**All About Dentures**

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Valued patient, thank you for taking a moment to read this. I wrote this to further educate patients on removable prosthetics: what they are, what to expect, some of the limitations, and options for the next step. Please read, ask any questions you might have and remember you are in good hands here.

**Immediate Dentures**

Immediate Dentures are meant as a band-aid. These are made when you still have teeth, in order to have something when you have your teeth extracted. We take impressions and use them to make the prostheses to be ready on the day of extractions. They usually do not fit very well due to swelling and inflammation as a result of the extractions, therefore Dr. Buie will typically reline them with a white soft liner on the day of surgery, and then around two weeks later (depending on healing) with a pink soft liner. You will need to use adhesive at this time to help keep the dentures in, especially **lower immediate dentures**. The major changes that you will notice between natural teeth and dentures are as follows:

* The palate: you will notice that your tongue hits the roof of your mouth differently, and your speech may be affected. This typically normalizes after around 2-3 weeks.
* Excessive saliva (drooling): the body is used to having only food items be in your mouth, therefore a ‘foreign body’ e.g. a denture will be sensed as food by your mouth, which will cause drooling. This typically goes away after 2-3 weeks.
* Gagging: The upper prosthesis will need to cover part of the back of your mouth; some people have a mild to severe gagging reaction. Sometimes this goes away but in people with a severe gagging reflex, implants to support a palate free denture may be the only avenue of relief.

After a period of healing which is typically around 3 months, we will begin the fabrication process for your definitive prostheses as described below.

**Complete Dentures**

Complete dentures are not a replacement for teeth. They are a replacement for *not* having teeth. Millions of Americans function very well with complete dentures. We fabricate every aspect of our complete dentures in house and follow a classic workflow for optimum success. Typically, an upper denture enjoys a ‘suction cup’ effect, which leads to high levels of comfort and satisfaction. A lower denture will have more issues, especially with retention. Many people complain that their lower dentures ‘float’ or ‘ride up’. This is usually due to the basis of retention of the lower denture: your facial muscles and your tongue. It takes a lot of practice and dexterity to help a lower denture ‘stay in’ when eating or talking. Dr. Buie can help you through this process. If there is a medical contraindication, Dr. Buie will treatment plan at least two implants on the lower jaw to stabilize a lower denture. The following five appointments are needed to fabricate a set of complete dentures at a specialist level:

**Appointments**

1. Initial impressions: these provide rough outlines as to where the denture should end and are not accurate enough to construct a denture upon by themselves.
2. Final Impressions: the initial impressions are used to make impression trays that provide the final impression. Dr. Buie will do this in two steps. The first is to get the borders where the end (flange) of the denture should be, then the second step is a very ‘flowy’ mix that captures anatomy very precisely. These are used to make stone casts for the next appointment.
3. Bite Records: Dr. Buie makes wax prototype dentures that he molds and changes in your mouth to provide a framework for where to place teeth. This is critical; there are many parameters that are examined and done in order to appropriately arrange teeth. A bite record is then taken.
4. Tooth Try-in: Teeth have been set in wax at this appointment, and a verification of the arrangement and color of the teeth is made, with the patient’s final approval being the go-ahead for the next step. It’s important to note that after this appointment, no changes can be made to the teeth.
5. Insertion: The insertion appointment is when the patient receives the final prosthetics. We will paint a paste on the internal aspect and grind off areas that will cause sores and check the bite. I normally obtain around 75% of bite adjustments at this appointment, but wait until follow ups to see how your facial muscles adapt to a new prosthetic to ‘dial in’ the bite

* Adjustments will be carried out after the insertion appointment. We usually see patients back after one day, three days, and one and a half weeks after the denture insertion to adjust sore areas and the bite.
* 21 Day Rule: Dr. Buie may talk with you about the 21day rule, which is where we give the patient 21 days to accommodate to removable prosthetics without implants to see if prosthetics without implants are feasible. Many patients, especially if this is their first set of removable prosthetics, will find that after the first 21days, they may require implants on the lower arch, and may not require any implants on the upper arch. Instead of making that determination before, we like to see if patients can tolerate upper and lower dentures without implants before doing further surgical or prosthetic procedures. Dr. Buie will talk with you regarding this if, based upon your mouth and his experience, we recommend implants.

**Lower Denture Difficulties**

Many patients cannot accommodate to a lower denture without implants, as our mouths were not designed to retain such a prosthetic. You may have excessive sore areas and your prosthetic may not ‘fit right’ even though it’s brand new and perfectly adapted to your jaw. This is normal! Many times placing two implants will completely alleviate this problem, but you should consult with us to see what we recommend first.

**Home Care**

Dentures should be brushed with a denture brush or soft toothbrush using **dish soap** once a day, in the sink, and if you have dexterity problems, a towel over the sink is best to avoid dropping and breakage. Using toothpaste is too abrasive on the acrylic and teeth. Once a week, use a denture effervescent cleanser as directed to give a good cleanse. Use a mouthwash in your mouth and use a soft bristle toothbrush or a washrag to cleanse the mouth. If you have implant abutments, be sure to cleanse appropriately, as buildup and calculus can damage the inserts and nylon inserts. If you have any questions on a cleaning regiment, please feel free to ask Dr. Buie.

**Next Steps**

Dr. Buie believes in treating every patient like family. Many patients can tolerate removable prosthetics very well, even without implants, but Dr. Buie is a trained Specialist in Implant and Prosthetic Dentistry. With this level of expertise, if you require further retention or confidence in your smile, we can provide implant services and the prosthetics that go with them, including overdentures (snap on) and hybrids (permanent dentures).