

MODERN METHODS OF TREATING COMPLETE ADENTIA

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ABSTRACT: Many people do not even suppose what this dental Edentia is. But those who are faced with this experience what happened as a serious problem that considerably reduces the quality of life. Adentia – this term means the absence of teeth. Complete adentia means that a person has no teeth at all. There is not a single tooth in either the upper or lower row.

Nowadays, traditional prostheses have not lost their popularity, although they are not a high-quality treatment for adentia. There are several types of such prostheses.

Keywords: orthopedic treatment, complete adentia, prosthetics, quality, modern approach, treatment.

On average, 20% of the world's population has lost their teeth by the age of 60. Due to the trend of increasing life hope, the number of such patients in economically developed countries is growing. Complete adentia (lack of teeth) used to be considered a terrible diagnosis. Modern dentistry copes with this problem perfectly with the help of orthopedic treatment. Today, in the complete absence of dental units, the doctor offers the patient two technologies:

1. Implantation (surgical) treatment followed by prosthetics.
2. Orthopedic treatment involving the wearing of a traditional separable prosthesis.

Removable prosthetics were very popular before the advent of innovative prosthetics on implants. These systems have a solid base to which artificial teeth are attached. Acrylic products do not have flexibility, which gives them both positive and negative properties. The positive qualities include the ability of a solid base to evenly distribute the chewing load over the entire jaw. At the same time, the hardness of the prosthetic system makes it more fragile and less comfortable to operate compared to more flexible structures.

Acrylic prostheses have a porous surface structure. Harmful microflora and plaque accumulate quickly enough on such a surface. The monomer that is included in their composition can cause allergies in some patients. Therefore, experts advise choosing innovative prostheses made of plastic "Aqua Free". There are no toxic substances in its composition. In addition, Acry Free plastic is quite durable and flexible. That is why it belongs to a higher price category.

Such prostheses are famous for their flexibility and excellent aesthetics. Hypoallergenic material is used for their manufacture. However, a slight level of stiffness negatively affects the chewing process. Because of this, the bone mass of the jaw atrophies and thins faster. Therefore, they are suitable only for partial adentia.

Methods of treating complete tooth loss using dentures based on the mucous membrane have many disadvantages. Implant-supported prostheses have significant advantages over traditional ones in the treatment of complete and partial adentia. For the treatment of patients who have completely lost their teeth, various types of prostheses on implants can be used. The choice of prosthesis design depends on the degree of alveolar atrophy, the condition of the oral mucosa, the gnathological characteristics of the patient, the patient's somatic status, his needs, the cost of orthopedic components, the features of the implantation system and other factors.

Complete adentia guide to a number of extremely adverse consequences: In the nonpresence of teeth, the chewing load moves to the jaw bone, which causes bone atrophy. Bone thinning occurs by about 4 mm per year. The bone is deformed, and this leads to the fact that the gum tissue becomes soft and

begins to wear off until it is completely erased. The space of the oral cavity, freed build up due to erasure, is occupied by the tongue, which by that time had already increased in volume.

Only soft foods are consumed, which contributes to the exacerbation of chronic diseases of the gastrointestinal tract, which requires regular food intake.

Over time, the shape of the face undergoes changes: the angle of the jaw loses its sharpness, soft tissues collapse, and frequent deep wrinkles form.

With excessive stress on the jaw joint, there is a risk of chronic inflammatory processes and other diseases that worsen the patient's health. Metal-ceramic permanent dentures on implants can restore the anatomical crown of a tooth and, according to the Misch classification, belong to the FP-1 type.

With more pronounced alveolar atrophy, prostheses, along with the crown, replace part of the root (FP-2), as well as soft tissues (FP-3). Implants can be installed in the frontal and lateral sections of the lower jaw, which are not recommended to be connected with a single prosthesis frame due to deformities of the jaw that occur during operation.

The advantages of non-removable prostheses include the following characteristics: they are always psychologically perceived by patients better than removable ones. They can be more widely used to replace teeth in the lower jaw, since there is no need to support the lip with denture flanges. There are no components that are worn out and need to be replaced. They have high aesthetic characteristics. Food does not accumulate under prostheses, unlike covering prostheses, but independent care of them requires certain skills, therefore this type of prosthesis may not be suitable for patients who cannot provide independent hygienic care for implants and prosthesis. The disadvantages include the high laboratory cost of manufacturing and low maintainability.

When calculating the prosthesis design, it is indispensable to take into account the shape of the dental arch and the distance from the center of the most frontally positioned implant to the distal aspect of the distally positioned implant to determine the length of the rear consoles. In the upper jaw, when making non-removable dentures in the complete absence of teeth, it should be taken into account that due to alveolar atrophy, reduction of the vestibular part of the alveolar process and loss of teeth, it is necessary to provide support for the upper lip tissues with prosthesis ledge, which cannot be performed with non-removable dentures of the FP 3 type. Indications for the use of non-removable dentures on the upper jaw with complete loss of teeth are limited by the vestibular tilt of the alveolar ridge and a decrease in the length of the dental arch in the premaxilla area, a change in the position of the jaws in the sagittal plane. These factors lead to forced agreement modeling of the axes and shape of teeth, cantilever loading on implants in the frontal region. With a high smile, in most cases, gum surgery is required to improve the "red and white" aesthetics.

The prosthesis consists of a metal frame that is attached to abutments or implants installed in the frontal part of the lower jaw using a screw fixation, lined with plastic with artificial teeth installed. The design of the prosthesis is non-removable, which is a significant advantage, lightweight and suitable for repair. The laboratory cost is not high. The implants are located evenly along the alveolar process or in the anterior part to the mental openings and are united by a frame that is cemented or fixed with screws to the implants or abutments. The frame is lined with composite or plastic. The prosthesis has good aesthetic characteristics that can be improved by using composite materials or other methods of individualization. It is likely that the prosthesis helps to reduce the stress load on the implants due to plastic. Disadvantages are associated with wear (abrasion) of plastic, fatigue fractures of the prosthesis base. Independent hygienic care requires certain manual skills from the patient. Periodic relocation of the prosthesis is necessary due to the abrasion of acrylic.

The following components of the Anthogyr implant system can be used for manufacturing: a burn-out abutment with a ready-made base for manufacturing an individual abutment made of a gold-containing alloy or a completely burn-out abutment.

Removable dentures based on implants in patients who have completely lost their teeth have significant advantages over traditional ones: they prevent bone loss, are stable, provide a reproducible central jaw ratio, do not injure soft tissues, improve chewing efficiency and chewing strength, have good retention and smaller dimensions. In addition, removable dentures supported by implants have a number of advantages compared to non-removable dentures. Fewer implants are required for the manufacture of removable prostheses. Bone plastic surgery is performed in a smaller volume, the positioning of implants is not so critical, soft tissue is supported with the help of the prosthesis flanges, procedures for hygienic care of the prosthesis can easily be carried out, there are fewer requirements for the aesthetics of soft tissues. There are opportunities to reduce the stress load on implants, high maintainability, and lower laboratory cost compared to non-removable prostheses. The ability to remove the prosthesis reduces the excessive load on the implants in patients with bruxism during sleep.

They belong to the RP – 4 category. They rely on implants, as well as on their teeth. 6 implants must be installed on the upper jaw and at least 4 on the lower jaw. Our clinic uses the technology of manufacturing telescopic prostheses using titanium abutments, zirconium caps and caps made by electroplating, which are fixed to composite cement in the oral cavity to the frame of the prosthesis. The advantages of such prostheses are high maintainability, hygiene, passivity of the frame fit, the ability to connect natural teeth

and implants. The conditions for the manufacture of telescopic prostheses are a large interalveolar distance, atrophy on the vestibular side of the alveolar ridge of the upper jaw to accommodate the components of the prosthesis. Implant-supported prostheses have a number of advantages over traditional removable prostheses: implants help maintain the total volume of alveolar bone tissue, implant-supported prostheses improve diction, occlusion and chewing efficiency. Orthopedic treatment using implants for complete tooth loss is a reliable, effective and predictable method. In all the clinical cases described in the article, the Anthofit implantological system was used, the orthopedic components of the system allow prosthetics to be performed in various clinical conditions in this group of patients. With the loss of one or two teeth, a person does not experience significant discomfort, since the chewing function does not suffer much from this. It is quite different when a decrease in the dentition leads to the inability to chew food normally. In this case, the periodontium is damaged, the temporomandibular joint may become inflamed, and the jaw bones sag in places of missing teeth.

This is followed by diseases of the gastrointestinal tract, failure of the processes of assimilation of food, deformation of the oval of the face, speech disorders. If we talk about the aesthetic side of the problem, then a person will be complex even in the absence of only one tooth in the smile area.

As we approach the state of complete adentia, the negative effect on the body increases. It becomes extremely difficult to bite and chew solid food. Therefore, food is consumed exclusively in liquid or ground form. This certainly affects its taste and nutritional value. The risk of a lack of vitamins and trace elements in the body is very high.

Lips and cheeks with full adentia become sunken, the tip of the nose goes down, the lower part of the face "picks up". As a result of facial muscle atrophy, the face looks old. The speech becomes slurred. Such changes lead to the patient's social isolation, which in turn causes prolonged stress.

Types of prosthetics with complete adentia are different. At the first visit to the dentist, you will receive advice on which methods are the most optimal for you. If we consider the solution of the issue from a technical point of view, the existing options will be as follows:

Dental prosthetics is performed completely. Implants serve as supports. You can choose from both a removable prosthesis and a full-fledged non-removable version of the prosthesis. This will reduce the load on the gum and prevent bone deformation.

A complete removable prosthesis is an option for replacing dental implants when it is not possible to install implants due to physiological characteristics.

Dental implantation can provide good prospects for complete adentia. In this case, the best conditions will be created for the implementation of orthopedic treatment using a non-removable dental mechanism, such as a crown or a bridge prosthesis.

In order to prevent partial and complete adentia, it is necessary to take preventive measures recommended by specialists. In order to avoid secondary adentia, it is necessary to sanitize the oral cavity at the dentist in a timely manner, as well as carefully perform hygienic procedures. In the absence of several teeth, the installation of dentures is extremely desirable as soon as possible. This way you will prevent the loss of even more teeth.

Remember that complete adentia entails the appearance of psychological problems. Moreover, impaired chewing function leads to various diseases of the gastrointestinal tract. For these reasons, dental health necessarily requires timely, attentive and careful care.

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