

# DENTURES

## VALPLAST® AND FLEXITE®

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### *For Interim Tissue Borne Removable Partialials*

For decades, the traditional metal partial was the treatment option of choice for partially edentulous patients. However, these could be brittle and stiff, result in tissue irritation and had a high incidence of breakage. Even more important, today's patient demands a cleaner, brighter and more perfect appearance in their restoration – a result that metal often cannot provide.

Now, in addition to our exclusive NaturalFlex™ II (for more permanent tooth borne solutions), Aurum Ceramic/Classic offers Valplast and Flexite – two great options for interim tissue borne prostheses. All three supply more attractive and fully functional removable thermoplastic alternatives to traditional metal partial dentures. Fully hypoallergenic/biocompatible, today's thermoplastics have no metallic taste and reduce patient thermal sensitivity. Typically without free monomer, they also have almost no porosity, reducing biologic material build-up, odours and stains and ensuring higher dimensional and colour stability. Thermoplastics are also more flexible and stronger than acrylics with greater flexibility, reducing fracturing. Virtually unbreakable, they are lightweight and blend seamlessly with the natural tissues for excellent esthetics. The injection process used in fabrication and the strength of the materials allows the prostheses to be made very thin, providing ideal adaptation to hard and soft tissues.

Their strong, durable clasps snap securely and comfortably into place around the existing dentition and the gingival, utilizing soft tissue undercuts for retention. Unlike traditional metal-based partials, there is little or no tooth preparation necessary.



#### Valplast



A nylon based thermoplastic, Valplast is available in one clear and three pink shades. Proven over 50 years of clinical success, the material has a high memory flexibility that's retentive and comfortable, perfectly suited to the variety of normal conditions in the mouth. Valplast appliances must be warmed (by placing case in very hot tap water for approximately one minute, then allowing to cool until patient can tolerate temperature) prior to insertion. Every Valplast partial has a lifetime warranty by the material's manufacturer against breakage and fracture of the base material, assuming normal use.

#### Flexite



Also nylon based, Flexite is thermoplastic material with exceptional toughness and flexibility. Fabricated and fitting like a cast metallic partial, the prostheses' memory is comparable to precious wire, yet they are flexible. Available in one clear, two pink and three ethnic shades, Flexite has over 25 years of clinical history. Unlike Valplast, Flexite prostheses can be repaired and relined in operator *or* in the laboratory either using its own material or with regular acrylic where a bonding agent is applied to non-flexing areas (NOTE: use of acrylic will result in loss of some of partial's flexible properties).

#### Features and Benefits

- Part of Aurum Ceramic/Classic's family of flexible Removable Partial Denture Options:
  - Valplast and Flexite – for interim tissue borne solutions.
  - NaturalFlex™ II – for more permanent tooth borne solutions.
- Hypoallergenic, biocompatible, monomer-free materials.
- True long-term esthetics and strength.
- Tooth or tissue-coloured clasps every bit as thin as metal – without sacrificing function or longevity.
- Both Valplast and Flexite nylon-based.
- Lifetime warranty from material manufacturer on Valplast prostheses.
- Flexite prostheses can be repaired and relined in operator or in laboratory.

## Indications:

- Removable Flexible Partial Dentures
- Removable Bridges
- Fibre reinforced fixed partial dentures
- Tooth or tissue-coloured clasps
- Unilateral Space Maintainers
- Posts
- Temporaries (short and long-term)
- Implant Abutments
- Clasps on existing metal partials
- Obturators and speech therapy appliances
- Orthodontic Devices
- Occlusal splints, sleep apnea appliances and implant abutments.
- Anatomical Bite Restorer (for doctors doing full mouth rehabilitations)

## Contraindications and Concerns:

- Clasps have been crafted in exact proportion for proper function. DO NOT reduce clasp thickness at chairside. This could jeopardize strength and/or retention.
- Deep bites.
- Little remaining dentition with minimal undercuts for retention.
- Where there is less than 4 mm of inter-occlusal space in the posterior area.
- Bilateral free-end distal extensions with knife-edge ridges on lingual tori on the mandible.
- Bilateral free-end distal extension on maxilla with extreme atrophy of alveolar ridges.

## Shade Selection:

- Select shade for teeth and clasps with Bioform® or Vita® Lumin Shade Guide.

## Techniques and Tips:

Flexible partials can be constructed from two good impressions (or models), an accurate bite relationship and a note on the desired shade. For distal extension cases, it is imperative to have either the wax bite rims that were used to verify occlusal dimension or to do a wax set-up try-in.

## First Appointment

(Clinical Examination and Study Model Impression)

1. Conduct a complete clinical examination including Periapical and Panoramic x-rays.
2. Take high quality alginate impressions for both maxillary and mandibular arches. Pour completed impressions in high strength laboratory stone to create accurate Study Models within 5 minutes of impression-taking. Take a bite registration.
3. Provide a complete prescription including usual information pertaining to patient and treatment plan. Send prescription, study models and bite registration to Aurum Ceramic/Classic. The laboratory can complete a Computerized Prosthesis Design on request (ask us for details) or will return mounted study models and bite rims (if bite registration wafers are not sufficient) for next appointment.

## Second Appointment

(Final Impression)

1. Restore the dentition where necessary. Only minimal, if any, tooth or tissue preparation required as indicated by the Design.
2. Using high quality alginate, take a final impression (NOTE: If the opposing model is damaged, take a new impression of this as well). Pour completed impression(s) in high strength laboratory stone within five minutes of impression-taking to create final Master Model.
3. Select tooth shade and mould according to patient needs and established guidelines.
4. Send complete prescription, master model, opposing model, bite registration, articulator and final design to Aurum Ceramic/Classic. Laboratory will return try-in.

## Third Appointment

(Evaluation and Try-In)

1. Examine laboratory-supplied try-in for selected shade, mold, esthetics and bite relationship.

## Fourth Appointment

(Final Insertion)

1. Examine complete finished partial.
2. If Valplast, warm appliance first by placing in very hot tap water for approximately one minute. Allow to cool just to point where can be tolerated by patient.
3. Find an easy path of insertion and insert partial into mouth. Evaluate occlusion, function and esthetics. Check lateral and protrusive excursions. Adjust as necessary.
4. Apply pressure indicating paste to tissue side of acrylic saddles. Reinsert partial into mouth, check for pressure spots and adjust.
5. Demonstrate appliance insertion and removal to patient. Patient MUST be able to perform these before leaving office. Instruct patient in appliance management and care.

## Adjustment Tips

When necessary, adjustments can be made in the operatory with either stones or rubber points. Rubber points and wheels will provide the smoothest surface (especially when adjusting the peripheral edges of the prosthesis) and are ideal for accessing undercut areas. Carbide or acrylic burs are not recommended, as they tend to melt rather than cut the materials.

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