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TITLE: "Overcoming Difficulties in Achieving Denture Suction In a Complex Bimaxillary Case"

#### ABSTRACT

I have been lecturing clinicians on the revolutionary fabrication technique of suction-effective mandibular complete dentures for a long time throughout the world.

However, I have not yet touched on the clinical techniques that participants will find extremely useful in daily practice, such as methods of diagnosis, impression taking and bite registration in difficult-to-treat cases where patient satisfaction is hard to obtain, and how to handle changes in the mandibular position following correction of occlusal vertical dimension.

In this lecture, I want to introduce various clinical techniques based on intra-oral examination by presenting complex cases where denture stability is difficult to achieve even in the maxilla. These include cases with flabby ridges in the anterior maxilla; anterior open-bite cases edentulous in both jaws with marked mandibular ridge resorption, which makes impression-taking very difficult; and cases with existing dentures requiring significant changes in occlusal vertical dimension and horizontal mandibular position for successful treatment.

For flabby tissue in the maxilla, non-pressure impression technique and surgical removal had been advocated. However, these techniques are designed to avoid deformation of flabby gums during impression or to surgically resect them. Flabby gum tissue will always return or worsen unless the root cause, namely the habit of anterior chewing, is eliminated. Therefore, our ultimate goal is to fabricate dentures that permit more posterior chewing. This would reduce stimuli to the anterior ridge, allowing spontaneous resolution of inflammation in the tissue.

At the same time, severely resorbed mandibles with many unfavorable factors including the genial tubercle and retracted tongue position require special modifications to individual tray design and fabrication for achieving effective denture suction. It is also necessary to add many optional steps to the standard impression procedure for successful final impression.

In these complex bimaxillary cases, the first priority must be given to the set-up of maxillary denture teeth to prevent the maxillary denture from falling. Mandibular denture teeth must then be set in such a position that will not compromise denture suction while keeping a correct relationship with the maxillary teeth. Needless to say, complete denture fabrication in difficult cases is a process that requires constant and unfailing attention to each and every detail from diagnosis to final denture delivery.

Through this lecture, participants will learn about:

- Treatment plans derived from data collected during intra-oral examination
- Differences between conventional and suction-effective custom trays
- Differences between conventional and suction-effective impression techniques
- Impression techniques for patients with flabby maxillary ridges, and inflammation control in flabby ridges for long-term success
- Lingual border molding technique for patients with the genial tubercle and severely retracted tongue position
- Impression technique designed to strengthen lip support for patients with shallow labial vestibules