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### **Important information on:**

- Immediate dentures
- New dentures
- Getting used to your dentures
- Relines

**What to expect from an immediate dentures procedure:** Immediate dentures are placed in mouth directly after the remaining teeth are extracted. This approach is utilized when a person does not want to be without any teeth for several months while extraction tooth sockets heal and denture is fabricated.

**Immediate dentures involve a two-step denture process:** Optimally, immediate dentures are the first denture of a two denture process and should be considered as a temporary interim prosthesis until a second refines and esthetical enhanced denture may be constructed after healing.

**First stage:** Usually, most or all of the back teeth are removed and extraction sites are allowed to heal for a minimum of six weeks or more, depending upon an individual's healing rate. After adequate healing, the immediate dentures unit is fabricated.

The remaining teeth are extracted and the immediate dentures are placed in the mouth. Wearing immediate right away over extractions normally is no more uncomfortable than the extractions alone.

Discomfort is managed with proper anaesthesia and pain medication. Immediate dentures act like a band aid bandage, holding tissues together and protecting them during healing.

Generally, the dentist does not remove immediate dentures until the day after surgery. Surgery is checked and denture adjustments are made as necessary. Immediate dentures will gradually become loose because of bone shrinkage as the jaw continues to heal.

Provisional liners are placed in the loosening denture to hold it in place during healing. Adhesives also maintain the denture in place as it becomes looser. If immediate dentures become too loose during this healing period of several months, it may be necessary to relines multiple times. (See later procedure description)

**Second stage:** After adequate healing has occurred, a second refined denture is fabricated. This denture allows the dentist to artistically position teeth in an optimal and enhanced aesthetic relationship, which was not possible with immediate dentures.

It also is now possible to establish better functional relationships of the jaws. Approximately six months after the second denture is delivered, it will most likely need to be relined to compensate for continuing jaw shrinkage.

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After this relines, a patient usually needs annual relines to accommodate a continually shrinking jaw. The frequency of relines is an individual matter unique to each patient and is best determined by a licenced dentist after a thorough periodic examination that should occur at six month intervals.

**Modified approaches to immediate dentures:** It is possible to extract all the back and front teeth at one time and insert immediate dentures. However, such an approach is problematic and generally discouraged unless the patient has no alternatives. All teeth may be extracted with no interim denture while the jaws heal and a denture is fabricated. This is generally a more economical approach, but an individual will be without teeth for several months.

**Advantages of immediate dentures:**

- A person is not without teeth for any extended period of time
- Immediate dentures act as a bandage while bony tooth sockets are healing after tooth extractions.

**Disadvantages of immediate dentures:**

- A second refined and esthetical enhanced denture is necessary soon after the immediate denture.
- While the cost of immediate dentures is generally about the same as a conventional denture, the second denture needs to be fabricated soon after the immediate denture. Therefore, a person would be experiencing the additional cost of the second denture sooner.

**How long does it take to complete?** Four or five visits may be necessary for the fabrication phase of an immediate denture, plus any preliminary surgery. For patients requiring a complete immediate denture, the back teeth are often extracted six to eight weeks prior to the fabrication phase. This allows the extraction sites to heal and a better fitting immediate complete denture to be fabricated.

The fabrication phase consists of impressions, bite records, tooth selection and try-in of the back teeth. On the day of delivery, you will be seen in oral surgery for extraction of the appropriate teeth, followed immediately by the insertion of the immediate denture.

**Getting used to your denture:**

- A new denture is uncomfortable for the first several weeks. It may feel loose while the muscles of your cheeks and tongue learn to hold it in place. Saliva may increase. You may feel minor irritation or soreness. You may bite your cheeks or tongue as you learn to use your new denture.
- It takes practice and patience to eat with dentures. Start with soft foods cut into small portions. Chew slowly and use both sides of your mouth at the same time to keep your denture from moving out of place. Don't bite with your front teeth, this will cause your denture to tip and come loose. As you adjust to the denture add other types of food until your back in your normal diet.
- Speaking with a new denture also takes time and patience. Read out aloud and repeat difficult words in front of a mirror. Speak slowly to help reduce muffled, blurred or thickened speech. You may lisp or whistle your "s" when you first try to talk. Your denture may sometimes slip out of place when you laugh, cough or smile. Put it back by gently biting down and swallowing.
- Although your denture is custom made to fit your mouth, your dentist may suggest using a denture adhesive while you get used to wearing it. Keep in mind that a denture adhesive is only a temporary solution.

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**Denture facts:**

- A lower denture is never as tight as an upper denture. The lower denture doesn't have the suction to keep it in place like the upper denture. The lower denture is held in place by the muscles of the lips, tongue and cheeks. It should not pop out of place, but it does not have a tight feeling. It usually takes four to five times longer to master a complete lower denture compared to an upper denture.
- Getting used to a denture takes time and patience. Remember, your gum tissue changes, not your denture. For some patients, many visits to the dentist for adjustments are needed.
- A big gain or loss in body weight can change the fit of your denture.

**Yearly dental check-up:** After you adjust to wearing a denture, see your dentist yearly for a complete check-up.

**What is a reline and when will a denture need one?** A loose denture makes it harder to chew and may cause irritation, sores or infection in your mouth. If your denture is loose, have your dentist check it. You may need a temporary reline or a laboratory relines:

- A temporary reline is done in the office while you wait. It is usually done during the healing phase. The dentist adds a soft material that bonds to the underside of the denture. This material helps keep the denture close and comfortable. It is removed when a laboratory reline is needed
- A laboratory reline depends on how many teeth were removed, your health and many other factors. Most people are ready for a permanent laboratory reline in six to eight months, when the healing has completed. You need to leave your dentures with the dentist for up to eight hours. The dentist removes any temporary relines and makes an impression of the space between your gums and the denture. A permanent reline is then made with the same type of material used to make the pink portion of your denture. A reline generally does not change how the denture or your face looks. A reline does not make a lower denture fit tighter, but it fits the tissue closer and better.

I \_\_\_\_\_ have read and understood the above information.

\_\_\_\_\_  
**Signature:**

\_\_\_\_\_  
**Date:**