

1
00:00:00.570 --> 00:00:03.080
All right, so this first thing I'm talking about is lip support.

2
00:00:03.250 --> 00:00:08.220
Very, very, very first thing, it determines if the patient's going to be a

3
00:00:08.230 --> 00:00:10.280
candidate for all in four or not.

4
00:00:10.590 --> 00:00:11.860
So let's get into it.

5
00:00:13.410 --> 00:00:17.960
So when a patient first gets their teeth taken out, they have what's called a, you

6
00:00:17.970 --> 00:00:20.080
know, I hate the terminology, but it's called a tooth only defect.

7
00:00:20.250 --> 00:00:23.200
That's the terminology that people have been using, tooth only defect.

8
00:00:23.690 --> 00:00:25.220
So for example, check this guy out.

9
00:00:25.230 --> 00:00:28.720
He just got his teeth taken out, and he's

10
00:00:28.730 --> 00:00:32.380
only missing the volume that was occupied by the teeth,

11
00:00:32.830 --> 00:00:33.100
right?

12
00:00:33.250 --> 00:00:36.140
So his ridge is still where it was at.

13
00:00:36.310 --> 00:00:39.520
The only thing he's missing now is the space occupied by the teeth.

14
00:00:40.650 --> 00:00:47.840
Now if you try to restore that patient with a tooth only defect, and you try to

15
00:00:47.850 --> 00:00:51.780
do an all in four, all in X kind of prosthesis for him, it's going to fail.

16
00:00:52.310 --> 00:00:57.500
There's just not enough space there, and it's just not going to work very well at all.

17
00:00:58.050 --> 00:01:02.840
So over time, a patient's ridge resorbs, right?

18
00:01:02.930 --> 00:01:05.720
So after a while of not having teeth, the

19
00:01:05.730 --> 00:01:07.000
ridge starts to resorb.

20
00:01:07.190 --> 00:01:09.720
In the maxilla, the ridge resorbs upwards

21
00:01:09.730 --> 00:01:10.340
and backwards.

22
00:01:10.690 --> 00:01:12.620
In the mandible, the ridge resorbs

23
00:01:12.630 --> 00:01:14.140
downwards and backwards.

24
00:01:14.810 --> 00:01:16.720
And this basal part of the bone right

25
00:01:16.730 --> 00:01:20.940
here, this part down here in the
mandibular ridge kind of stays where it's at.

26
00:01:23.470 --> 00:01:30.040
Now as the patient loses some bone on
their ridges, as their ridge resorbs,

27
00:01:30.650 --> 00:01:33.520
they start to lose some of the lip support.

28
00:01:33.670 --> 00:01:34.900
So I'm going to back up just a second

29
00:01:34.910 --> 00:01:35.460
over here.

30
00:01:36.150 --> 00:01:37.660
So remember right here, this is where the

31
00:01:37.670 --> 00:01:40.040
patient had their teeth, and then they
just got them pulled.

32
00:01:40.550 --> 00:01:43.320
So the teeth are what supports the lip.

33
00:01:43.610 --> 00:01:46.020
So the incisal edges of the teeth are

34
00:01:46.030 --> 00:01:48.620
actually preventing your lip from
collapsing, right?

35
00:01:49.290 --> 00:01:52.080
Everybody's seen the patient that is
missing their teeth and has their

36
00:01:52.090 --> 00:01:56.520
dentures out, and their lips are all like
that, right?

37
00:01:56.650 --> 00:01:57.640
They're kind of like caving in.

38
00:01:58.410 --> 00:02:00.480
And so without your teeth, you're missing

39
00:02:00.490 --> 00:02:01.280
that lip support.

40
00:02:01.650 --> 00:02:04.400
And as you have more resorption, that

41
00:02:04.410 --> 00:02:07.540
lack of lip support becomes more apparent.

42
00:02:07.690 --> 00:02:09.500
Your lips get more and more collapsed.

43
00:02:10.530 --> 00:02:12.520
So this is a patient right here.

44
00:02:13.930 --> 00:02:15.380
Sorry, let me back up for a second.

45
00:02:15.390 --> 00:02:22.180
That lack of lip support, that resorption
of the bone, leads to what's called a

46
00:02:22.190 --> 00:02:23.240
composite defect.

47
00:02:23.610 --> 00:02:25.600
Remember at first you had a tooth -only

48
00:02:25.610 --> 00:02:30.820
defect, and then with some resorption you
progress to a composite defect.

49
00:02:31.170 --> 00:02:35.680
Composite defect basically means that
you're missing the space that was

50
00:02:35.690 --> 00:02:39.000
occupied by your teeth and the alveolar structure.

51
00:02:39.410 --> 00:02:40.760
So now you have a composite defect.

52
00:02:41.310 --> 00:02:47.600
And over time, your bone continues to resorb and you'll have a severe composite defect.

53
00:02:47.790 --> 00:02:53.000
So the little old lady that's been wearing dentures for 30, 40 years, she

54
00:02:53.010 --> 00:02:54.820
has a severe composite defect.

55
00:02:54.990 --> 00:02:56.740
And you can tell right here, so the lips,

56
00:02:56.850 --> 00:03:01.160
remember the lips are right here, the lips are outlined in blue, and the lips

57
00:03:01.170 --> 00:03:02.180
have no support.

58
00:03:02.350 --> 00:03:04.040
They're completely all shriveled up.

59
00:03:04.690 --> 00:03:06.540
And so she's got a severe composite defect.

60
00:03:08.230 --> 00:03:09.960
Alright, so I'm going to show you right

61
00:03:09.970 --> 00:03:15.960
here, this middle picture, you can see what happens as a person has a bigger and

62
00:03:15.970 --> 00:03:19.680
bigger composite defect, and you restore

them with an all -on -four.

63
00:03:20.910 --> 00:03:22.660
Let's look back actually at this first picture.

64
00:03:23.030 --> 00:03:24.500
In this first picture, you can restore

65
00:03:24.510 --> 00:03:27.900
with an all -on -four, and it'll look pretty natural.

66
00:03:28.150 --> 00:03:30.520
I think it's a good treatment plan to follow.

67
00:03:31.170 --> 00:03:33.300
In this second picture, let's imagine

68
00:03:33.310 --> 00:03:34.960
this person's a little bit more resorbed.

69
00:03:35.650 --> 00:03:36.440
Can you see the difference?

70
00:03:36.450 --> 00:03:37.240
Can you see the difference between the two pictures?

71
00:03:39.110 --> 00:03:45.100
So in this picture, the prosthetic gums, they're not really sticking too far,

72
00:03:45.370 --> 00:03:48.380
they're not really bumped too far out from where the ridge is.

73
00:03:48.870 --> 00:03:53.680
The ridge is here, and the prosthetic gums are right here.

74
00:03:54.310 --> 00:03:59.320
But as the ridge resorbs more, so let's say the ridge is back here, and then the

75
00:03:59.330 --> 00:04:00.720
teeth kind of stick out further.

76
00:04:00.870 --> 00:04:02.640
You can see in this middle picture, the

77
00:04:02.650 --> 00:04:08.980
teeth are sticking out further, and where
I circled right here, this is where you

78
00:04:08.990 --> 00:04:12.000
can imagine that the lips, so this is the
lip, remember?

79
00:04:12.310 --> 00:04:14.340
The lip is going to dip in right here.

80
00:04:15.090 --> 00:04:17.220
I'm going to show you some real pictures

81
00:04:17.230 --> 00:04:21.600
of what this looks like, but I just want
to show you these illustrations just to

82
00:04:21.610 --> 00:04:23.240
show you my point.

83
00:04:25.230 --> 00:04:28.700
This area right here is not supported by anything.

84
00:04:29.690 --> 00:04:34.500
That's why somebody with a severe
composite defect, they might be better

85
00:04:34.510 --> 00:04:36.000
treated with a denture.

86
00:04:36.090 --> 00:04:38.000
Because a denture, as you can see right

87
00:04:38.010 --> 00:04:43.540
here, a denture's got a flange, and a

flange can create a nice emergence, a

88
00:04:43.550 --> 00:04:45.640
nice lip plumping.

89
00:04:45.930 --> 00:04:48.660
I never promise that I'm going to have

90
00:04:48.670 --> 00:04:52.140
some sort of plastic surgery type result
with my patients if they want.

91
00:04:52.530 --> 00:04:56.960
Lips plump, I'll send them to a plastic
surgeon or somebody that does Botox, I

92
00:04:56.970 --> 00:04:57.160
don't know.

93
00:04:57.710 --> 00:05:00.240
But anyway, a flange, the fact of the

94
00:05:00.250 --> 00:05:04.140
matter is a flange bumps up the lips a
little bit and provides lip support.

95
00:05:04.150 --> 00:05:06.660
Up high, where an all -on -four cannot.

96
00:05:07.390 --> 00:05:11.240
So an all -on -four, perfect candidate is

97
00:05:11.250 --> 00:05:13.760
somebody who has a moderate composite defect.

98
00:05:14.570 --> 00:05:16.560
Somebody who does not have a composite

99
00:05:16.570 --> 00:05:21.100
defect, who has a tooth -only defect, is
not a great candidate yet, but you can

100
00:05:21.110 --> 00:05:22.180
turn them into a good candidate.

101
00:05:22.650 --> 00:05:24.300
Somebody who has a severe composite

102
00:05:24.310 --> 00:05:29.120
defect, a little tough to treat with an
all -on -four, and you have to tell them

103
00:05:29.130 --> 00:05:32.600
ahead of time what might be the
complication from that.

104
00:05:32.610 --> 00:05:33.760
So I'm going to show you right now, actually.

105
00:05:34.570 --> 00:05:37.440
So this is a little old lady, this is her

106
00:05:37.450 --> 00:05:41.640
with her maxillary denture, this is her
without her maxillary denture, and you

107
00:05:41.650 --> 00:05:43.500
can see what I'm talking about, the lip collapse.

108
00:05:44.710 --> 00:05:46.320
Now we'll do a side view.

109
00:05:47.170 --> 00:05:52.940
This lady has a, so same little old lady,
she has an upper complete denture, and

110
00:05:52.950 --> 00:05:54.440
she has a lower all -on -four.

111
00:05:54.970 --> 00:05:58.040
In this part right here, that little dip

112
00:05:58.050 --> 00:06:02.600
that you see in between her chin and her

lips, sometimes it's called like a

113
00:06:02.610 --> 00:06:06.820
witch's chin, that is called the
mentolabial sulcus.

114
00:06:07.270 --> 00:06:10.220
So that's what I'm talking about, that
there's not enough lip support there, so

115
00:06:10.230 --> 00:06:11.560
it dips in right there.

116
00:06:11.950 --> 00:06:14.660
If she had a flange, so if you had chosen

117
00:06:14.670 --> 00:06:19.760
a removable solution, so an overdenture
that still snaps onto implants, that

118
00:06:19.770 --> 00:06:24.040
would plump up and potentially eliminate
that little crease right there.

119
00:06:24.930 --> 00:06:30.100
This other patient over here, she has an
upper all -on -X prosthesis, and you can

120
00:06:30.110 --> 00:06:32.620
see that she doesn't have adequate lip
support right here.

121
00:06:33.730 --> 00:06:37.660
For some patients, this is a big deal,
for other patients it's not a big deal.

122
00:06:37.990 --> 00:06:41.120
You just gotta know going into it that if
the patient has a severe composite

123
00:06:41.130 --> 00:06:44.700
defect, they're likely to get this sort
of outcome.

124

00:06:46.470 --> 00:06:51.820

This is another patient, she's got a composite defect, and there was just kind

125

00:06:51.830 --> 00:06:56.220

of like a stair step between her prosthesis and her gums, see, it's a

126

00:06:56.230 --> 00:07:02.880

stair step, it was a pretty severe stair step, and all I did actually was I just

127

00:07:02.890 --> 00:07:07.780

reset her teeth, I just kind of pushed her teeth, so I stripped her teeth off, I

128

00:07:07.790 --> 00:07:13.600

kept the bar, and I just had the teeth set a little bit more in, and I made the

129

00:07:13.610 --> 00:07:19.480

emergence of the gums a little bit more gradual, and I was able to remove that

130

00:07:19.490 --> 00:07:21.240

crease, so that crease just disappeared, right?

131

00:07:21.710 --> 00:07:24.400

So there it is, there's that crease, and

132

00:07:24.410 --> 00:07:25.020

there it's not there.

133

00:07:25.030 --> 00:07:28.560

All right, so that's the first thing that

134

00:07:28.570 --> 00:07:32.800

I ask, does the patient have adequate lip support without a flange?

135

00:07:33.150 --> 00:07:36.440

If they do, then I go ahead and proceed with the all on X treatment.

136

00:07:36.830 --> 00:07:42.640

If they don't, then they have a severe composite defect, I present a removable

137

00:07:42.650 --> 00:07:48.660

option as a potential plan for that patient, and I kind of put it in their court.

138

00:07:48.970 --> 00:07:52.300

If they want to proceed with an all on X, I tell them what could be the

139

00:07:52.310 --> 00:07:57.680

complication, and I generally recommend a removable for severe composite defects.

140

00:07:58.890 --> 00:07:59.160

Cool?

141

00:07:59.570 --> 00:08:00.640

All right, let's move on to the next

142

00:08:00.650 --> 00:08:01.860

thing, that's transition line.