



TELESCOPIC DENTURE-AN ALTERNATIVE TO CONVENTIONAL MEANS

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ABSTRACT

In telescopic dentures the remaining periodontally and positionally sound tooth is included as part of the denture instead of merely engulfing the teeth or replacing the lost teeth there by increasing the stability and retention.

Key words: Telescopic denture, Case study.

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INTRODUCTION

A patient named Haridas aged 62 reported to the department of prosthodontics for replacement of missing teeth and he had difficulty in chewing. On examination, well healed ridges were present and two remaining natural teeth (17,37) were present. 17 had grade 1 mobility and was not opted to derive support from it. 37 was positional favourable and periodontally sound and was planned to be used as an abutment after satisfactory radiographic evaluation. The treatment plan was a mandibular telescopic denture and a maxillary cuspid denture [1].

PROCEDURE

1. Maxillary and mandibular diagnostic impressions were made with irreversible hydrocolloid, border moulding evaluate the available inter arch space and plan the further treatment.

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and secondary impression with light body impression material were made. Diagnostic articulation was done to 2. Tooth preparation of the lower molar was done and care was taken to reduce the teeth as much as possible without compromising the retention. The walls were aimed to be as much as possible without undue taper to enhance frictional retention. The taper was less than 6 ° and the height was 4mm [2].

3. Two Impressions of the lower arch were made, one was an impression of putty with light body impression material to help in fabrication of primary copings and another was an impression with irreversible hydrocolloid to fabricate special tray. Wax patterns were made and castings were made. Retention of the copings over the prepared tooth was checked for and polishing was done to prevent plaque retention. Buccal and lingual surfaces were marked to prevent confusion and was luted to the tooth using glass ionomer cement [3].

4. Border moulding was done with the special tray and impression with light body impression material was taken to obtain the master cast. Another impression was taken with putty and light body to fabricate secondary copings. Wax patterns were made and wax beads were attached to

increase retention with acrylic and castings were proceeded with.

5. Record base in lower arch was fabricated including the secondary copings after blocking it with wax. Jaw relation was done and articulated.

6. Try in was proceeded to check for phonetics, aesthetics, vertical dimension and centric relation obtained [4].

7. Flasking was done and after dewaxing the secondary copings were luted over the primary copings around the borders. Heat cure acrylic resin were packed over them.

8. The denture was finished and polished. The patient was reviewed after 2 days,1 week and a month were given to the patient [5].



Fig 1- secondary impression maxilla



Fig 2- secondary impression mandible



Fig 3- Prepared teeth mandible



Fig 4- Prepared teeth maxilla

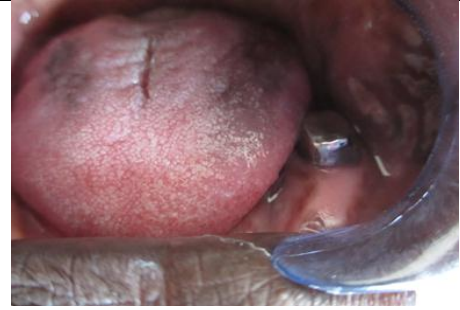


Fig 5- Primary coping



Fig 6- Master cast



Fig 7- Dentures



Fig 8- Denture insertion in patient

DISCUSSION

The telescopic dentures have several advantages like increased chewing efficiency and biting force, improved phonetics, proprioception due to the feedback mechanism from periodontal ligament, increased surface area of the denture bearing surface leading to increased retention. The masticatory stresses are transmitted along the long axis of the tooth [6].

The nearly parallel walls of the preparation, contour and degree of taper of the outer aspect of the primary copings improve the retention.

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CONCLUSION

The available inter arch space decides the type of over denture and the attachment best possible in the case to provide the maximum benefit to the patient. The patient's acceptance and compliance imparts success to the treatment.

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