



Effect of mini-implant retained versus tooth supported overdenture on electromyographic activity of masseter and temporalis muscles

A thesis submitted to
Removable Prosthodontic Department,
Faculty of Dentistry, Ain Shams University,
For the Partial fulfillment of the Requirements of Master Degree in
Oral and Maxillofacial prosthodontics

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B.D.S, 2009
Ain Shams University

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2014

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بسم الله الرحمن الرحيم

{وقالوا سبحانك لا علم لنا إلا ما
علمتنا انك أنت العليم الحكيم}

صدق الله العظيم

سورة البقرة {٣٢}

Acknowledgement

*First of all, I would like to express my sincere thanks to **God** for helping me to complete this work.*

*I wish to express my great thanks and feeling of gratitude to **Prof. Dr. Harry Ibrahim Eid**, Professor of Prosthodontics, Faculty of Dentistry, Ain Shams University, for his valuable advice, great effort in planning and revising this study, his meticulous supervision, constructive comments, endless understanding and patience.*

*I am extremely grateful to **Dr. Noha Helmy Nawar**, Lecturer of Removable Prosthodontics, Faculty of Dentistry, Ain Shams University, for her valuable suggestions, encouragement, scientific supervision, real support and continuous follow up from the beginning to the end of this thesis.*

I would also like to express my appreciation and thanks to all Professors and staff Members of the Prosthodontics Department, Faculty of Dentistry, Ain Shams University, for their encouragement and support.

Words can never express my sincere thanks and appreciation for the great effort and support my family gives me every day.

My great thanks to all my dear friends and all those who offered me any kind of encouragement wishing them all the best.

Last but not least, I would like to thank all my patients and all those who contributed to the accomplishment of this work.

Lamiaa Farouk Zaki Mohammed



مقارنة تأثير الأطقم السفلية المحمولة على غرسات سنية صغيرة القطر والأطقم المحمولة على أسنان داعمة على النشاط العضلي الكهربى للعضلة الصدغية والماضغة

رسالة مقدمة الى قسم الاستعاضة الصناعية بكلية طب الاسنان -
جامعة عين شمس كجزء من مقومات الحصول على درجة الماجستير فى
الاستعاضة الصناعية للقم والوجه والفكين

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INTRODUCTION

Loss of natural dentition, eventual edentulism and resultant wearing of complete denture have been part of the expected course of aging. This condition has posed a challenge to prosthodontists and oral surgeons, encouraging them to establish acceptable prosthetic results for patients. Although the patient may adapt well to the complete denture, the decrease in masticatory function, in comparison with natural dentition has been well documented. Years of wearing complete denture lead to progressive bone resorption. This destructive process decreases surface area necessary for denture support and hence eliminates favorable anatomy for retention, and result in unfavorable denture bearing area. With introduction of over-denture, the problems of complete denture were nearly solved.

The concept of overdentures developed as a simple and economic alternative to complete dentures when the dentition is compromised. The consequences of edentulism are hazardous and range from inability to chew efficiently to bone resorption.

Overdentures have many advantages including preservation of alveolar bone and proprioception which are functions of the periodontal ligament. They salvage the patient from the psychological trauma of finding himself edentulous. Moreover, they enhance support, stability and retention. Attachments are one