

**STABILIZATION OF PATIENTS USING A FULL-REMOVABLE PLATE  
PROSTHESIS MADE OF INDIVIDUAL TRAYS MADE OF PLASTIC ON AN  
ACRYLIC BASE**

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**Resume:** The article discusses the symptoms and clinical stabilizations in patients using an individual spoon made of Acrylic plastic of a full-body lamellar prosthesis. There was a medical and social problem, nekhodimost development of new technological effective complex treatment of patients with partial and full teeth.

**Key words:** Acrylic, noracryl based, individual spoon, stomatitis, prosthetics, questionnaires.

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**Importance of the subject**

Orthopedic treatment of patients with complete absence of teeth is an urgent problem of modern dentistry. According to a number of data, orthopedic structures should be improved at certain clinical and laboratory stages of plate prosthesis preparation. In orthopedic treatment, patients refuse to use removable prostheses due to stabilization for various reasons. The complete absence of teeth is accompanied by the optimal activation of the chewing function and the loss of chewing efficiency. In the dental literature, the issues of the complex interaction of temporomandibular joint occlusion, masticatory muscles and biomechanics are insufficiently covered. After orthopedic treatment, a decrease in favorable conditions for optimal oral hygiene was noted. In prosthodontics, oral cavity preparation is not given enough attention. Certain methods of taking molds in the complete absence of teeth have certain disadvantages, especially in prosthetics with the help of full dentures. Along with their advantages, they have a number of disadvantages: prostheses made of these materials can cause toxic and allergic reactions. Thermoplastic materials currently used for the production of fully removable prostheses have flexibility, elasticity and aesthetics. These prostheses are attached to the teeth due to the dentoalveolar clamps and pelots, which belong to the retaining type of clamps and have certain disadvantages, functional non-distribution of the occlusal load on the abutment teeth and stabilization along the plane. The most functional and aesthetic prosthesis in the prosthetics of partial dental cavity defects is the production of a clasp-type prosthesis. Patients are treated with the problem of breaking the removable part of the structure, while the non-removable part remains functional in the oral cavity. In long-term follow-up, in some cases, as a result of the development of periodontal disease or complex forms of caries, it is necessary to remove the supporting tooth. Clip-on prostheses of this design cannot be used because the clinical situation has changed. Alternative solutions are required for these technologies. The analysis of local and foreign literature revealed the need to improve orthopedic training and comprehensive treatment of partial and complete absence of teeth. Due to urgency, there was a need to solve medical and social problems and develop new technologies for effective complex treatment of patients with partial and complete absence of teeth. The purpose of the study.

Determining the clinical and anamnestic prognoses of stabilization in patients using a fully removable plate prosthesis made of Villacryl-based plastic.

#### **MATERIALS AND METHODS.**

Edentulous patients were examined by this method. Among those who participated in the survey, there are women and men. All patients previously had their full removable prostheses made based on an anatomical mold.

All clinical and laboratory stages in the preparation of prostheses were carried out without errors and defects. Patients were made two prostheses (the first one was on a standard spoon, the second one was on an individual spoon) and underwent clinical and functional examination. In the clinical study, we took into account the presence of prosthetic stomatitis, the development of allergic reactions, occupational hazards, bad habits, allergic diseases, dental diseases and accompanying pathologies.

#### **RESULTS**

As a result of these investigations, patients who wore prostheses made by molding without tests on standard spoons, the stabilization of the jaws was restored due to the anatomical structure and adaptation. Stabilization was not restored in the remaining patients. Stabilization of the prosthesis was restored in patients who wore a prosthesis fixed to it by taking a functional mold with the help of an individual spoon. As it turns out, signs of getting used to it have developed after prosthetics. Clinical manifestations include discomfort in the oral cavity, burning of the mucous membrane of the oral cavity, dry mouth, impaired sensitivity and changes in taste sensations, hyperemia. It was found that the stabilization of dental prostheses was high in patients who used individual spoons made of Villacryl-based plastic in case of complete edentulism.

#### **CONCLUSION**

In case of complete edentulism, stabilization of prostheses prepared by taking a functional mold using an individual spoon is convenient for the patient.

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