# Prosthetic III.

**Fixed dentures** 

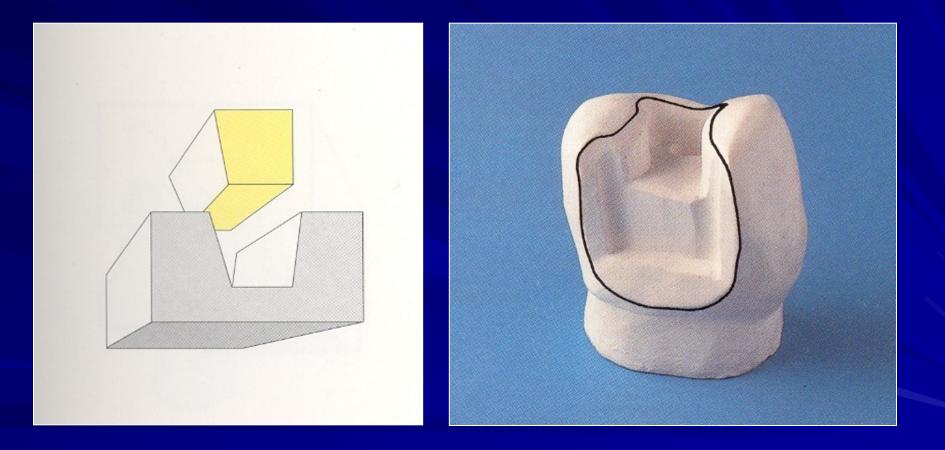
#### **Fixed dentures**

Restore the form (and function)
Cemented on (in the ) prepared teeth
Can not be removed

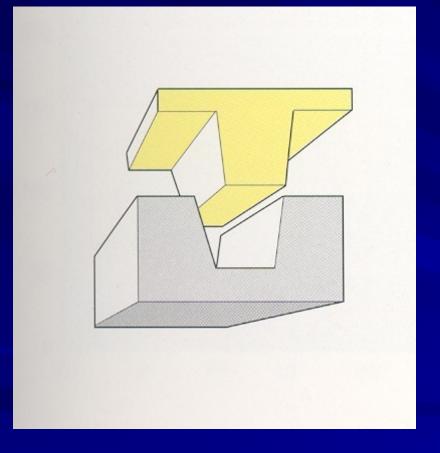
## **Fixed dentures**

Inlays /onlays Crowns Bridges

# Inlay

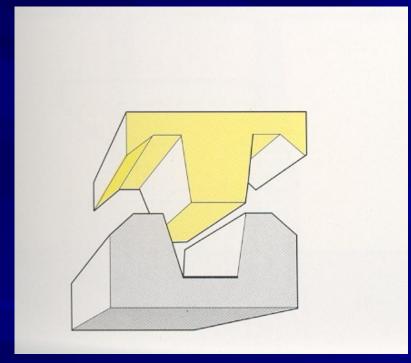


# Onlay



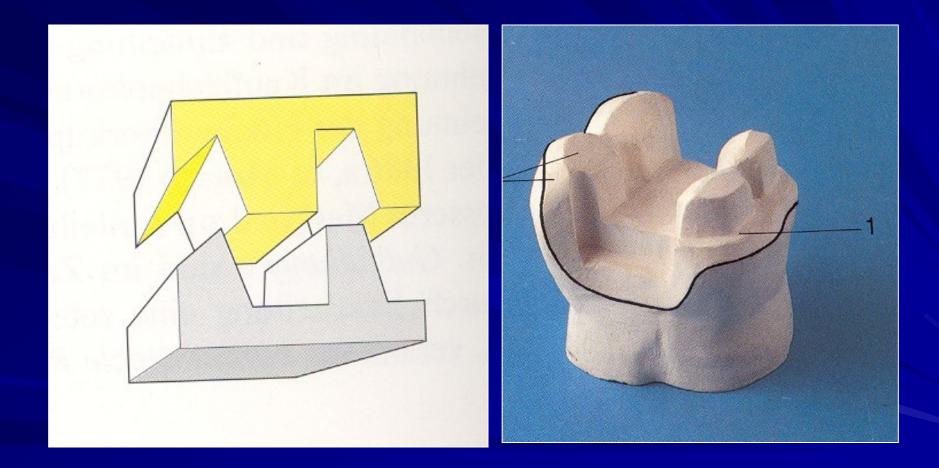


# Overlay

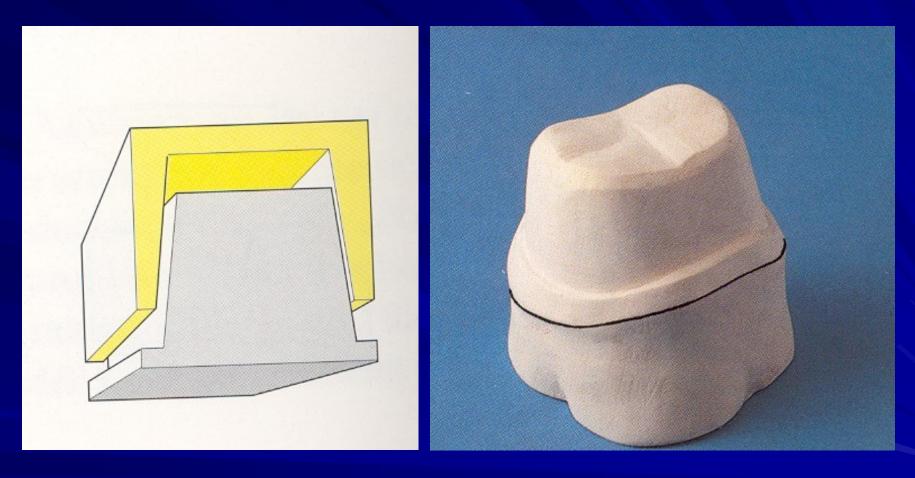




#### **Partial crown**

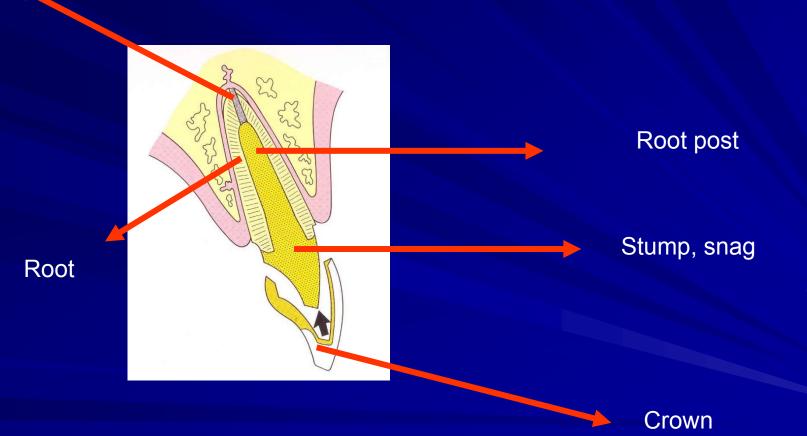






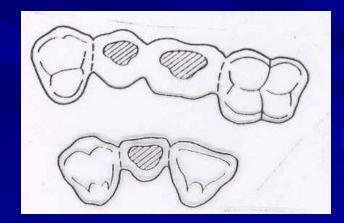
#### Root canal inlay

Root canal filling



## Fixed bridge

#### Replacement one or more teeth



#### Crowns

Restore the shape of a damaged tooth

#### Most frequently

- Replace the lost part of a tooth (caries, fracture)
- Protect before damage
- Anchoring of a bridge

## Indications

- 1. Badly broken down tooth (previously restored, secondary caries, loss of vitality)
- 2. Fracture (large)
- 3. Tooth wear- erosion (chemical)
  - attrition (mechanical)
  - abrasion (patological)
  - diseases of the hard dental tissues
- 4. Changes in position of teeth

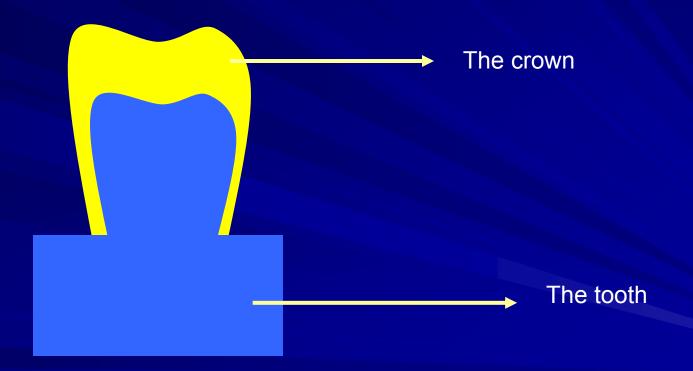
## Types of crowns

#### Full crowns

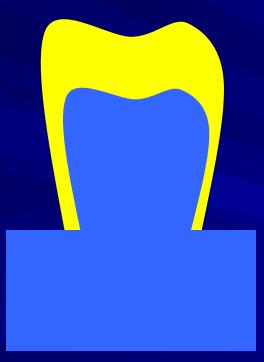
One material (metal alloy, resin, ceramics) *resin and ceramics - jacket crowns Facet crowns* Combination of materials Metal alloy –resin Metal alloy – ceramics

Partially / full covered

#### Full crown



### Full crown



#### Posterior teeth

#### Facet crown



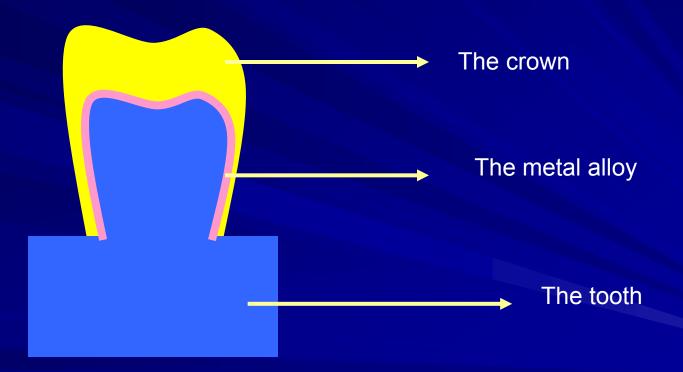
#### Metal allo

Facet made of resin or composit

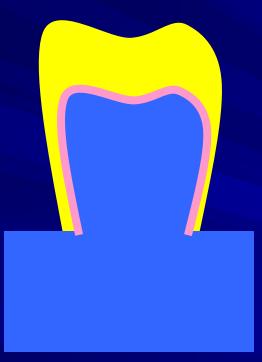
#### Facet crown

Anterior teeth

# Facet made of ceramics Metalceramic



## Metalceramic



Posterior teeth Anterior teeth

#### Jacket crown



#### Resin, ceramics

# Basic rules for the crown preparation

Reduction of the hard dental tissues – space for the arteficial material (restore the form as well as the function – strong enough)

Conical form (5° - 7 ° optimal, max 15°), no undercuts!!!! No sharpe edges!!!

# Basic rules for the crown preparation

Cervical border – shoulder must be clear, it can. The location is:

- Supragingival
- Subgingival
- Gingival

#### Full metal crown

Occlusal reduction: 1,5 mm, following the anatomical form
Reduction vestibular and oral – 0,5 mm (max 1 mm)
Shoulderless

#### Combined crown – facet crown

Metal construction + facet (made of acrylic or composit) Incisal or occlusal reduction 1,5 mm Vestibular reduction 1,5 mm Oral reduction 0,5 mm Round shoulder (vestib appr. 1 – 1,5 mm, oral 0,5 - 1 mm)

Combined crown - metalceramic Occlusal (incisal reduction) – 2 mm

Vestibular and oral reduction and other 1,5 mm

Round shoulder

# Jacket crown – ceramic, composit, acrylic

Occlusal (incisal reduction) – 2 mm

Vestibular and oral reduction and other 1,5 mm

Sharp rectangle shoulder

#### Replacement of missing teeth

Bridges Fixed Removable

Implants



Abutments (crowns on abutment teeth)

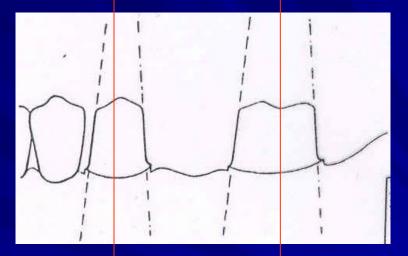
#### Pontic

#### Various size:

3 members bridges, 4 members bridges, 5 members... etc The member: abutment or pontic.

#### Bridges

#### Abutments are



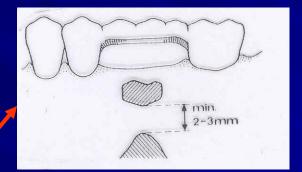
Full metal crown Facet crown Metalceramic crown

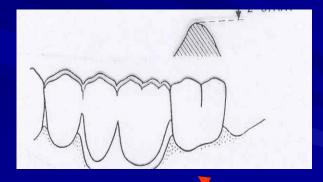
The axis must be parallel

## Bridges

#### Pontic

Full metal Facet Metalceramic

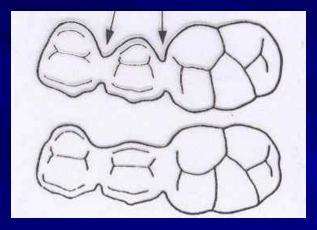


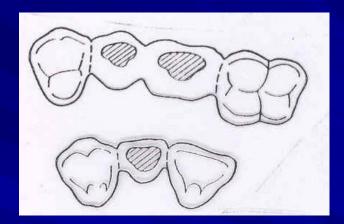


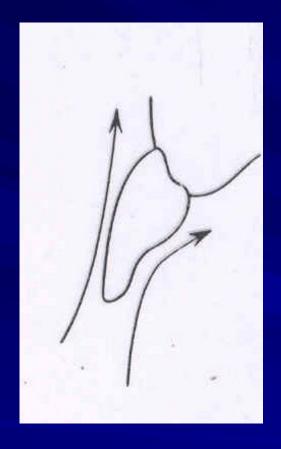
Self cleaning bridge (sanitary bridge)

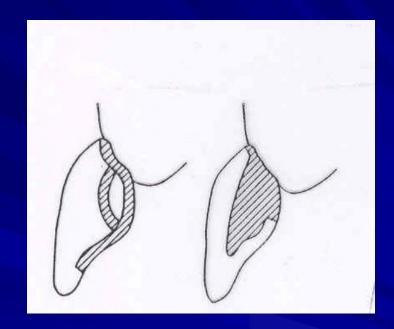
Contact pontic

Reduction - the area that is in contact with gingiva 1/3 of the occlusal size. Occlusal reduction depends og the magnitude from 10 - 30% reduction.









#### Preparation

- Preparation grooves
- Occlusal reduction
- Vestibular reduction
- Oral reduction
- Proximal reduction
- Finishing and polishing

#### Preparation

The long axis of each abutment tooth must be parallel.

If not the cementation would not ne possible.

Manufacturing procedure 1.st phase in dental ofice Taking impression – elastomers

Antagonal impression )alginate

Occlusal impresion – bite registration (intermaxillary relationship)

Provisional treatment

Manufacturing procedure
1.st phase in dental lab
Plaster model– the dental arch is made of ultrahard gypsum, the base of a stone.

The model is divided after application of guide pins

The antagonal model of stone

Mounting to the articulator (simulator)

Manufacturing procedure 1.st phase in dental lab The wax pattern of the metal framework is manifactured

Casted (the method of lost wax)

Adapted on the model

Manufacturing procedure 2.nd phase in dental ofice The framework is tried out

The colour of veneering material is choosen Manufacturing procedure 2.nd phase in dental lab

The veneering material is applied on the framework and polymerized ot burnt (ceramics).

Manufacturing procedure 3.rd phase in dental ofice The denture is tried out

Cemented
(zinkoxidphosphate cement, glasionomer or composite)





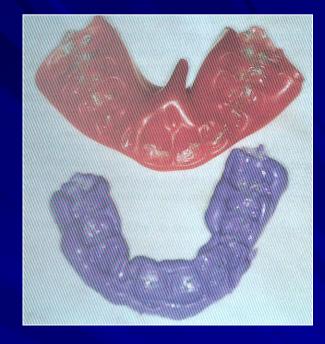












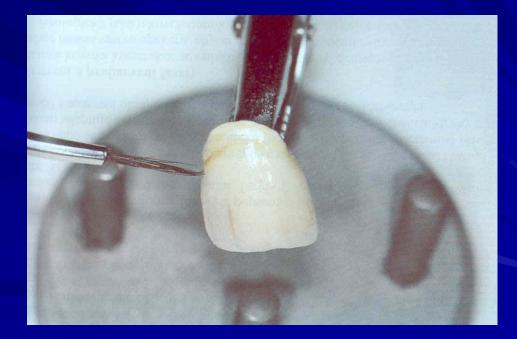












## Temporary prosthetic treatment

- Protection of prepared teeth dentin wound
- Keeps the abutment teeth in their position
- Other reasons
  - Correction of the intermaxillary relations
  - Aesthetics
  - Disorders of TMJ

## Material

Acrylic resin – dental lab

Special resins for direct fabrication in oral cavity Sequence of operations I.st phase in dental office Taking the impression using the alginate impression material (both dental arches)

Intermaxillary relations - wax

## I.st phase in dental lab

- Pouring the impressions
- Plaster /mix of plaster and stone
- Modellation of the temporary of the wax (pink modellation wax)
- Putting of the wax pattern into the flask
- Replacement the wax with resin dought
- Polymerization

## II.nd phase in dental office

Cementation using the temporary cement

Direct fabrication of the temporary crown or bridge Impression before the preparation Preparation Mixing of the special resin Filling of the impression Application os prepared teetrh – the temporary is being formed Finishing and polishing Cementation using the temporary cement