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RUBINOFF PROSTHODONTICS

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Conclusions\Comments:

Pink porcelain does not come in as many shades as tooth coloured porcelain. It is often difficult to get the best colour match to surrounding soft tissues.

I find that it is helpful to apply pink acrylic to the temporary crowns in order to "test" the appearance of pink porcelain before we complete the service on the lab bench. Inform before preform remains important in good communication with our patients.

Joining natural teeth to dental implants? Let's explore in next issue!

Vertical Dimension deficiencies.

In prosthetic dentistry, high smile lines can make or break your day! Today's blog is all about "Pink Porcelain" and dealing with vertical deficiencies at the gingival crest. As Johnnie Cochran (the famous lawyer for OJ Simpson) once said, "If the gums don't fit, we'd like to quit. Our patients hate "black triangles", teeth that look too long and food that easily entraps around bridges.

This presentation deals with "remakes". Gingival tissues have migrated apically since the first prosthesis was inserted. Now, treatment must address the smile line, long clinical crowns, the so called "black triangles" at gingival crest and the ability of our patient to clean around our new prosthesis.

Treatment Plan: Case One

- Extraction #22 and placement of Straumann bone level implant followed by prosthetic placement of implant abutment.
- Placement of telescopic copings on abutments #14,13,12,23
- Fabrication of a 7 unit anterior bridge with abutments #14,13,12,22 (impl), 23 and pontics #11,21
- Partial denture attachment on abutment #14
- Placement of pink porcelain re vertical deficiency

Pre-treatment views: Case One







Suggested areas to modify in lab



PLEASE NOTE: Provisionals were made using pink acrylic at the gingival crest. In collaboration with the laboratory ceramist, the design and the location of the pink porcelain was amended to create the best result.

CASE ONE:

Our patient is a 60 year old female who presents with recurrent decay and soft\hard tissue recession around her existing upper anterior bridge. She also has extensive bone loss and infection around adjacent dental implants. Abutment #22 is deemed non restorable due to caries and the subsequent long pontic span in the anterior is a large concern.



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About my Ceramist:

Masoud Niknejad of Picasso Dental Studios is a Master Ceramist. He maintains his own laboratory in Richmond Hill, Ontario.



Conclusions\Comments: The smile below says it all. She wears lipstick now. She enjoys going out and she has confidence in her communication with others.



CASE TWO:

Are we treating the forest or just some of the trees? In the real world, where not everybody has the last name "Trump", teeth are often restored one tooth at a time. Insurance company coverage is often paramount for treatment to move forward.

Our patient is a 50 year old caucasion female. The case presented here follows the scenario discussed above. Now , our patient returns with rampant caries, dental abscesses and she still has great displeasure with her smile.

Our Goal: Give her back her smile with teeth that will last for many years.

Pre-treatment Photo Gallery

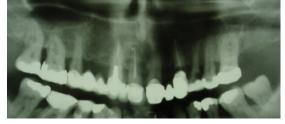












Treatment Plan: Case Two

- Extraction of anterior teeth #15,13,11,21,23,24
- Fabrication of an upper provisional partial denture
- Fabrication of an upper surgical template.
- Surgical placement of 5 tissue level Straumann Implants. Patient continues to wear her upd during healing.
- Fabrication of a provisional acrylic fixed temporary prosthesis maintained with 5 temporary implant abutments.
- Fabrication of a fixed implant partial denture (bridge) retained by 5 implants with pink porcelain as required to compliment the anterior aesthetics.







