MASTICATORY EFFICIENCY OF FLEXIBLE ACRYLIC RESIN ON ABUTMENT SUPPORTING COMPLETE OVER DENTURE

Thesis

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بِسْمِ ٱللَّهِ ٱلرَّحْمَٰنِ ٱلرَّحِيمِ

وقل ربي زدني علما

صدق الله العظيم

Aknowledgment

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Dedication

TO MY PARENTS

TO MY LOVELY DAUGHTER

HLA

TO MY BROTHERES AND

SISTER

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Introduction

Introduction

The problem of edentulism is considered from the worst problems in dentistry, solving this problem using complete dentures is not really a good modality of treatment because of the difficulties associated with such dentures.

Patients with complete dentures suffer from difficulties in retention and stability especially with the lower denture, also there is excessive ridge resorption that needs future relining procedures. So overdentures are suggested as a modality of treatment to solve the previously mentioned problems.

Although, it is impossible to eliminate all adverse effects, the use of overdentures makes it possible to regain a high degree of the tactile discrimination. It was reported that overdenture helps to preserve the bone as the remaining natural teeth withstand most of the occlusal load**.** Therefore the future loss of the alveolar ridge is going to be minimized; additionally it can improve the chewing efficiency and provides excellent stability and good retention.

Versacryl is a consistency controllable thermo-elastic acrylic with memory.The material that most people compare Versacryl thermo-adjustable liner with is Molloplast B. Molloplast B is rubber while Versacryl is acrylic.

A rubber liner acts like a spring; it compresses under occlusal load and springs or return back to its processed shape immediately when occlusion is disengaged. The perception of being soft is giving little or no resistance to pressure. Tissue reacts differently when compressed; it returns to its shape slowly. Tissue has a slow reaction time. What Versacryl offers can best be described as a compressive or cushioning

action. When a denture is under occlusal load, the tissue will compress first, then loading will continue and the Versacryl liner will yield under that load. When occlusion is disengaged, the tissue along with the Versacryl liner will start to return to their previous shape, maintaining intimate contact between denture and mucosa. The Versacryl thermo-adjustable liner should not be viewed as a substitute for Molloplast B, but rather as an aid in achieving a better fitting and more comfortable denture. A Versacryl repeatable thermo-adjustable reline should not be prescribed as a soft-liner. As denture providers, the most desirable features of the Versacryl thermo-adjustable reline are: It is a cross-linked acrylic; Chemically bonds to other acrylics and itself; The polished fitting surface and salivary action achieves adhesion; and Denture can be re adapted by warming and reinserting (by the denture provider or patient, after instruction.

At First Denture was fabricated with flexible acrylic resin (versacryl) in the canine area,

After two month the same denture was modified by chair side acrylic resin in the canine area.

Review

Of

Literature