

شبكة المعلومات الجامعية







شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



شبكة المعلومات الجامعية

### جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

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# بالرسالة صفحات لم ترد بالإصل

Borns

## Prosthetic Management Of Patients With Some Genetic Disorders

#### **Thesis**

Submitted In Partial Fulfilment Of The Requirements
For The Master's Degree In Prosthodontics

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#### **Acknowledgment**

It was a privilege, to go through this study under the direct supervision of Dr. Hamdy Abu El Fotouh Prof. of prothodontics Faculty of Oral and Dental medicine. Cairo University, and Dr. Amal Fathy Kaddah Assoc. Prof. of prothodontics Faculty of Oral and Dental medicine, Cairo University.

I would like to thank Prof. Dr. Iman Hassan Anwar Abu El Ezz, Prof. of Craniofacial Genetics, National Research Center, Cairo, for her sincere help, advise and encouragement during the whole period of this research

It was a privilege not only because of the diligent help, sincere advice and continous encouragement they offered; but also because of the great effort and time they spent, discussing matters, solving problems, and explaining issues with a willing attitude, brotherly talk and a welcoming smile.

It is a privilege to come to know in person those respected senior fellow colleagues and I would like to take the chance to thank them for all the faithful attention and interest they showed.

Special thanks to Dr. Ashraf El Harouny Lecturer of Genetics, National Research Centre and Dr. Khaled Addas for their sincere help.

Thank you

To my wife

And

the soul of my father

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#### List of Abreviations

Ectodermal Dysplasia. E.D.

Heridetary Ectodermal Dysplasia. H.E.D.

Anhidrotic Ectodermal Dysplasia. E.D.A.

Chromosomes. Chr.

Deoxy-ribonucletic acid. D.N.A.

Number.  $n^{\circ}$ .

X-linked Sex-Linked

Percent. %

Rapp-Hodgkin Syndrome. RHS

Thyroid hormone. TSH

Christ-Siemens Touraine syndrome C.S.T.S

Overdenture. O.D.

Soft liners S.L.

Poly-Methylmethacrylate. PMMA

Articlare. Ar.

Condylon. Cd.

Gnathion. Gn.

Gonion Go.

Nasion. N.

Posterior Nasal spine. PNS.

Sella. S.

Kilovolt power K.V.P.

Melli-Ampere. MA.

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#### Introduction

The patients with genetic disorders present to the dentist with many diagnostic and treatment challenges because of the oral manifestations secondary to the syndromes.

One of these major manifestations is anodontia. This condition is mostly apparent in patients with ectodermal dysplasia. Anodontia is either total or partial.

Genetic patients with partial or total anodontia were usually dentaly neglected until early adulthood, at which time dentures were made.

As soon as the patient is diagnosed, it is mandatory that the physician refer him to a dental genetist. Prosthetic restorations are of great value to these patients, both from the standpoint of function and for psychologic reasons. The need for partial or complete or an overdenture is critical during the preschool years and continues into adulthood.

In case of pediatric patients manifesting this anomaly, their dental management requires the dentist to be knowledgeable in growth, development and behavioral management, awared with the techniques of fabrication of the prosthesis, able to motivate the patient and parents in the use of the prosthesis and must be willing to accept the responsibilities and frustrations of the long term care of the patient for modification and/or replacement of the prosthesis.