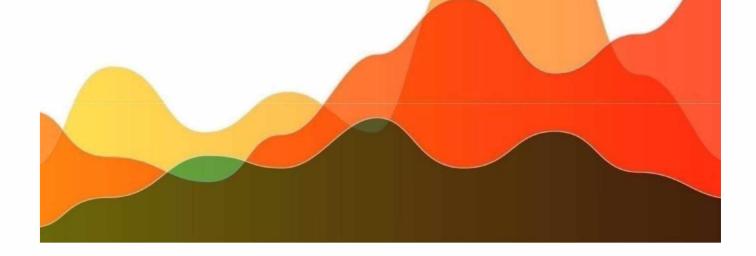
ADVANCES OF SCIENCE

Proceedings of articles the international scientific conference Czech Republic, Karlovy Vary -Ukraine, Kyiv, 5 April 2019



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METHOD OF PROTECTION OF THE RECEPTOR APPARATUS OF THE TEETH WHICH USE TO SUPPORT NON-REMOVABLE DESIGN OF DENTURE BY PROPOSED METHOD.

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There has been an increase of cases of tooth pulp removal in intact teeth supporting non-removable design of denture with the purpose of preventing possible complications following teeth hard tissues preparations that involve opening and possible damage of dentine tubules that results in disorder of hydrodynamic processes in odontoblast's processes. [1,2,3,4]

The possibility of compensatory mechanisms starting depends on the size of dentine layer taken off. But these protection mechanisms do not always start.

Therefore, the stage of pulp removal in supporting teeth is brought to the forefront of the preparation for dental prosthetics. However, the research has proved that this is manipulation decreases greatly the strength of dentine, this leading to a considerable frequency of crown's part of teeth damage after prosthesis, a decrease in strength and resistance to masticating pressure under functional load.

The purpose of our research was to develop a new method of stump protection of supporting teeth on the stage of treatment by non-removable design of denture.

Materials and methods of research: Clinical research involved 72 patients with 264 supporting vital teeth being examined. 15 patients out of them with 63 supporting teeth made up the control group; the test group to be made up by 57 patients with 201 supporting teeth being examined.

Examination of the teeth pulp state before and after preparation was conducted by means of electroodontometrical (EO) and determination of masticatory load (ML) with the help of our method proposed (patent N_{P} 99095142 of 15.03.2001 bulletin. $N_{\text{P}}2$). The following method of protecting the stumps of teeth after preparation of hard tissues (patent N_{P} u 200605121 of 15.09.2006. bulletin. $N_{\text{P}}9$) was used : the start of preparation by means of electroodontometros was preceded by measuring the initial sensitivity of tissues of the teeth to be used under supporting elements of nonremovable denture.

The rates of maximum masticatory load of teeth in position of central occlusion were determined by the method proposed. The injection infiltration anesthesia was conducted, followed by preparation of hard tissues of the teeth. After the preparation the finish of anesthesia effect was awaited and sensitivity of teeth measured again, the rates of maximum masticatory load were determined.

Then, by means of etching gel the lubricate layer was removed from their surface. Then the gel was washed off by stream of water, the stumps were isolated by cotton rolls from mouth liquid and dried by warm stream of air. The antigomotoxic preparation "Traumel" was applied to the surface of stumps by applicator and spread evenly over the surface of stumps by warm stream of air. Then the new adhesive composition "Dentasiv" was applied. The remains were removed by warm stream of

air and lighted during 20 seconds. To decrease the effect of environment on tissues of stumps of the teeth the temporary crowns were fixed which were manufactured before preparation with the help of GNJ Tempo lux company materials by standard method.

The measurement of the teeth sensitivity and determination of the rates of masticatory load were conducted for the second time in one month after preparation. The analysis of the rates was aimed at identification of the dynamics of rates (EO and ML) which was to arise after the operation of preparation of hard tissues of the teeth, the efficiency of the proposed method with regard to control, and determination of the factors which could have effect on positive as well as negative alterations.

For verification of the analysis data the method of dispersed analysis (ANOVA) was used which was implemented by program pack SAS.

The findings show that in the group where our method of protection of the stumps of supporting teeth was used the data of EO and ML in more than 50% of cases remained on the same level after one month after the preparation and before the operation of preparation irrespective of anatomical shape of teeth. But in the control group where our method was not applied the same data showed a sharp increase in one month and the anatomical form of the tooth was significant. The most significant increase in rates was observed in incisors, then in canines, premolar and the least one in molar.

Conclusions: on the basis of clinical research the positive effect of our method in protection of stumps of intact teeth after preparation on the stage of treatment by non-removable design of prosthesis is evident, thus enabling the method to be used widely in the daily practice of the orthopedic dentist.

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