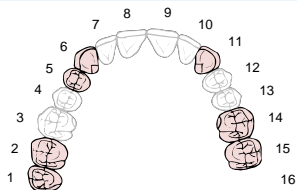
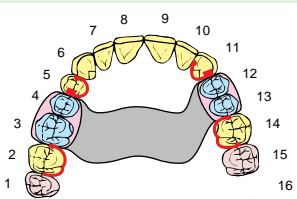


Case Design #107



Combination Toothborne

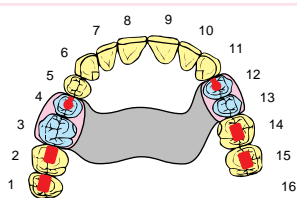
The restorative options for this situation include a one-piece fixed bridge, segmented bridges; implant restorations (single units or splinted) or removable partial denture in cases with severe tissue defect. For cases with divergent abutments, segmented bridges are necessary. Intracoronar or extracoronar locking attachments may be utilized. The attachments may be lockable or standard.



Option #1 Intracoronar Solid

Removable Partial Denture with fixed bridge from #5 to #11. Intracoronar attachments and milled linguals on #5 & #11. Conventional clasps or milled linguals on #2 and #14. Plunger attachments such as the Hannes Anchor, SwissTac or Tach-EZ are an alternative to conventional intracoronar attachments. Keep rugae open for comfort if possible.

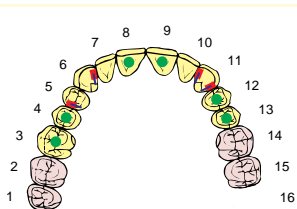
Attachments Indicated: Score-PD with a Score UP female, PT-Snap, Biloc, etc or Hannes Anchor, SwissTac or Tach-EZ plunger attachments.



Option #2 Extracoronar

Removable Partial Denture, fixed bridge between #5 and #11 with distal extension attachments and telescopic copings on #1-2 and #14-15. Should any of the molars fail, the restoration is easily modified. Milled linguals may be fabricated on #5 and #11

Attachments Indicated: Mini Dalbo or Swiss Mini, ASC 52, Swiss Anchor, Strategy, Bredent, D2.7, etc.



Option #3 Implant Bridges

Segmented bridge with operator removable pontics and implant section. Score-UP attachments may be placed on the mesial of #6 and #11 and distal of #5 and #11. Implant crowns may be made with straight or angled Titanium Abutments or UCLA Abutments.

Implant Components Indicated: Straight or Angled Titanium Posts or UCLA abutments.

Attachments Indicated: Score-UP or Large Omega-M, PDC or Score-BR.

The attachments may be inverted on #24 and #26.