

# STARKEYSMILES

## COMPLETE DENTURES



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*There are a number of factors that may influence the success of your complete denture...*

### **DO YOU HAVE A SUBSTANTIAL RIDGE?**

If you have little or no lower ridge (known as flat ridge) there are two ways that you may achieve a functional denture

1. Using a denture adhesive – limited success
2. Implants – extremely successful

Some denture wearers are able to accommodate a denture with limited ridge and others do not – this unfortunately cannot be foreseen.

### **DO YOU HAVE A MOBILE RIDGE?**

A mobile ridge can cause a new denture to be unstable, as the tissues move underneath the denture. This movement will often break the seal (suction) of the denture. A denture made for a patient with a mobile ridge may always feel loose. This mobility may cause sore or tender areas to develop, particularly when eating or talking.

### **DO YOU HAVE A DRY MOUTH? (XEROSTOMIA)**

A dry mouth can be caused by many medications or pre-existing health conditions. Issues that may arise from a dry mouth may include (but are not limited to);

1. Little or no saliva in your oral cavity resulting in friction
2. You may have discomfort when you eat or talk
3. You may have discomfort with your denture, and a tendency for you upper denture to 'drop'.

### **DO YOU HAVE A SENSITIVE 'GAG' REFLEX?**

The gag reflex is a natural bodily response to prevent choking. It is often triggered when something touches the roof of your mouth or the back of the tongue. For some this reflex is particularly sensitive and sometimes even psychological. This can make wearing a complete upper denture very uncomfortable and difficult.

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**DO YOU HAVE A MIXTURE OF NATURAL AND ARTIFICIAL TEETH?**

There are limitations of making a full denture against natural and artificial teeth of the opposing arch. The teeth of the new denture may need to be flattened or scalloped to achieve some contact with the opposing teeth. A patient with a mixture of natural and artificial lower teeth requiring a full upper denture may experience uneven forces when eating, causing the seal of the upper denture to break and the denture to 'drop'.

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**DO YOU HAVE MINIMAL OPPOSING TEETH?**

In this situation the full denture will have limited biting support due to having no teeth on the opposing arch. An unbalanced bite can result in a denture that 'see-saws' or 'rocks'.

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**HAVE YOU WORN THE SAME DENTURE FOR MANY YEARS?**

This often has a detrimental effect on the oral cavity, some of the issues that may result are:

- The tongue may have increased in size causing issues when constructing a new denture with the tongue often dislodging the new denture.
- The vertical dimension may be over-closed and may need to be re-aligned to prevent Arthritis in the TMJ.
- The lower denture once sat snugly under the muscles of the lips which helped to stabilize it. The new denture may sit at the same height or above this muscle which may dislodge the lower denture. Some denture wearers can accommodate this, while others cannot.

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**FULL LOWER DENTURES ARE DIFFICULT TO WEAR**

A lower denture is a 'horse shoe' shape, the tongue resides on the inside of this shape. The tongue is an extremely strong muscle and a large obstacle when keeping lower dentures stable. It tends to push the denture out of place when eating. If you have not replaced lost natural teeth for some time, the tongue may have spread and increased in size. This increase in size makes it even more difficult for the lower denture to stay in place. The size and volume of your lower jaw bone is stimulated by your natural teeth and without your natural teeth the jaw bone flattens. This flattening continues until there may be no jaw bone remaining to hold a lower denture in place.

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