

Removable Partial Denture Problems and Solutions



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PROBLEM

SOLUTION

Very tight fit of clasps, will not allow frame to seat.

Open clasp arm very slightly with pliers to allow frame to seat.

Rests not seating or frame resting on teeth.

Apply disclosing agent to internal contact areas of frame. Insert into mouth. Relieve premature contacts until seating is achieved. Polish adjusted area.

Occlusal interference of rests or connectors.

Identify premature contacts with articulation paper, paste or spray. Adjust metal with carbide burs and polish. Leave minimum 1.5 mm thickness of metal. If necessary, adjust opposing tooth structure.

Finished cast partial is almost, but not completely, seating.

If adjustment of premature contacts does not solve the problem, let patient wear cast partial for 48 hours. Slight movement of teeth might have taken place between appointments.

Patient has problem inserting or removing cast partial.

Practice path of insertion of cast partial on master model repeatedly. Demonstrate to patient in mouth. Let patient try it until it is very easy to accomplish. In rare cases, a notch in the acrylic will help the patient remove the cast partial with their fingernail.

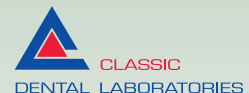
Addition of a tooth, clasp or section to an existing cast partial.

In most cases, it is preferable to take the impression in the mouth with the denture in place and remove it with the impression.

Clasps loose on abutment.

Adjust clasp with Ortho pliers. Ensure adjustment only made to last 1/3 (i.e., the tip) of the clasp. Gradually adjust the clasp step-by-step until the retention is adequate.

For more information on the full range of denture and cast partial solutions, call your closest Aurum Ceramic/Classic laboratory:



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