

Case Study 8

T. Bob Davis, DMD

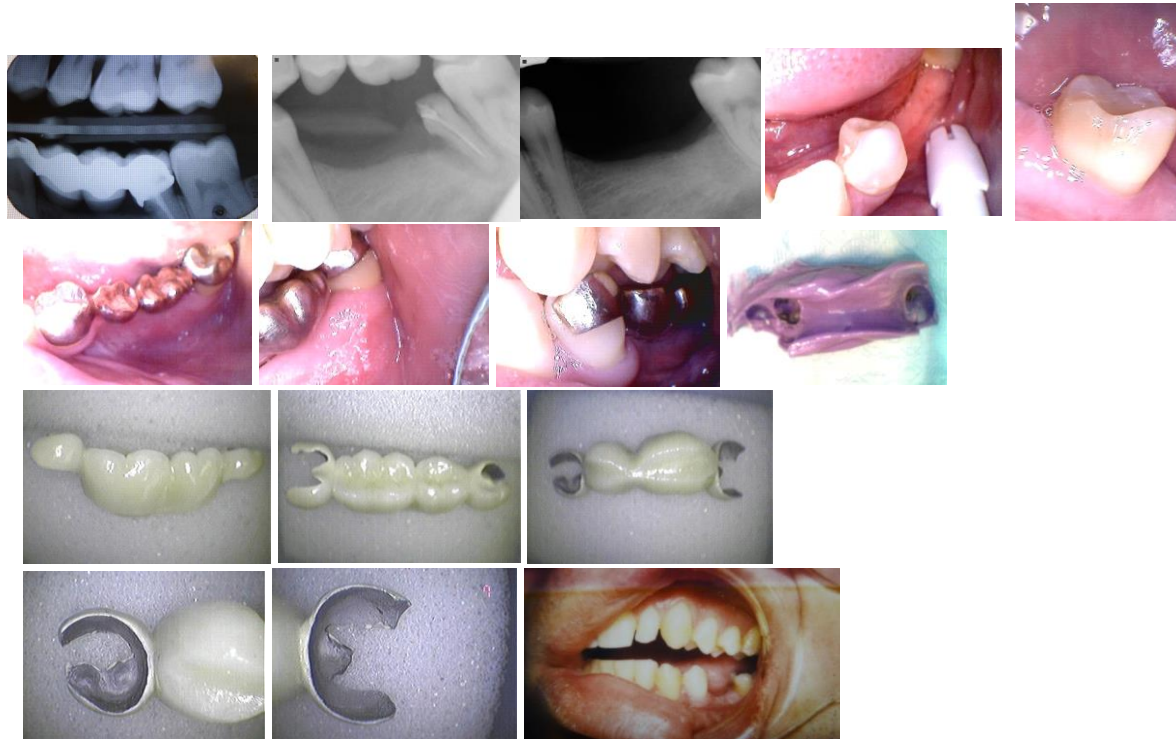
CASE REPORT – INSTALLMENT #8

BILL J. – Heavy Bruxer



Bill (No night guard Grinder/clencher). Remade but also MADE patient accept and wear nightly a new nightguard. The case has lasted over 13 years now with nightguard and total of 16yrs of Maryland Bridge service..

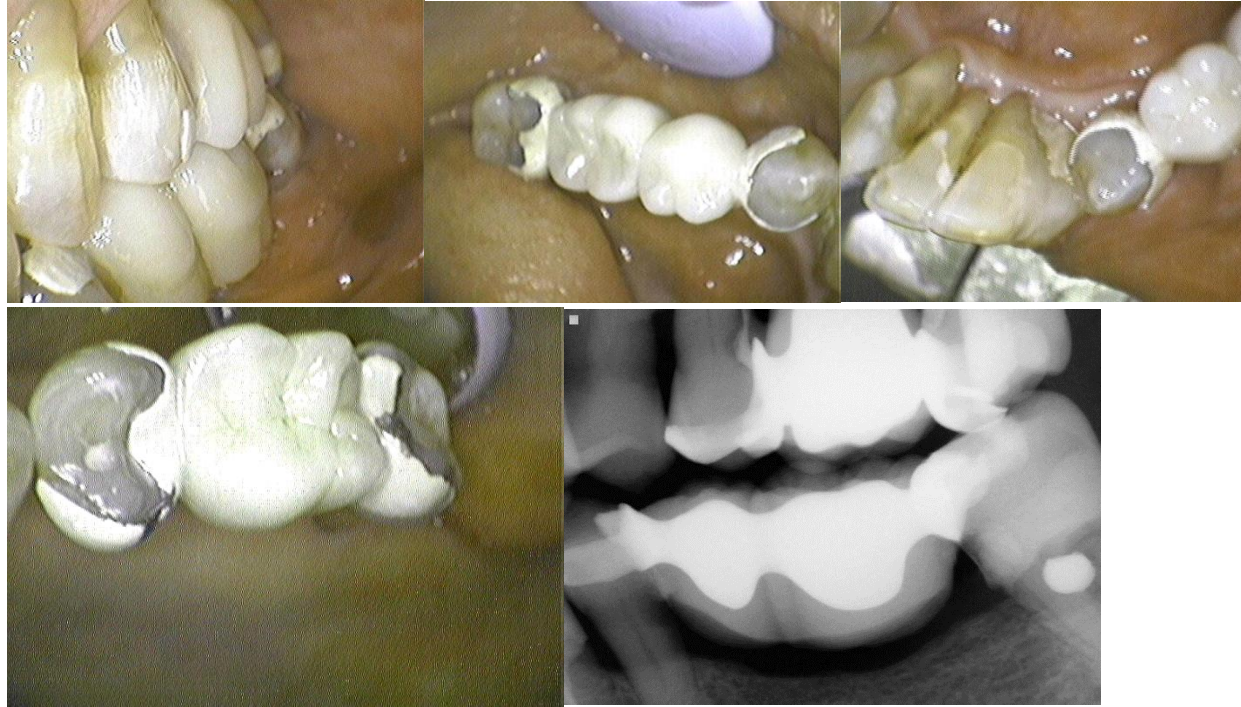
3/25/86 STEVE S.





At age 24, in 1983, the retained D 11 was extracted and #19 was very sensitive due to probable pulp cap as a teenager. His MB replacing #20 was a standard design. #19 had DOL amalgam, large and deep. The mesial, facial and lingual -mesial were solid enamel surfaces. Thus in 1985, ample enamel for a MB was present. Unfortunately he was a clincher/grinder and a nightguard was delivered while waiting on seating the MB. That greatly relieved his headaches. Thus the MB was seated with Comspan . Four months later, #19 died and had a root canal done, completed in 1986. The MB debonded and was rebounded with Comspan. In 1988, 2 years later, the distal Amalgam broke and we prepared a reverse $\frac{3}{4}$ crown and used Rexillum III, etched and bonded with Comspan to the tooth portions not covered by the MB wings and occlusal rest. Fifteen years after the first MB was seated, the mesial root of #19 failed and was extracted. The distal root was healthy and a full crown was prepared for a combo MB. The crown was seated with ZnPO₄ and MB wings with RelyX ARC, January 2000. A decade of service ended with the distal root cracked and perio abscessed. Extracted with the MB wings still totally attached to the bicuspid (had to be debonded). After a period of healing, a standard prep for #18 and no changes to #21, a new standard design MB was bonded to #18 & #21 with RelyX ARC. Over 32 years of MB service!

5/28/87 ROSCO M.



A gentleman whose early years led to severe perio disease, ultimately maintained by a periodontist and myself, and whose later years have been fraught with complications from erratic home care plus traumatic eating habits. This is a case that demonstrates how teeth that others would remove and place dentures can be maintained in spite of severe perio, crowding and rotations.

It began in 1987 with a MB 18x20 replacing 19. In 17 years the patient split #20 on peanut brittle and we lost #20 as an abutment. Thus, 18x21 became our new MB in 2004. He is now experiencing 27 years of MB service.

#14 became a split down the middle fractured in half tooth in 2002. A MB 13x15 was seated with RelyX and resealed in 2005 and 2006. The patient was under extreme stress health wise and lost his wife after her lengthy illness. Clinching was the cause of several chipped and broken teeth as well as the MB debond. As of 6/23/10, he is very happy and comfortable with both MB's on his left side.

As a post note, look at the bonding together of #22/23 in an effort to keep his loose front teeth in his twilight years.