

## FIXATION AND STABILIZATION IN PATIENTS USING A FULLY REMOVABLE PLATE PROSTHESIS MADE OF SILICONE-BASED PLASTIC

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**Resume:** The article discusses the frequency and clinical manifestations of fixation and stabilization in patients used with a complete removable plate prosthesis made of silicone based plastic. this method was tested in 9 patients aged 65 to 70 years. There are 4 women and 5 men among those who participated in the survey. All patients needed complete removable prostheses. The prostheses were made of fluorox polymer. Based on the problems, there was a need to solve the medical and social problem and develop new technologies for effective complex treatment of patients with partial and complete missing teeth.

**Key words:** Silicone, noracryl based, personal spoon, stomatitis, prosthetics, questionnaires, orthosil.

**Importance of the subject:** Orthopedic treatment of patients with complete absence of teeth is an urgent problem of modern dentistry. According to the data, the clinical and laboratory stages of the preparation of the elastic-based fully removable plate prosthesis should be improved. In traditional orthopedic treatment, patients refuse to use removable prostheses in 6% for various reasons and in 10% due to poor fixation and stabilization of the jaws. In the treatment of patients suffering from complete absence of teeth, modern removable elastic-based fully attached plate prostheses comply with requirements such as optimal retention of the chewing function and high efficiency corresponding to removable orthopedic prostheses. In the orthopedic literature, there are enough questions about the complex interaction of the temporomandibular joint occlusion, masticatory muscles and biomechanics during the operation of orthopedic prostheses focusing on occlusion. After orthopedic treatment, a decrease in favorable conditions for optimal oral hygiene was noted. In prosthodontics, oral cavity preparation is not given enough attention. In modern dentistry, the accuracy of orthopedic prostheses is important, which depends on the quality of the molds. The methods of removing molds in the complete absence of teeth have certain disadvantages, especially in the case of prosthetics with the help of elastic-based prostheses in which the tooth is completely removed. Due to the lack of reference points for the construction of the prosthesis plane in modern articulators, it is necessary to make a parallel between the line of laughter and the cutting edge of the front group of teeth. In patients with incomplete teeth, the traditional surgical technique of preparation and formation of an individual prosthetic area provides a traumatic intervention. There is a need to use other methods without surgical correction. Complications of fully removable elastic-based dentures are reduced by 15% to 20%. The diagnosis of the mucosa of a complete removable prosthesis requires the introduction of initial markers based on metabolic criteria and can be performed by evaluating the patients' saliva with qualitative and quantitative indicators. Orthosil plastics containing monomer are used in the production of fully removable plate prostheses with the most removable elastic base. Along with their advantages, they have a number of disadvantages: prostheses made of these materials can cause toxic and allergic reactions. Thermoplastic materials currently used for the production of fully removable prostheses have flexibility, elasticity and aesthetics. These prostheses are attached to the teeth due to the dentoalveolar clamps and pelots, which belong to the retaining type of

clamps and have certain disadvantages, functional non-distribution of the occlusal load on the abutment teeth and stabilization along the plane. The most functional and aesthetic fixation in prosthetics of partial dental cavity defects is the production of clip-on prostheses with a lock type. Patients are treated with the problem of breaking the removable part of the structure, while the non-removable part remains functional in the oral cavity. Alternative solutions are required for these technologies. The analysis of local and foreign literature revealed the need to improve orthopedic training and comprehensive treatment of partial and complete absence of teeth. Due to urgency, there was a need to solve and develop medical and social problems. New technologies for effective complex treatment of patients with complete absence of teeth.

**The purpose of the study:** Determination of clinical and anamnestic forecasts of fixation and stabilization in patients using a fully removable plate prosthesis made of silicone-based plastic.

**Materials and methods:** This method was tested in 9 patients aged 65 to 70 years. 4 women and 5 men participated in the survey. All patients previously had their full removable prostheses made based on an anatomical mold. All clinical and laboratory stages in the preparation of prostheses were carried out without errors and defects. Patients were made two prostheses (one with a plate, the other with an elastic base) and underwent clinical and functional examination. In the clinical study, we took into account the presence of prosthetic stomatitis, development of allergic reactions, occupational hazards, bad habits, allergic diseases, dental diseases and accompanying pathologies.

**Results:** As a result of our investigations, 75% of patients who wore prostheses with an elastic base plate had their fixation and stabilization restored due to the anatomical structure and adaptation of the jaws. Fixation and stabilization were not restored in the remaining 25% of patients. Fixation and stabilization of the prosthesis was restored in 85% of the patients who wore the prosthesis with an elastic base. As it turned out, after 25 days after prosthetics, signs of habituation developed. Clinical manifestations include discomfort in the oral cavity, burning of the mucous membrane of the oral cavity, dry mouth, impaired sensitivity and changes in taste sensations, hyperemia. The two selected groups of patients (prosthetics with plates, prostheses with an elastic base) differed significantly in clinical and anamnestic characteristics during the initial treatment for dental care, that is, in patients who used personal spoons made of Noracryl based plastic in complete edentulism, the fixation and stabilization of dental prostheses was at a higher level. was found to be.

**Conclusion:** In case of complete edentulism, prosthesis fixation and stabilization in elastic-based prostheses is convenient for the patient.

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