



INSTRUMENTAL AND FUNCTIONAL MANAGEMENT OF VERTICAL DIMENSION OF A TEETH GRINDING PATIENT IN UPPER AND LOWER FULL-ARCH REHABILITATION : REPORT OF A CASE STUDY.

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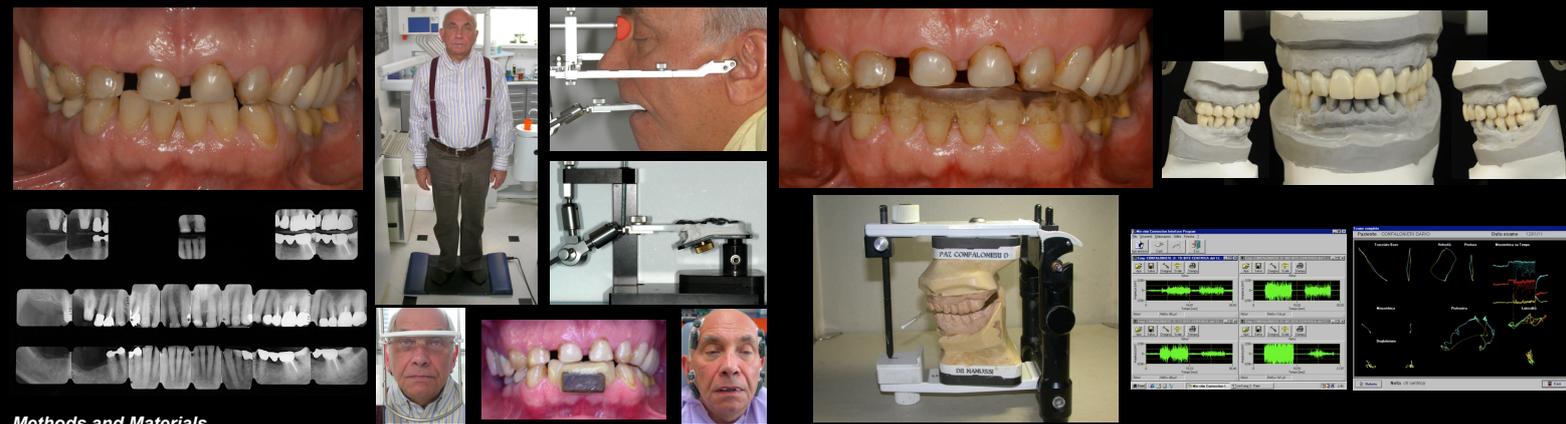
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Purpose

The objective of this work was the management of the rise of the original vertical dimension of a teeth grinding patient, appeared with extensive loss of tooth substance in both arches. We have combined the function of upper periodontal surgery, necessary to restore the correct dento-periodontal relationships, to the use of a booster device (pre-prosthetic bite) applied on the natural dentition of the patient, therefore, on its usual vertical dimension. (Specific instrumental tests have been used to find the tolerated and correct vertical dimension, transferring it in the first and second provisionals, and in the final work).



Methods and Materials

Without altering the original vertical dimension of the patient, and without doing any prosthetic procedure, we initially acted carrying out instrumental evaluations such as surface electromyography to evaluate the response of the elevator muscles to the set vertical dimension, the stabilometry on baropodometric platform, to verify any eventual relationship with the postural attitude and balance control strategies, and kinesiography for the registration of Posselt, of free space, of disclusion paths along the rails, of repeatability of the centric and vectors and speed of the mandibular movement in opening, closing, clearance and swallowing. An Easy Bite photo-polymerizable device has been used for the observation of the occlusion in the pre-prosthetic phase, facilitating clinical, instrumental and radiological analysis.



Results

The outcome of these instrumental and functional verification has resulted in the manufacture of a pre-prosthetic bite that the patient has led for 4 months before proceeding with the manufacture of the first provisional teeth. The rise practiced by the device was well tolerated, free from the occurrence of complications or inconveniences such as pain in the temporo-mandibular joint, headaches or muscle tension.



Conclusions

In the illustrated case, according to our opinion it is better to practice an increase in the vertical dimension subject to reversibility, that is without preparing first of all the teeth and apply the provisional ones. It seems important to emphasize that, in order to ensure longevity to the final rehabilitation, an important role is played by the materials used, that is traditional metal-ceramic combined with monolithic lithium disilicate in the posterior sectors, and even stratified lithium disilicate using the cut-back technique in aesthetic sectors such as the upper front sector.