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COMMUNICATING THE IMPORTANCE OF DENTURISTS

How to Reline 3D Printed Dentures with PacDent's Rodin Soft Reline Kit

Dr. Byron Park

From Long-Term Provisional to Extended Zirconium Oxide Restoration

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President's Message

Building Bridges, Strengthening Our Profession

This past May, I had the privilege of representing the National Denturist Association in Victoria, British Columbia, where I attended the Denturist Association of British Columbia's (DABC) 75th Anniversary Convention, Canada's Annual General Meeting and Trade Show, as well as the International Federation of Denturists (IFD) Round Table Meeting.

I returned home with something that cannot be measured in meeting minutes or conference agendas, a renewed sense of optimism for the future of our profession.

From the moment I arrived, I was welcomed with genuine kindness, professionalism, and respect. Every conversation reinforced what so many of us already know: regardless of which side of the border we practice on, we all share the same passion for improving patients' lives through quality prosthetic care.

Canada has a long and proud history of advancing the denturist profession. While our regulatory systems differ, our commitment to patient care, education, innovation, and professional excellence is remarkably similar. I found myself inspired not only by the advancements our Canadian colleagues have achieved, but also by their willingness to openly share their experiences, successes, and lessons learned. The openness and camaraderie throughout the meetings served as a reminder that we are all working toward the same goal, to strengthen our profession and improve the lives of the patients we serve.

One of the most encouraging aspects of my visit was the overwhelming support shown for the denturist profession in the United States. Many of the conversations centered around the exciting progress taking place here, and our Canadian colleagues expressed a genuine interest in becoming more involved with the NDA. There was a tremendous sense of enthusiasm about increasing collaboration between our organizations, sharing educational opportunities, and learning from one another's experiences.

Those relationships are only beginning.

As President of the NDA, I firmly believe our association has an incredible opportunity to strengthen international partnerships. By exchanging ideas, educational resources, research, clinical techniques, and regulatory experiences, we all become better clinicians and stronger advocates for our profession. The friendships formed in Victoria reinforced that our profession is much larger than any one province, state, or country.

Here at home, our profession also continues moving forward.

Montana's Executive Order 1-2026 licensing reform process continues to make progress. While there is still important work ahead, I remain encouraged by the thoughtful conversations taking place. The guiding principles of allowing healthcare professionals to practice at the top of their education and demonstrated competency, improving access to care, particularly in rural communities, and ensuring regulations remain focused on patient safety and evidence-based practice align closely with the values our profession has championed for decades.

The NDA has remained actively engaged throughout this process, advocating for recognition of the education, clinical training, and expertise that denturists already possess. Our goal has been a better policy that protects patients while allowing qualified professionals to provide the care they are educated and trained to deliver. We remain hopeful that the final outcome will be fair, equitable, and reflective of the important role denturists play in expanding access to oral healthcare.

Whether I am meeting with colleagues internationally or speaking with denturists here at home, I continue to see the same thing: our profession is gaining momentum. More



Randy McHenry, LD BTSc
President of National Denturist
Association, U.S.A.



***Whether I am
meeting with
colleagues
internationally
or speaking with
denturists here at
home, I continue to
see the same thing:
our profession is
gaining momentum.***





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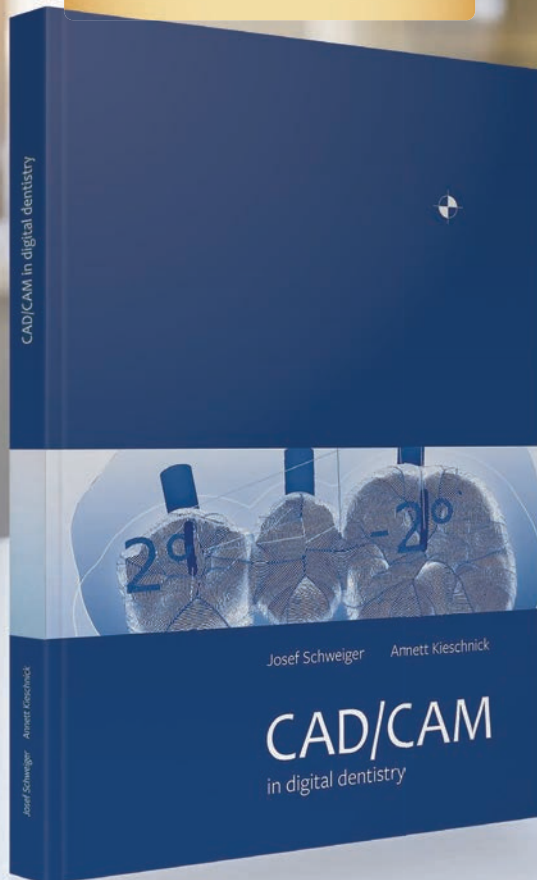
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policymakers, educators, healthcare providers, and patients are recognizing the important role denturists play in restoring smiles, improving quality of life, and expanding access to care.

That momentum exists because of you.

Every clinician providing exceptional patient care, every volunteer serving at the state or national level, every educator mentoring the next generation, and every member who advocates for our profession contributes to our continued success.

As we look toward our NDA Annual Meeting this October, I encourage every U.S. denturist to be part of the conversation. Our profession continues to evolve, and there has never been a more important time to come together, share ideas, learn from one another, and help shape the future of denturism in the United States. Whether you are a seasoned practitioner or just beginning your career, your voice and your experience matter.

Our annual meeting is much more than a conference. It is where relationships are built, new ideas are shared, clinical knowledge is expanded, and the future direction of our profession is discussed. Every member who attends strengthens our association and helps ensure that the NDA continues to be the unified voice for denturists across the country.

The challenges we face are real, but so are the opportunities ahead of us. Across the United States, denturists are demonstrating every day the value we bring to patients, our communities, and the healthcare system. Through continued education, professional involvement, and a unified commitment to excellence, we can continue advancing our profession and expanding access to quality care.

The future of denturism has never looked brighter. By standing together, supporting one another, and remaining engaged in our state and national associations, I have no doubt that the best days for our profession are still ahead.

I sincerely hope to see many of you at our National Denturist Association Annual Meeting this October. Together, we will continue building a stronger association, a stronger profession, and an even brighter future for denturists and the patients who depend on us.

Respectfully,

Randy McHenry

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The Esthetic Consultation: Preserving Traditional Skills in a Digital World



Amanda Rowe Bronson,
LD., VP, National
Denturist Association

Denturists practice in a time of rapid technological advancement. Digital dentures, scanning workflows, and AI driven design tools are changing how dentures are produced. Yet one of the most important details of patient satisfaction remains unchanged: tooth selection.

At the center of denture therapy is the ability to restore not only function, but identity. While workflows continue to evolve and new technologies trend across dentistry, the clinician's role in guiding esthetic decisions remains essential. Traditional principles of tooth selection, evaluating facial characteristics, phonetics, personality, and patient expectations, continue to influence how natural and comfortable a denture ultimately feels.

Technology can reproduce form, but it cannot independently interpret individuality.

When was the last time you opened your tooth cabinet with a patient?

Do you routinely show different tooth molds and shapes, or do you make those decisions yourself? Do you encourage patients to bring photographs of their natural smile or discuss the characteristics they hope to recreate? If your practice utilizes digital workflows, do you review digital tooth libraries with your patients, or do those decisions happen behind the scenes?

There are no right or wrong answers, but I believe these conversations deserve renewed attention.

Tooth selection is not simply another step in fabrication. It is one of the most meaningful opportunities we have to involve patients in their own denture therapy. For many individuals, replacing missing teeth is about much more than restoring function. It is about restoring confidence, familiarity, and lost identity.

Patients rarely ask for a specific mold. Instead, they tell us they want to “look like themselves again.”

Translating that simple request into clinical decisions requires experience, observation, and artistry. Facial shape, lip support, smile line, age, personality, and even lifestyle all influence the esthetic outcome. Those decisions cannot be made from software alone.

One of the greatest strengths of our profession is that denturists combine clinical care with laboratory understanding. We are uniquely positioned to bridge patient expectations with technical execution. That combination allows us to guide patients through esthetic decisions rather than simply making those decisions for them.

When I invite patients into the tooth selection process, I often see a noticeable shift in their confidence. Showing different molds, discussing subtle differences in tooth shape, or explaining why one option may better complement their facial features transforms the appointment into a collaborative experience. Patients enjoy participating. More importantly, they appreciate understanding the thought process behind our recommendations.

That doesn't mean every request should be granted. Our responsibility is still to provide professional guidance. Sometimes the best part of an esthetic consultation is helping patients understand why one choice may function or appear more naturally than another. The goal is collaboration, not simply selection.

In today's environment, where technology continues to trend toward efficiency and automation, individualized esthetic consultation may be one of the greatest values denturists continue to offer. Whether your practice uses a traditional tooth cabinet or digital smile libraries, patients benefit from seeing options, asking questions, and participating in decisions that will affect how they look every day.

Traditional principles remain just as relevant in digital denture therapy. Digital tooth libraries are built upon decades of research, clinical experience, and tooth mold development. Technology simply gives us another way to present those options. It does not replace the clinician's ability to evaluate facial harmony, interpret patient expectations, or recommend the most appropriate treatment.

Some practices may even choose to emphasize the esthetic consultation as part of their service model. Taking additional time to discuss tooth molds, shade choices, characterization, facial harmony, and patient preferences is more than an added

feature. It reflects the value of individualized denture therapy and the expertise that denturists bring to every case.

Whether those conversations happen with a traditional tooth cabinet or a digital smile library is ultimately less important than the conversation itself. Patients appreciate being included in decisions that affect how they will look every day. When guided with sound clinical judgment, that collaboration often leads to greater confidence, stronger trust, and better long term satisfaction.

As our profession continues to embrace new technologies, I hope we continue to preserve the skills that have always defined exceptional denturism. Tooth selection is more than choosing a mold from a catalog or clicking through a digital library. It is an opportunity to listen, educate, and design a prosthesis that reflects the individual sitting in front of us.

The future of denturism is not about choosing traditional over digital. It is about knowing when each serves the patient best. The most successful denturists will be those who embrace innovation while preserving the clinical judgment, artistry, and personal connection that have always defined our profession.

Trends will continue to evolve. Technology will continue to improve. But individualized denture therapy, thoughtful esthetic consultation, and sound clinical judgment never go out of style. ■



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2026 ANNUAL CONFERENCE

OCTOBER 7TH - 9TH
PLANET HOLLYWOOD, LAS VEGAS

National Denturist Association 2026 Annual Conference Heads to Las Vegas

The National Denturist Association (NDA) is preparing to bring denturists, laboratory professionals, industry partners, and educators together for its **2026 Annual Conference**, taking place **October 7-9, 2026**, at **Planet Hollywood Resort & Casino in Las Vegas, Nevada**. With a program focused on clinical excellence, digital innovation, business growth, and patient care, the conference promises to deliver valuable continuing education opportunities while highlighting the future of the profession.

This year's event will feature approximately 15 continuing education hours and an agenda designed to address both the technical and operational challenges facing modern denturist practices. The conference opens on Wednesday, October 7, with a keynote presentation by Patrick Allen exploring how the Biofunctional Prosthetic System (BPS) has elevated clinical, technical, and digital denture workflows. Attendees will gain insight into the advantages and considerations of both analog and digital processes, helping practitioners evaluate how emerging technologies can enhance treatment outcomes.

Innovation continues to be a central theme throughout the conference. One of the featured sessions, presented by practice management advisor Dean Fenwick, examines the growing role of artificial intelligence within denturist clinics. The presentation will demonstrate how AI-assisted tools can improve charting accuracy, streamline administrative tasks, support after-hours patient communications, and help practitioners maintain efficient workflows while remaining mindful of privacy and regulatory requirements.

In addition to educational programming, attendees will have the opportunity to participate in the NDA Townhall,

where association leaders and representatives from across the country will discuss legislative developments, scope-of-practice issues, advocacy initiatives, and trends shaping the future of denturism. The interactive format is designed to encourage dialogue and collaboration among practitioners nationwide.

Beyond the educational content, the conference will include an exhibit hall, networking receptions, sponsored educational sessions, and social events that provide opportunities for attendees to connect with colleagues and industry leaders. The NDA has also secured special hotel rates for conference participants at Planet Hollywood, making it easier for members and guests to take advantage of this premier professional development event.

As the profession continues to evolve through advances in digital technology, regulatory changes, and patient expectations, the National Denturist Association's 2026 Annual Conference is positioned to be an important gathering for those seeking practical knowledge, professional connections, and a vision for the future of denturism.

Attendees are encouraged to visit the NDA conference website regularly for the most up-to-date agenda, speaker announcements, registration information, and event details:

<https://nationaldenturist.com/2026annualconference/>

You are formally invited to join your fellow Denturists in the USA to help them celebrate their Annual Convention this Oct 7-9, 2026 at Planet Hollywood in Las Vegas.





2026 ANNUAL CONFERENCE

OCTOBER 7TH - 9TH PLANET HOLLYWOOD, LAS VEGAS

2026 Schedule of Events

Wednesday, October 7th

11:00 am - 5:00 pm	Registration Open
1:00 pm - 3:00 pm	Keynote General Session 2 CE
3:00 pm - 3:15 pm	Break & Snacks
3:15 pm - 4:15 pm	NDA Townhall 1 CE

Thursday, October 8th

7:00 am - 8:00 am	Buffet Breakfast in Exhibit Hall
7:00 am - 4:00 pm	Registration Desk Open
8:00 am - 10:00 am	General Session 2 CE
10:00 am - 10:15 am	Break
10:15 am - 11:45 am	General Session 15 CE hours
11:45 am - 2:00 pm	Expo Hall Opens with Lunch Buffet
2:00 pm - 3:00 pm	Concurrent Breakout Sessions 1 CE
3:00 pm - 3:15 pm	Break
3:15 pm - 4:15 pm	Concurrent Breakout Sessions CE
4:15 pm - 4:30 pm	Break
4:30 pm - 5:30 pm	General Session 1 CE hour
6:30 pm - 9:30 pm	Reception/Dinner

Friday, October 9th

7:30 am - 8:30 am	Breakfast Buffet in Expo Hall
8:30 am - 10:30 am	General Session 2 CE
10:30 am - 11:30 am	General Membership Meeting 1 CE
11:30 am - 1:30 am	Lunch Buffet in Expo Hall
1:30 pm - 2:30 pm	Concurrent Breakout Sessions 1 CE
2:30 pm - 2:45 pm	Break
2:45 pm - 3:45 pm	Closing Keynote

This schedule is tentative, subject to change.

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NDA Member	\$500
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2026 ANNUAL CONFERENCE

OCTOBER 7TH - 9TH
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Dr. Nicolas Rohde,
Chief Strategy Officer at
vhf manufacture AG

3D printing offers perspectives – it is not a paradigm shift

Manufacturing complex geometries using additive processes such as 3D printing has become a key to success in many technological areas. These printers often produce parts that would be very complex or, in extreme cases, impossible to produce using tool-based production methods. In dental laboratories, however, the situation is different: The subtractive manufacturing of restorations in milling machines leaves virtually no gap open for alternative technologies to enter, arguing that they offer solutions that didn't exist before.

The main advantage of dental 3D printing and the use of printing resins is therefore the time and cost savings. This is certainly true when it comes to the printing process itself: 3D printers offer the possibility of producing large quantities of situation and working models or drilling guides in a short time. Printing can also be a cost-effective option for temporary restorations and can make work in dental laboratories and dental practices more efficient. However, a realistic assessment of the effort involved requires considering the entire process until a restoration is ready for use. When comparing the workflows of dental milling technology and dental 3D printing, milling is the more streamlined process: Although milling the restoration takes somewhat longer, the time and personnel required for preparation and follow-up are less significant. Pre-sintered blanks can be clamped directly into the machine, and for the final sintering or crystallization, many laboratories have high-speed furnaces that operate with cycles of less than 20 minutes.



For permanent prosthetics, milling technology remains the only alternative.



In contrast, before a 3D printer can even get started, most printing resins must first be prepared. Depending on the

material and ambient temperature, it can take more than two hours for a brand-new bottle of resin to be properly heated and mixed. Even after the actual printing, a series of steps follow that offset the time savings. For example, curing in UV light units is a quality-critical and, depending on the material, also time-consuming process. Dental labs considering whether 3D printing could be a technology that could support their daily work should consider two additional factors:

- Most pressure-sensitive materials used to fabricate dentures—even those with a high ceramic content—contain synthetic resins that reduce the overall flexural strength of the restoration. As a result, they are rarely suitable for permanent restorations.
- Furthermore, the durability and biocompatibility of milled ceramics have been proven by numerous studies. Since these materials are virtually inert and do not cause toxic reactions, there is no risk of subsequent inflammation or allergic reactions. 3D printing, on the other hand, is still in its early stages of clinical application with many of the materials it uses. However, due to the harmful chemicals in 3D printing materials, great care must be taken both during production and subsequent curing.

Personally, I haven't needed any dentures to date. If that were to change, I would be perfectly fine with the dental lab using 3D printing as a supporting technology. I would also be happy with a temporary printed restoration, as it doesn't have to last long. But for a permanent restoration, I would have no alternative to an all-ceramic solution. ■



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Current Social Media Strategies for Denturists

In the digital age, social media has become an indispensable tool for professionals in the dental industry, including denturists. As more patients turn to online platforms for information and services, denturists have an exciting opportunity to engage with their community, educate patients, and showcase their expertise. However, to make the most of social media, denturists need to adopt strategies that not only promote their services but also foster trust and build lasting relationships.

Here are some current social media strategies that denturists can use to effectively connect with their audience, promote their services, and grow their practice.

1. Share Educational and Informative Content

Patients often have questions about dentures, implants, and oral health care, and social media provides the perfect platform to answer them. By offering helpful tips, addressing common concerns, and educating patients, denturists can build trust and position themselves as a go-to resource for oral health information.

- **Create informational posts:** Share advice on denture care, cleaning, and maintenance. Educate patients on when it's time to replace dentures and how to keep them in good condition.
- **Video content:** Post short, engaging videos explaining different denture treatments, how dentures are made, and the latest advancements in the field.
- **Infographics:** Use visually appealing graphics to explain the types of dentures, the fitting process, or the benefits of certain materials.

Educational content builds credibility and helps your patients feel informed and confident about their treatment choices.

2. Show Behind-the-Scenes and Daily Clinic Life

Social media is not just about showcasing your professional skills but also about humanizing your brand. Sharing behind-the-scenes content gives your followers a glimpse into the day-to-day life of your practice, building trust and a personal connection with your audience.

- **Introduce your team:** Share posts about your staff members, their roles, and their dedication to patient care. This could be a fun "Meet the Team" series, showcasing their personalities and expertise.
- **Highlight your clinic's atmosphere:** Show your clinic's clean, comfortable environment. Share images or videos of your workspace, making it inviting and relatable.
- **Patient interactions (with consent):** Showcase how you interact with patients, whether you're conducting a fitting, answering questions, or providing aftercare instructions.

This type of content makes your practice feel more approachable and relatable, creating an environment where patients feel comfortable.

3. Leverage Patient Testimonials and Before-and-After Photos

Social proof is a powerful tool in building credibility and trust. Denturists can take advantage of patient testimonials and before-and-after photos to highlight successful cases and demonstrate their expertise.

- **Share success stories:** Post stories or videos from satisfied patients who share how dentures have improved their lives. Testimonials can be incredibly persuasive for potential clients.
- **Before-and-after photos:** If patients agree, share before-and-after images that show the difference your dentures have made. This helps potential clients visualize the improvements they can expect.
- **Encourage user-generated content:** Ask your patients to share photos of themselves wearing their new dentures, tagging your clinic. User-generated content helps build trust and shows your work in a real-life context.

Testimonial and transformation content is essential for social proof and can significantly impact patient decision-making.

4. Host Live Q&A Sessions and Webinars

Engagement is key on social media, and live Q&A sessions are an excellent way for denturists to directly interact with their



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audience. By hosting these events, you can address patient concerns, clarify common misconceptions, and provide real-time advice.

- **Live Q&A on Instagram or Facebook:** Use Instagram or Facebook Live to host a Q&A session where you answer common questions about dentures, maintenance tips, or what patients should expect during their first fitting.
- **Educational webinars:** Hold online webinars or workshops to explain the process of getting dentures, the latest innovations, and what patients can do to ensure a great fit and long-lasting comfort.
- **Interactive polls and surveys:** On Instagram Stories or Facebook, ask questions or run polls to engage your audience and get feedback on their denture-related experiences.

These interactive sessions help build a community around your practice and allow you to showcase your expertise in real-time.

5. Use Instagram and Facebook Stories for Quick Updates

Instagram and Facebook Stories are great for sharing more casual, behind-the-scenes content, updates, or quick tips. These platforms allow you to post content that disappears after 24 hours, making them perfect for sharing time-sensitive promotions or spontaneous updates.

- **Share daily tips:** Post quick, actionable tips on denture care or oral hygiene routines. Keep it brief and engaging.
- **Highlight promotions:** If you're offering a discount, a new service, or running a special offer, use stories to announce it in an eye-catching way.
- **Showcase patient milestones:** Celebrate patient successes, like getting their new dentures or reaching a milestone in their treatment plan.

Using Stories regularly helps keep your audience engaged and up-to-date with what's happening at your practice.

6. Utilize Local Hashtags and Geo-Tagging

For denturists looking to attract local patients, local social media strategies are essential. Hashtags and geo-tagging can help your posts appear in local search results, allowing patients in your area to discover your services.

- **Use location-specific hashtags:** For example, hashtags like #YourCityDentist or #DenturistInYourCity will help you reach individuals in your geographic area who are looking for denture services.
- **Geo-tag your posts:** On Instagram, tag your location in every post to make it easier for local patients to find your practice when searching for services in your area.
- **Local partnerships:** Partner with local businesses and tag them in your posts to increase your visibility in the community.

By optimizing your social media strategy for local visibility, you ensure that your practice is easily discoverable by patients in your region.

7. Engage with the Community Through Contests and Giveaways

Running contests and giveaways is a fun and effective way to engage your social media followers and attract new ones. Consider giving away services that would appeal to potential patients, such as free consultations, denture care kits, or discounts on new dentures.

- **Offer a free consultation or fitting:** This is a great way to encourage people to interact with your clinic on social media and create buzz around your services.
- **Dental care giveaways:** Create a giveaway for dental care products like denture cleaning solutions or specialized brushes that can be useful for those with dentures.
- **Collaborate with local businesses:** Run cross-promotions with local businesses, offering joint prizes that encourage social media engagement.

Contests and giveaways are a great way to boost engagement, attract followers, and encourage people to visit your clinic.

8. Monitor Analytics and Adjust Your Strategy

To ensure your social media efforts are effective, it's crucial to monitor your analytics regularly. Track engagement rates, follower growth, and which types of posts generate the most interaction. This data helps you refine your strategy and adjust your content to better meet your audience's needs.

- **Track key performance indicators (KPIs):** Monitor likes, comments, shares, and clicks to determine which types of content perform best.
- **Analyze audience demographics:** Understanding your audience's age, location, and interests can help you tailor your content to better suit their preferences.
- **Experiment with content types:** Test different formats, such as videos, polls, or carousel posts, to see what resonates most with your audience.

Consistently reviewing your analytics allows you to optimize your social media strategy for maximum engagement and growth.

Conclusion: Engaging Patients and Growing Your Practice Through Social Media

Social media offers denturists an incredible opportunity to reach new patients, educate their community, and showcase their expertise. By leveraging educational content, showcasing behind-the-scenes moments, sharing patient success stories, and engaging with the local community, denturists can build a strong online presence that leads to increased patient trust and loyalty. ■

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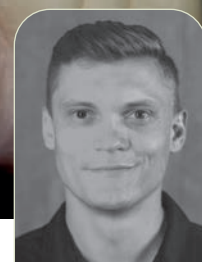
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From Long-Term Provisional to Extended Zirconium Oxide Restoration

– Bite Safely



Roman Wolf, MDT

On the path to a perfect and aesthetically pleasing prosthesis, the author considers it essential to consider the individual wishes, needs, problems, etc. of the patient in the stage of the provisional. For him, the provisional is the fulcrum upon which the entire production process will balance, and also represents an important intermediate stage in the definitive restoration process.

The following case shows how to go about planning a temporary restoration and how to combine digital and analog methods during execution.

An important aspect not to be neglected is the harmonization of the prosthesis with the patient's individual and dynamic facial expressions and posture. This harmony cannot be achieved based on static models or dental practice impressions. The patient also goes to the laboratory for a consultation in order to describe the initial situation in as much detail as possible.

Aesthetic and Phonetic Montage

As well as recording the patient as she presented along with her desires, her face is recorded from all relevant angles using dental photography. Also, other important information is obtained by observing her attitude and pronunciation.

Aesthetic anomalies to be taken into account during the implementation phase of this case include:

- The negative smile line
- The diastema
- The length and width ratio of the teeth with respect to the rule of golden proportions (Figs. 1 to 4)
- The aesthetic and phonetic fit

To receive a precisely fitting prosthesis, the patient traveled for an hour and a half to the dental laboratory.



FIGURES 1-4: The patient's initial case was documented in detail



FIGURES 5-8: In this case, an analogue diagnostic set-up was performed in the presence of the patient

Added to this were appointments in the laboratory lasting several hours and visits to the dentist's studio. The patient, the dental technician and the dentist have collaborated from the beginning and are happy to add the time needed for planning. In the end, the effort is paid off: a happy patient with a dazzling smile and a new sense of well-being. In the presence of the patient, the shape and shade of the teeth were selected and set up for aesthetics and phonetics (Figs. 5 to 8).

The advantage of this is that the patient can actively help create the look of her next prosthesis because nothing is more customized than a patient's individual ideas and wishes.

This list is a good basis for discussion, as it reveals to the patient what aesthetic design options are available. In this way, subsequent unwanted surprises can be minimized or completely excluded.

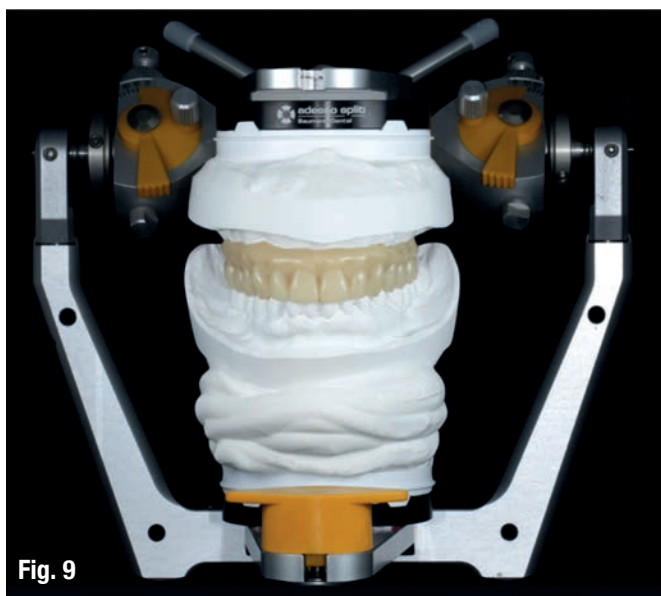


Fig. 9

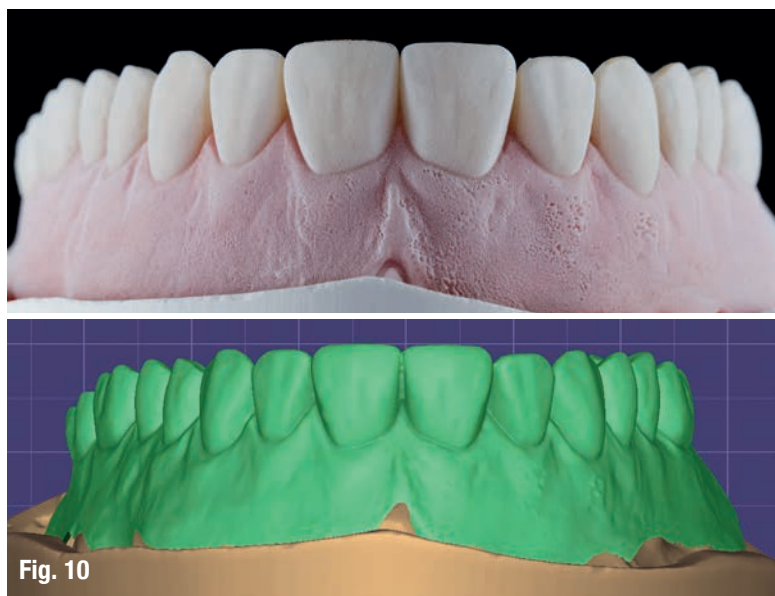


Fig. 10

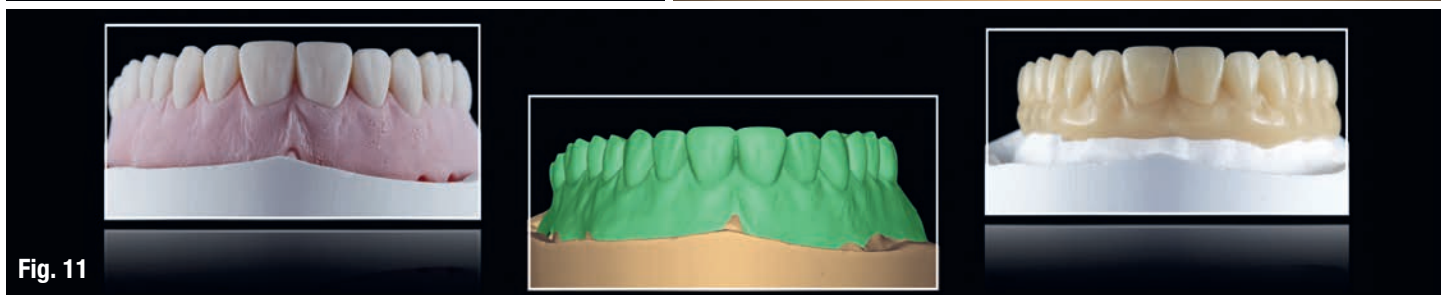


Fig. 11

FIGURES 9-11: Transfer of the analog set-up "into the digital" with subsequent milling

Fabrication of the Long-Term Provisional

Based on the analog editing, the set-up was digitized and milled like a resin bow of the tooth shade (DD poly X ML) (Figs. 9 to 11). The advantages of the temporary restoration milled from rough are convincing: material properties are uniformity and homogeneity as well as excellent strength and stability. Thanks to the multi layered gradient, only minimal finishing touches are needed to create an individual aesthetic. During the session, the provisional was modified in the implant sites and prepared for placement. Since this it was just a temporary solution, soft tissues have not been yet transferred to pink resin.

There are many benefits to an analog driven aesthetic and phonetic mounting, rather than a digital approach. In this way, a lot of dynamic data is obtained that a static model cannot deliver.

The personal consultation with the patient creates empathy with the dental technician who can therefore include her needs and wishes in his considerations from the outset, while at the same time, establishing trust in his work. The result of the finished provisional was excellent: stable and aesthetically designed with minimal effort (Figs. 12 and 13).

Finally, a provisional that has been designed in a rational and aesthetic way provides us with further important parameters for the final product and thus constitutes an immediate starting point.

Realization of the Definitive Restoration

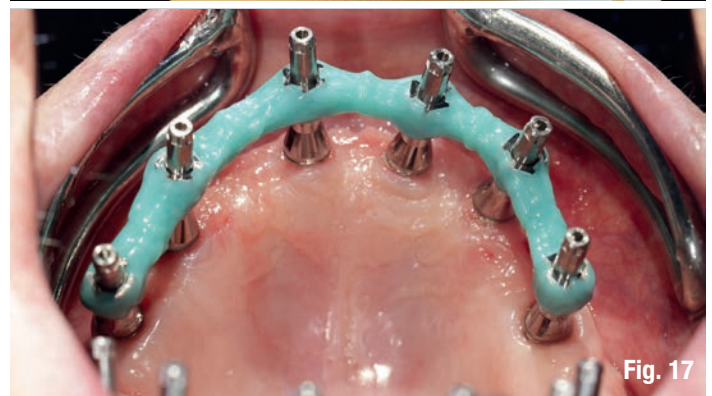
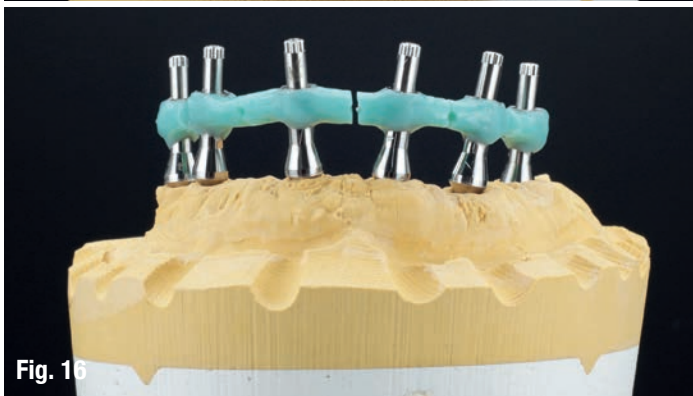
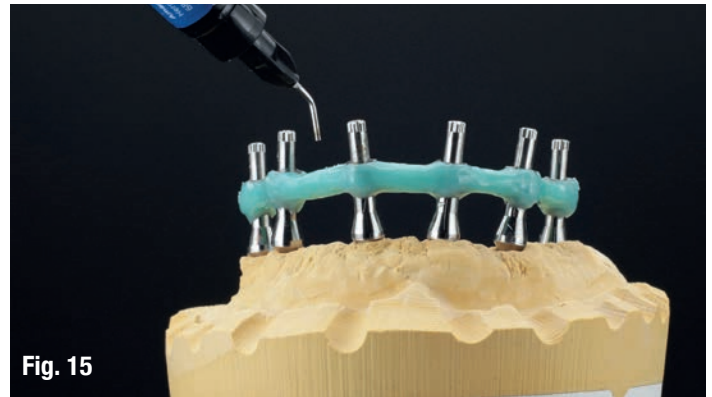
After first restoring in DD poly X ML (Dental Direkt) we consider its importance as an integral part of the work. After a six-month healing period, we now dedicate our actions to completing the definitive zirconium oxide restoration on implants made in DD cube ONE M L, H22 in shade A3 (Dental Direkt). Although we had already taken into account the patient's wishes in terms of function and design in the provisional phase, this phase is always an important intermediate transition, during which the doctor and patient can jointly check which screws still have to be tightened. Parameters influencing bite position and bite relationships of the jaws, as well as shape and shade requests, are often optimized during the execution of the final restoration. Thanks to Backward Planning, the implant treatment had already taken place and planned and executed in such a way that the prostheses could be optimally fabricated on the implants. The difficulty now consisted of accurately transferring the real situation and adjusting the final details.

Transfer of Implant Positions

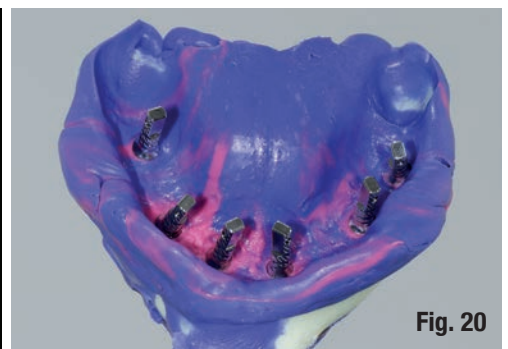
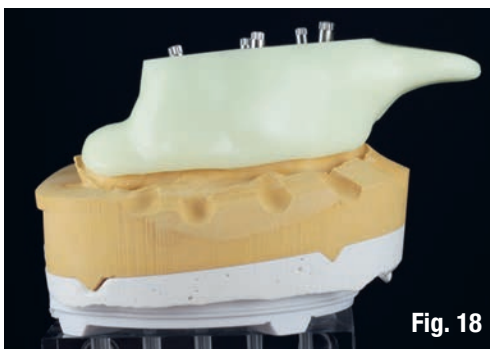
In order to accurately transfer the actual location of the implants on the model, on the first model we created transfer abutments (Figs. 14 to 17). This step is important because the zirconium oxide bridge milled from a single piece does not forgive inaccuracies, and breakage can occur. The making of a custom tray should also not be overlooked to ensure exact transfer



FIGURES 12-13: Detailed photographs of the milled provisional



FIGURES 14-17: Transfer of the real case to the model with transfer pins; cross connect the pins first, transfer, then apply a light-curing resin on this structure; after hardening, the connections are separated; in the mouth of patient, the separation points are reconnected with the resin light-curing



FIGURES 18-20: Fabrication of an individual impression tray; impression with laboratory analogs

(Figs.18 to 20). The space available for the impression material was created so that the thickness of the material was uniform. Furthermore, it is important to pay attention to ensure that the impression tray has a precise guidance on abutments up to the

final position of the impression on the bar. This ensures that the doctor can easily find each screw channel and that the tray does not compress the gums.



FIGURES 21-22: Digitization of the analog mounting



FIGURES 23-25: Staining of the gingival portion, cut-back in the anterior region with subsequent sintering



FIGURES 26 and 27: Layering and surface design in the anterior region and customization of the bridge



FIGURES 28 and 29: Comparison between stratified and colored areas on the surface

Finishing and Sintering of the Frameworks

The definitive assembly was made on the basis of the provisional that had been created previously.

The position of the bite and the relationship of the jaws have been directly transferred in this case from the provisional. Set-up can be done using CAD/CAM support or going purely analog. This case was resolved following an analog protocol. Following the analog setup, it was digitized (Figs. 21 and 22). The scanned construction has been reduced by 0.6 mm at the front and then milled from a DD cube ONE ML raw (Dental Direkt). The patient received a partially layered hybrid restoration on a zirconium oxide framework. Before the sintering process, the zirconium oxide structure had been finished in its raw state and prepared for layering in the area of the anterior teeth using acu-back (Figs. 23 to 25).

It is important to use the correct tools for this purpose. As an extra step before the sintering process, the gingiva was stained pink. This created a good basis for stratification.



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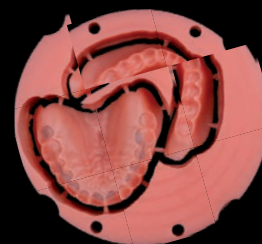
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FIGURES 30-32: Impression of the implant restoration completed in zirconium oxide



FIGURES 33-35: With great attention to detail and high precision, individual works of art are created for a more beautiful smile and greater well-being

Finishing

In the phase of converting the provisional into a definitive restoration, it is possible to modify anything that the patient does not like. The provisional is a good basis for discussion. Thanks to the planning of the case, carried out in depth from the outset, the provisional in this case corresponded almost completely to the patient's ideas. Only small corrections were made. The patient wanted slightly more dominant centrals with a slightly rounder shape to be more feminine than the provisional (Figs. 26 and 27).

The anterior teeth are individually layered up to the canines (Creation ZI-CT), as shade and light dynamics play an important role in this area. After the stratification process, the texture of the surface as well as modeling and coloring according to the aesthetic wishes of the patient begins immediately. The teeth in the posterior region have been refined with stains and DD texture paste (Figs. 28 and 29).

Individualization with contrast DD (Dental Direkt) in the posterior area comes very close to the esthetics of a facet. Intensive DD contrast colors allow you to create monolithic posterior teeth by creating contrasts. The texture pastes help create an effect of sculptural depth and, together with the shades, adapt the posterior teeth so that they form a unit with the layered crowns. Furthermore, the DD contrast mass can be used to create an "airbag" in the occlusal area that cushions the high masticatory forces and thus has a positive effect on the wear characteristics.

Conclusion

In the interim phase we closely dealt with the patient's individual wishes, requests and problems, making only small adjustments in the fabrication of the definitive restoration. Planning backwards during the fabrication of the prosthesis has therefore "played our game". From this, it can be deduced that: the more seriously one deals with the analysis of the case and planning, the more one can eliminate sources of error during the fabricating.

However, the intermediate break after the end of the wear period of the temporary restoration is an excellent opportunity to compare the target data to the actual findings and develop important parameters for the fabrication. In my view, this next approach is reasonable and necessary in the process of carrying out a complete restoration.

Only in this way, with great attention to detail and high precision, can you create individual works of art for beautiful smiles and greater patient well-being (Figs. 30 to 35). ■



About the author

Roman Wolf, Master Dental Technician, completed his dental technician apprenticeship in Nabburg (2010–2014), earning the VDZI Gysi Prize (2nd place) in 2013 and the Regensburger Förderpreis Zahntechnik in 2014. He continued to distinguish himself with top finishes in the KunstZahnWerk competition, including 2nd place in 2017, and graduated as the top student in his Master Dental Technician examination that same year. After completing a Master's degree in Dental Practice in Munich (2017–2019), he was nominated for the Klaus Kanter Award in 2018. In 2019, he founded Wolfs Art Dentalstudio in Burglengenfeld.



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How to Reline 3D Printed Dentures with PacDent's Rodin Soft Reline Kit:

A Step-by-Step Guide

Dr. Byron Park



SCAN ME

Introduction to Digital Dentures

I had the opportunity to try out the Rodin Soft Reline Kit, and here is my experience. Relining 3D-printed dentures can be problematic, especially when compared to traditional acrylic dentures.

This article highlights the entire workflow using the Rodin Soft Reline Kit, which we found to be a useful tool in the cupboard if you are a dentist or clinical dental technician delivering or fabricating 3D-printed dentures.



Advantages of Digital Dentures

There are several key advantages to 3D printed dentures and digital dentures:

- The fabrication process is very streamlined.
- It can be done with an entirely digital workflow from either intraoral scans or conventional impressions scanned with a desktop scanner in the lab.

- The design of digital dentures can be rapidly completed with dental design software offered by companies such as 3Shape.
- The dentures can be manufactured very quickly by utilizing 3D printing or milling.
- In the event of the patient losing or breaking the denture, a digital denture can immediately be remanufactured.
- Digital denture can be prototyped quickly with 3D printed try in resins.
- Small changes can easily be made to the denture on the design software.
- If the first denture is a transitional denture, the tooth set up of the denture can also be reused for the final denture or implant bridge. This gives more consistency to the treatment provided to the patient.

3D Printing vs. Milling Dentures

The denture-designed files can either be printed or milled.

Speed and Cost Comparison

Printing is faster and more economical than milling:

- 3D printing dentures can be completed within 1 hour.
- Material costs of the resin are around \$30-50 USD in total

- Milling dentures using Ivoclar Ivotion discs can be completed within 4 hours. Materials costs of the discs is around \$200-250 USD.
- The cost of a 3D printer is considerably less than a milling machine capable of milling dentures.

Dr. Byron Park's Preference

So, which one is my preference?

I really love the speed of 3D-printed dentures. They are great for immediate or transitional dentures. The accuracy and fit are excellent. However, the monolithic appearance of the resins makes the aesthetics typically worse than those of multilayered PMMA materials.

I prefer the appearance of milled dentures, which are more akin to traditional heat cured acrylic dentures. The proven track record of PMMA and its longevity guides me towards using milled dentures as my final prosthetic. Typically in an immediate denture case, we will provide 3D printed dentures as the immediate dentures.

Conventionally, dentures are relined typically after 3-6 months. If we have printed the first denture using a digital workflow instead, we provide our patients with a new set of milled PMMA dentures when it is time to reline.

Regardless of 3D printed or milled dentures, the first denture set

up can be reused with the base adapted to the healed shape of the edentulous arches. This is done by using the first dentures to take reline impressions. The dentures are then scanned chariside or in the lab using a desktop scanner. The original tooth set up can easily be replicated or tweaked and the denture base made to fit the new shape of the jaws.

Case Study: Immediate Dentures for a Periodontal Patient

My patient came for a dental visit, accompanied by family. They had a history of extreme dental anxiety and was very embarrassed about the state of their teeth. They didn't do any oral hygiene or toothbrushing and had a history of smoking and vaping.

Their last dental visit was 5 years ago to get two lower incisors removed as they were very loose. They had wisdom teeth and other molars removed due to periodontal disease.

On examination radiographic bone loss was extending to the middle third and beyond for most of their teeth with almost no periodontal bone around the lower anterior teeth.

Diagnosis and Treatment Plan

My diagnosis was Periodontal Disease, Stage IV, Grade B.

We discussed periodontal treatment options. Ultimately, the patient and family elected to have immediate dentures.



Fig. 1 — 3D Printed Denture (unpolished and uncharacterised)



Fig. 2 — Milled Ivotion Denture (unpolished)



Fig. 3



Fig. 4



Fig. 5



Fig. 6

Fabrication of Immediate Dentures

Dental technician Mark Gutierrez at iDD lab designed immediate dentures using 3Shape Dental System denture module.

The dentures were 3D printed using Nextdent 5100 printer. The teeth were printed with NextDent C&B MFH N1 resin and the bases were printed with Nextdent Denture 3D+ Classic Pink.

The lab finished the dentures in 48 hours after receiving the impressions.

This is the power of digital dentures. The design can be done quickly and the manufacturing process of 3D printing allows for rapid fabrication.

The patient's teeth were removed under IV sedation and the dentures immediately inserted. The patient and family were very emotional when they saw their new smile.

The Importance of Soft Reline and Where the Rodin Kit fits in.

Why Soft Reline?

I typically wait 3-6 months after delivering the immediate denture before proceeding with the final dentures. This allows the remodeling and shrinkage of the edentulous ridges.

Sometimes in this 6 month wait, the first set of dentures can become very loose. In this case, my patient had been using denture adhesive paste and was still struggling with the looseness of the dentures.

Soft reline is not a permanent reline but can help to temporarily improve the fit of the dentures. As well as provide relief if the patient is struggling with adapting to the hard resin or acrylic base rubbing on their gingiva.

Introducing the Rodin Soft Reline Kit

I was very happy to discover this product by Rodin as it is

specifically formulated to bond to 3D printed resins. Traditional acrylic reline materials may not bond to 3D printed dentures. It is a silicon based material that is very smooth and feels comfortable to the patient.

A Closer Look at the Rodin Soft Reline Kit

So what's included in the Rodin Soft Reline Kit:

- Adhesive Primer to bond to the 3D printed resin
- 6 x Applicator swabs to apply the primer.
- Cartridge of soft reline material that fits in a normal impression dispensing gun
- 6 x wide mouth dispensing tips
- Brown Scotch-Brite wheel to roughen the intaglio surface of the denture
- Tapered Cone Finishing Stone

Additional Required Materials

What is required but not included is a straight handpiece or lab handpiece. You will also need an acrylic bur to bevel the borders of the denture.

Not included is an optional bottle of VPS release used to easily remove the soft reline material.

Step-by-Step Guide to Using the Rodin Soft Reline Kit

There are clear instructions included with the kit. I booked a 30 minute appointment for upper and lower soft reline.

Preparation

First make sure the dentures are clean. I made sure to wipe off any denture adhesive on the intaglio surface.

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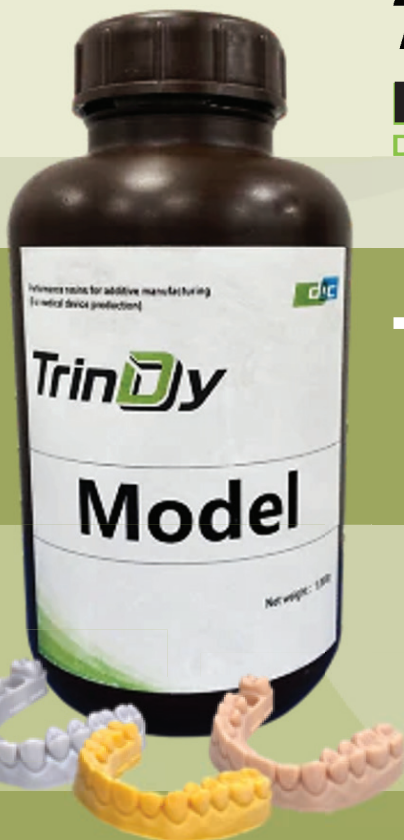


Bevel the borders of the dentures to create room for the reline material to wrap around. Brown Scotch-Brite wheel used to roughen the intaglio surface to improve bonding of the reline.



Application Process

Adhesive Primer applied using applicator swab and allowed to dry for 2 minutes.



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Fig. 11



Fig. 12

Even coat of soft reline material dispensed over intaglio surface. 5 minute intraoral setting time.

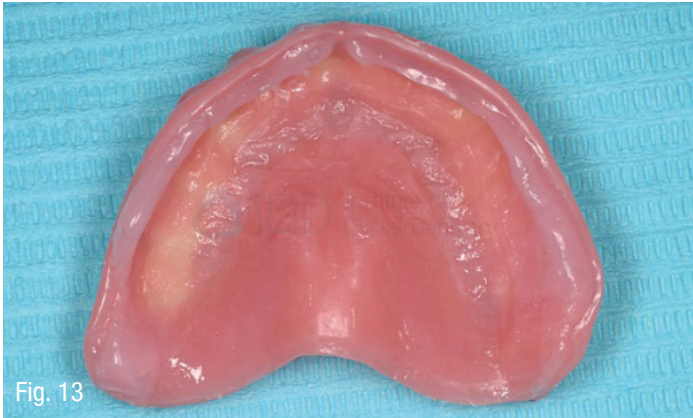


Fig. 13



Fig. 14

Finishing Touches

Excess can be trimmed from borders with scalpel blade and a finishing stone can also be used to trim material as well.

I did one denture at a time and after inserting the denture in, the patient and I did border moulding movements with the lip and tongue to adapt the material functionally.

I guided the patient into the correct occlusion against the opposing denture and hold it there to avoid creating an uneven occlusal cant.

Results and Patient Feedback

My patient immediately noticed a difference.

The upper denture retention was greatly improved and they didn't need to use denture adhesive. The dentures had a more intimate fit to the tissues and felt more comfortable to wear.

Final Thoughts and Recommendations

3D printing and printed resin dentures are becoming more common in dental offices and labs. It is important to have high quality materials that are compatible for use with 3D printed dentures.

I found the Rodin Soft Reline Kit to be very intuitive, easy and fast to use for chairside soft reline. I would recommend this kit to dentists or clinical dental technicians who deliver or fabricate 3D printed dentures. ■



Fig. 15



About the author

Dr. Byron Park is a general dentist in full time private practice in Wellington, New Zealand, combining 10 years of experience in general dentistry and a passion for digital dentistry. He has been part of Naenae Dental Clinic and the iDD team since 2019. Byron has received training in the latest digital dentistry tools such as dynamic navigated dental implant surgery, jaw motion capture and artificial intelligence in diagnosis of dental radiographs. He routinely uses the latest digital dentistry technology to offer his patients the highest standard of cutting edge dental care.



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