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Influence of Implant-Retained Denture on Quality of Life of Patients with Partial or Complete Tooth Loss

ABSTRACT

The literature review on implant supported removable prosthetics is presented in this article. Different authors' views are described concerning the problem of implant - retained denture and its effect on patients' quality of life, the results of their study are analyzed as well.

Key words: quality of life, dental implants, removable denture.

In the recent years dentistry has been is on the rise. Possibilities of prosthetic dentistry, and with it needs of patients to treatment have greatly raised the demands. If 40 years ago there were only tentative steps on introduction in practice of dentistry prosthetics on implants, in our days, this service can be offered by almost every dental clinic.

However, despite the appearance of numerous works on the study of properties and characteristics of applying dental implants, the psychosocial effect of this treatment remains poorly studied. Also, many authors have confirmed the influence of the state of oral cavity on psychological status of patients, which suggests that it should be studied as carefully as clinical status. However, it is not always unhealthy dental state affects patient's quality of life, as well as lack of objective pathology cannot be a cause of full satisfaction of the patient, regardless of the quality of aid.

Compared with traditional removable dentures, the implant-retained dentures are associated with more comfort, stabilization, aesthetics, and have a higher positive impact on life quality of patients. Such prostheses are perceived by patients as an integral part of their dentition and thereby significantly simplify everyday life.

According to many studies, prosthetics complete and partial removable dentures with implant support contributes to the enhancement of satisfaction with the prosthesis and improve the quality of life of patients [1,9,12,13,15,23].

According to many authors, the satisfaction of removable protezirovaniia implants depends on various factors. So, according to M. Inukai et al., the correlation between воспринимаемой жевательной эффективностью stomatologicheskoy quality jessicamullen neuleutasch and the number of missing teeth, however, the impact of gender and level of education of patients [3]. M. Al-Omiri et al. notes that prior to the treatment of elderly patients

were more satisfied with their appearance, rather than the young, however, after the treatment, patients of all ages showed the same satisfaction with the prosthesis [8].

As for complete dentures with implant, S. Raps et al. found no significant differences in cancellous wear, stabilization, speech and aesthetics, depending on prepatient. M. Al-Omiric et al. also notes the dependence of satisfaction with the prosthesis from the gender of the patient both before and after treatment [8]. J. Balaguer et al. noted no statistically significant effect of gender on overall satisfaction with the prosthesis. Were not found significant differences between age and различными показателями удовлетворенности, except for stabilization. According to J. Balaguer et al., elderly patients bilimine of удовлетворены стабилизацией протезов. However, men were more satisfied with the chewing of food than women [14].

At the same time, overall satisfaction with removable dentures with implant supported significantly higher satisfaction than traditional full dentures [10,18].

With regard to the area of overlap of the prosthesis and level of satisfaction, T. and B. Bergendal Enguisthe found statistically significant differences between the upper and lower jaws [4]. At the same time, many authors claim that mandibular dentures with implant supported with statistical confidence are perceived by patients as more convenient compared to traditional full removable laminar dentures (MTPP) [7,18].

As to the number of implants to the denture, as well as of S. Temmerman et al., statistically significant differences in the level of satisfaction and number of implants was not found [2].

S. Harderc et al. notes the positive effect of complete dentures on the lower jaw based on the implant 1 on the quality of life of patients and masticatory efficiency. Have been noted 4 fracture of prosthesis basis in the midline [23].

O. Geckili et al., studied the effect of complete removable MTPP on the lower jaw supported on 2 implants on quality of life of elderly patients and also came to a positive conclusion [7].

The aim of another study conducted by O. Geckili et al., was measuring the success of the full removable prosthesis of the lower jaw based on 3 of the implant. We investigated the quality of life of patients using questionnaires and maximum occlusal force and the loss of marginal bone surrounding the implant, three years after prosthetic treatment. As a result, it was found that regardless of the type of attachments, dentures with dental implants is the most effective and preferred for elderly patients [6].

According to G. T. Stoker et al., the most favorable is the use of prostheses with beam locking

system on two implants, as it is less expensive than four implants, but no less reliable and does not require frequent visits to the dentist, when you commit on the spherical attachments [19].

According to A. Preciadoc et al., the most comfortable to wear are mandibular MTPP with implant supported than the maxillary. At the same time, A. Preciado noted that the presence of as traditional antagonist MTPP significantly lowers the quality of life of patients. The authors also found that fixation nacherbeneinsetzung most simplifies the use of dentures and eating in particular, while the presence of ulcers of the oral mucous membrane or candidiasis was observed only when using girder fixation systems [5].

Remains poorly studied the quality of life of patients with partial edentulous. According to H. J. Nickenig et al. the quality of life of these patients after dental implantation has changed from 17.1 to 5.4 on a scale OHIP-G 21 he neared that of the control group with preserved dentition (3,4 scale OHIP-G 21) [12].

W. D. Gates et al. also evaluated the quality of life of patients with partial edentulous after the installation of removable partial dentures with implant supported. According to the authors, the estimate of the scale OHIP-49 decreased by an average of 11.8 points in 12 weeks after implantation [20]. M. Fillionc et al. in a similar study uses the index of the GOHAI and also notes a significant increase in the quality of life of patients, regardless of the number of implants and time between studies [21].

According to research by D. Lopsc et al., for removable prosthesis may be freely applied shortened dental implants that can replace standard implants in difficult anatomic conditions (severe atrophy of the alveolar part of the mandible, pneumatic type top jaws). The authors noted the poor survival rate of short implants only in the distal part of the maxilla, where it often occurs III-IV тип bone tissue [17].

S. Annibalic et al. notes that removable dentures, fixed on a shortened dental implants are a good solution for patients with significant atrophy of the alveolar crest in the short term, however, to identify long-term results, further studies are needed [16]. However, regardless of the type of implants, patient satisfaction with prosthesis remains consistently higher than with dentures, traditional dentures.

As for the economic side of the question, then, according to V. Nicolaec et al., by correctly informing patients about the benefits of implant prosthetics, even if they had not received such treatment previously, patients make decisions about treatment and paid even ready to monthly payments [11].



The restoration of dentition defects with partial and complete dentures-driven intraosseous dental implantational not just eliminate the aesthetic disadvantage, but also greatly facilitate the adaptation of the patient to wearing prosthetic design, to eliminate the feeling of insecurity and to a large extent fill chewing efficiency, which in itself contributes to the quality of life of the patient. Thus, questions the widespread introduction of removable prosthesis based on intraosseous implants in dental practice remains current.

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