Topic of lecture : ***Occlusion. Factors of occlusion. The clinical meaning recovery the individual occlusion, means and stages it's achievements.***

*Teacher : Dudina I. L.*

Plan of lecture

* Relationship thees and dental rows.
* The clinical examination of occlusial.
* Investigation the diagnostic models.
* Registration the movement of lower jaw.
* Correction occlusial by method of selective lapping.
* Occlusial devices (kapp, splints).
* The treatment of occlusial disorder by removable and non-removable dentures.
* Orthodontics correction of occlusial disoder.

Correction occlusial surface like preliminary stage the prepare to orthopedic treatment.

* **Phenomem Popova-Godona** – displacement teeth in different direction after formation the defect in dental arch which to lead to deformation the occlusial curve. Complication which to development after extraction the part of teeth and may be to meet in any age.



**Relationship tooth with antagonist and near standing in moment the functional loading Godon (1905) present in form of parallelogram of force.**



**The clinical picture to depend from topography and size of defect.**

* Distinguish the next possible direction displacement of teeth **:**
* vertical;
* Medial slope;
* Distal slope;
* Slope in lingual (palatine) direction;
* Slope in vestibular direction;
* Combained displacement.

**The clinical forms of phenomen Popova-Godona on V.А.Ponomarijova**

* **First form to** discrube by simultaneously with displescement of tooth present the veseble increase the alveolar process but don't mark uncovering the root of tooth and formation the gindival pocket. Relationship between extra and intraalveolar part of teeth to stay invariable.
* **Second form: displescement** of tooth which to accompany the effect of athpophy tissue of paradontium and uncovering the cement of root. In second form to select two subgroup.
* **First subgroup to describe**я by veseble increase the alveolar process in slight in limit on ¼ resorption of paradontium.
* **In second subgroup** are increase the alveolar process don't the resorption of tissue of parodontium at level on half and more.

**Basic manifestations of deformation**

* Part absent teeth;
* Disoder the occlusial curve (infra- or supraocclusial position of tooth or teeth);
* Absent decrease (reduction) of occlusial height;
* Decrease distance расстояния (or full absent) between occlusial surface of displacement tooth and alveolar processes oposit jaw

**Additional manifestation of deformation:**

* Increase of volum of alveolar processes;
* Present or absent the resorptions of paradontium of displacemens teeth;
* Absent change of hard tissue and paradontium of all saving teeth.

**Differential diagnosis of part secondary absent teeth which to complicated by phenomen Popova- Godona**

* From part secondary absent teeth, which to complicated by decreased the height of occlusial of lower jaw;
* From part secondary absent teeth, which to complicated by excessive attrition of hard tissue of and decreased the height of occlusial;
* From part secondary absent teeth of both jaws when don't save nothing pair of teeth antagonist.

**Investigation the diagnostic models**

* Need to specify the tipe of bite, deep of incisors overlap, character clousing the palatine and lingual casps and the size of dentoalveolar extension, character occlusial curve,relation the separate teeth to membrane mucouse of edentulous alveolar processes, character medial or distal movement of teeth,supracontacts, where arise the block of movement of lower jaw, the level shortening the teeth and other.

**Complication of deformation**

* Deformation of occlusial curve;
* Decrease of occlusial height;
* The distal displacement of lower jaw.

**Medical purpose**

* Normalization of occlusial divergence;
* Removal the block of movement of lower jaw;
* Removal the function overload the paradontium of teeth;
* Normalization the function of temporo-mandibular joint;
* Making condition for manifacturing the rational design of denture

**Prevention include the warning**:

* The functional overload of paradontium of teeth;
* The disoder of function of TMJ;
* The disoder of function of masticatiry muscles.

**Normalization the occlusial relationship of dental rows by:**

* Griding the casps of displacement teeth;
* Shotening teeth which make the block of reconstraction of occlusial plane and if need extract the pulp;
* Recover the height vertical demention;
* Ovarlap the spesial denture which to arise the rebuilding the hypertrophied area of alveolar processes (apparatus or ortodontic method);
* Ovarlap the spesial denture which to arise the rebuilding alveolar processes with preliminary compactosteotomн (corticotomy) (apparatus-surgical methods);
* Extraction of teeth if need with resection (alveolotomy) the part of alveolar processes (surgical method);
* Prosthetics.

**Treatment of part secondary absent teeth which to complicated by phenomen Popova-Godona:**

* Method of grinding the hard tissue teeth which are displacement;
* Method sequential disocclusial;
* Apparatus-surgical - combination method of sequential disocclusial with preliminary corticotomy
* Surgical method — extraction the displacement teeth.

**Method of grinding**

* **Indication:**
* Age older theth 35 - 40 year in displacement teeth behind the prostetic plane no more than half of vertical size this is tooth (teeth).
* Second form of phenomen Popova–Godona;
* Unsuccessful to use the method of disocclusial.

**Method of grinding**

* Method indication in first form of pfenomen Popova-Godona at person not older then 35 - 40 year.
* Medical device are present the laminer ot clasp denture with sting area which antagonist with displacement teeth and to disunite the bite on this area of dentition.



**Apparatus-surgical method**

* Apparatus-surgical method to use in case when to develop the inflammatory reaction at displacement teeth, absent effect of restructuring in alveolar process in 3-4 weeks after treatment.
* **Indication:** one may to apply only in first form of phenomenPopova -Godona and in absent contindication to use the surgical intervention.

**Surgical method**

