

# METHOD OF REDUCING THE TREATMENT PHASES IN TOTALLY EDENTULOUS PATIENTS

## METODA SKRAĆIVANJA TRAJANJA LIJEČENJA BEZUBIH PACIJENATA

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**Abstract:** *Totally edentulous patients present the most varied morpho-clinical aspects. To many dentists these constitute extremely favourable factors from the professional experience formation and development point of view. Solving very complex cases shall show the professional ability that the dentist has achieved until that phase. The method of reducing the treatment phases has tried to improve the treatment efficiency in these patients. The study was carried out on 294 patients, trying to point out the efficiency of the treatment method in totally edentulous patients.*

**Key words:** *treatment method, efficiency of the treatment method*

**Sažetak:** *Bezubi pacijenti predstavljaju posebni morfo-klinički aspekt. Brojnim stomatolozima ti pacijenti su posebno važni za njihovo profesionalno iskustvo. Rješavanje složenih slučajeva pokazuje profesionalnu vještinu koju je dosegnuo stomatolog. Metoda smanjenja trajanja liječenja nastoji poboljšati djelatvornost liječenja kod pacijenata. Studija provedena na 294 pacijenta pokušava istaknuti djelatvornost liječenja bezubih pacijenata.*

**Ključne riječi:** *metoda liječenja, učinkovitost metode liječenja*



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## 1. Introduction

Totally, bimaxillary edentulous patients present most of the time a great morpho-clinical variability of the totally edentulous prosthetic field. Through this treatment method, we tried to reduce the clinical phases, favouring the patient from the treatment period point of view [1][5]. Most of the times, the socioeconomic conditions do not allow the patient in Romania to afford a suitable prosthesis, an adequate and efficient treatment and this is the reason for which we have realised this method.

## 2. Understanding transition

The study was carried out on a three-year period (2005-2008) and there were examined 294 of totally edentulous patients that have a deficitary socioeconomic status (the patients with social security assistance) [2]. The edentation type studied was in 189 cases bimaxillary edentation and in only 105 cases unimaxillary (78 patients with maxilla-unimaxillary edentation and 27 with mandible-unimaxillary edentation) and the characteristics of the batch are presented in the following table 1 [3][4]. Only the totally, bimaxillary edentulous patients, old users of prosthesis were selected from this batch and their number reached 117. The method of reducing the clinical phases treatment consisted of eliminating the preliminary phase of taking impressions, adjusting the individual spoon and occlusal patterns which were not needed. The treatment sessions were reduced to three: during the first appointment, from the totally edentulous fields were taken functional impressions with the old prosthesis (fig.1, 2) and also were determined and recorded the intermaxillary relationships (fig.3), during the second appointment the molds were tested (fig.4, 5) and during the third appointment the prostheses were fitted in (fig.6).

## 3. Tables

Examined items		294 cases
Type of edentation	Bimaxillary	189
	Unimaxillary	78
	Unimandible	27
Age	61-65 years	178
	66-70 years	71
	71-75 years	32
	Over 75 years	13
Sex	Females	182
	Males	112

Table 1. Characteristics of the studied patients

#### 4. Pictures



Figure.1. Impression of the totally edentulous field of the maxilla

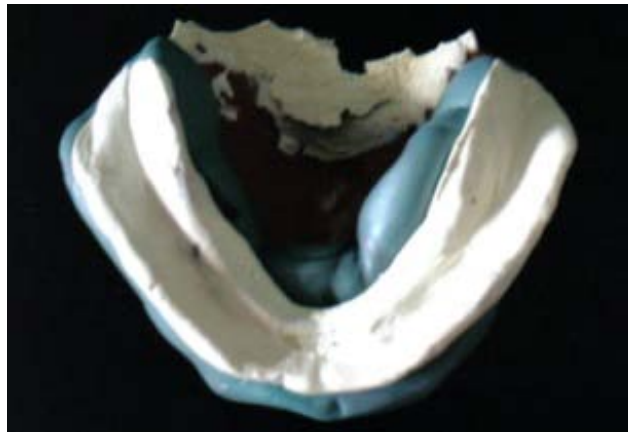


Figure.2. Impression of the totally edentulous field of the mandible



Figure.3. Determining and recording the intermaxillary relationships



Figure.4. Articulated models in assembly



Figure.5. Models of the future prosthesis (frontal view)



Figure.6. Models of the future prosthesis (lateral view)



Figure.7. Models of the future prosthesis (lateral view)



Figure.8. Fitting in the prosthesis in the oral cavity

## 5. Referring

Only a number of 72 patients were satisfied with the applied method and the efficiency of the treatment within 6 months after applying the method was 61%.

These patients were characterised by: wearing of prosthesis with an approximate age of 6 years, without repairs, by maintaining occlusal relationships (coincidence of the centric relation with the maximum intercuspation). There were not required any occlusal changes at the basic level or maintenance and prosthesis stability was improved a lot.

## 6. Conclusion

The method can be used in totally bimaxillary edentulous patients having prosthesis that do not insure maintenance and stability on the prosthetic field. 3-5 year-old prosthesis can be maintained without repairs and occlusal relationships.

This method reduces the working time both for the dentist and the patients, having in view their age.

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Photo 039. Church in Pozega/ Crkva Sv. Duha i Katolička gimnazija