugae. Metal denture base improve speech because the metal can be fabricated thin enough to reproduce the rugae on the external surface [4].
- Care of the prostheses and tissues: The dentures must be kept very clean to prevent the fouling of food particles and the overgrowth of bacteria. It is best to brush the dentures by using any mild hand soap but do not use an abrasive soap or cleanser or tooth paste because most of them contain an abrasive material that will wear away the surface of acrylic resin. In case of handicapped patients, cleaning of the dentures by using suction hooks placed in composite. A daily gentle massage with a soft nylon toothbrush helps to increase the circulation [1,3].
- Chewing with complete denture: Learning to chew with new dentures requires 6–8 weeks. Patient begin to chew relatively soft food that cut into small pieces done on both sides at the same time and food swallow with simple push of tongue against the palate. Every day try something new. When bite such as a sandwich place the food between their teeth toward the corner of the mouth rather than between the anterior teeth then the food push inward and upward to break it apart [4].

References