Functional and esthetic overdentures

By Marco Montanari, DDS

The removable denture may seem an outdated rehabilitation. However, it is the foundation on which all prosthetic procedures are based; therefore, it is imperative to know it and to follow its constructive steps when restoring the patient’s oral cavity to obtain an aesthetic result not only of the smile but of the whole face.

The possibility to anchor a denture to teeth/roots or implants enables the benefits of a removable prosthesis in terms of soft-tissue support, oral hygiene and the greater stability associated with the use of retentive attachments.

Preserving roots for the anchoring of a denture provides several strategic advantages, including the maintaining of the alveolar bone (for preserving the periodontal ligament), proprioception and physiological masticatory dynamics (Scotti R et al. 2003).

After an endodontic treatment, different types of post attachments can be applied into the roots. These attachments can be identified as spherical attachments and low profile attachments.

Spherical attachments (Pivot Block Normo and Micro and Pivot Flex, Rhein83, Italy, www.rhein83.com) are good anchoring devices because of their self-aligning capacity, small dimensions (in particular for the Micro sphere) and ability to compensate severe divergences between the roots (Flex). Today’s spherical attachments have further evolved into the low-profile Pivot OT Equator (Rhein83). This new attachment maintains the same diameter and retentive capacity as the Pivot Block Normo sphere but has a substantially smaller vertical size (only 2.2 mm, including the retentive cap and the housing).

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Contact Rhein83

For more information, contact American Recovery-Rhein83 USA. Attachments at (914) 633-6363 or www.rhein83usa.com.

References

For all these reasons, I believe that the Pivot OT Equator is the most effective and reliable overdenture retentive post currently on the market.

The morphology of the OT Equator attachment has been validated for more than 10 years by clinical procedures and scientific studies performed on implant denture rehabilitations (Montanari et al., 2015-2016).

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