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Since 2014, Finlay has exclusively used Schottlander Enigmalive teeth for all denture cases owing to their beauty and durability

My 13 years experience

of the

Scandinavian approach

for

Partial dentures

Please raise your hands if you  
use the Scandinavian approach  
for partial dentures





I used to hate

dentures



# Prof Fraser McCord



## MSc Pros





Prof Fraser McCord

University Dental Hospital of Manchester

MSc Pros

“Finlay - you are fucking shite at this (pros)”





# Prof Fraser McCord

University Dental Hospital of Manchester

MSc Pros

“Finlay - you need more training and practice”







McCRACKEN'S

---

Removable  
Partial Prosthodontics

TENTH EDITION



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GLEN P. MCGIVNEY • ALAN B. CARR

2007



2007-2010



2007-2010

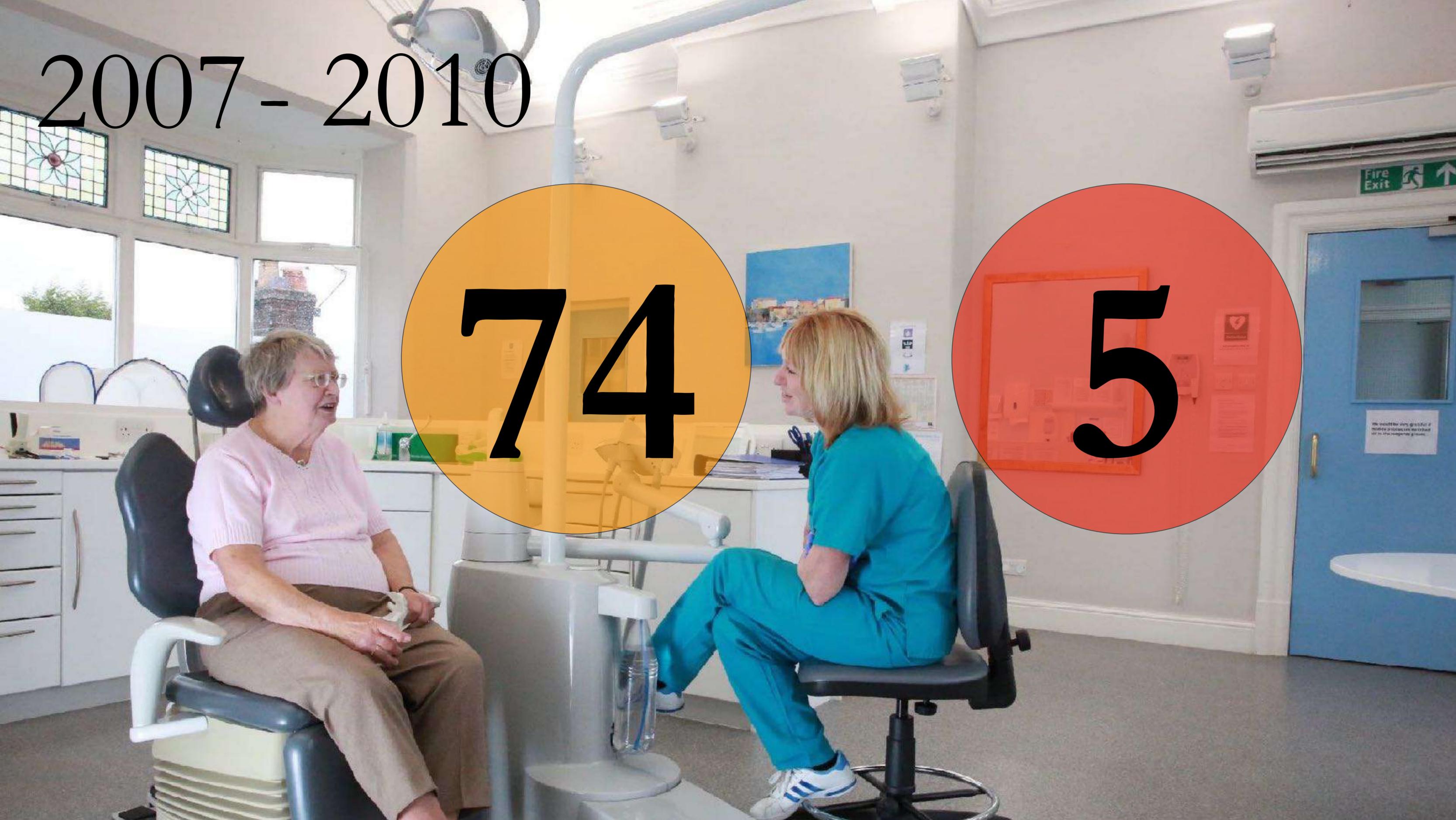
74



2007 - 2010

74

5



Pat







15





**£5,000**

enigma

The Queen's Award for  
Teeth and

The secret  
behind  
nat  
lo



*schottlander*

*committed to quality*



2010

enigma

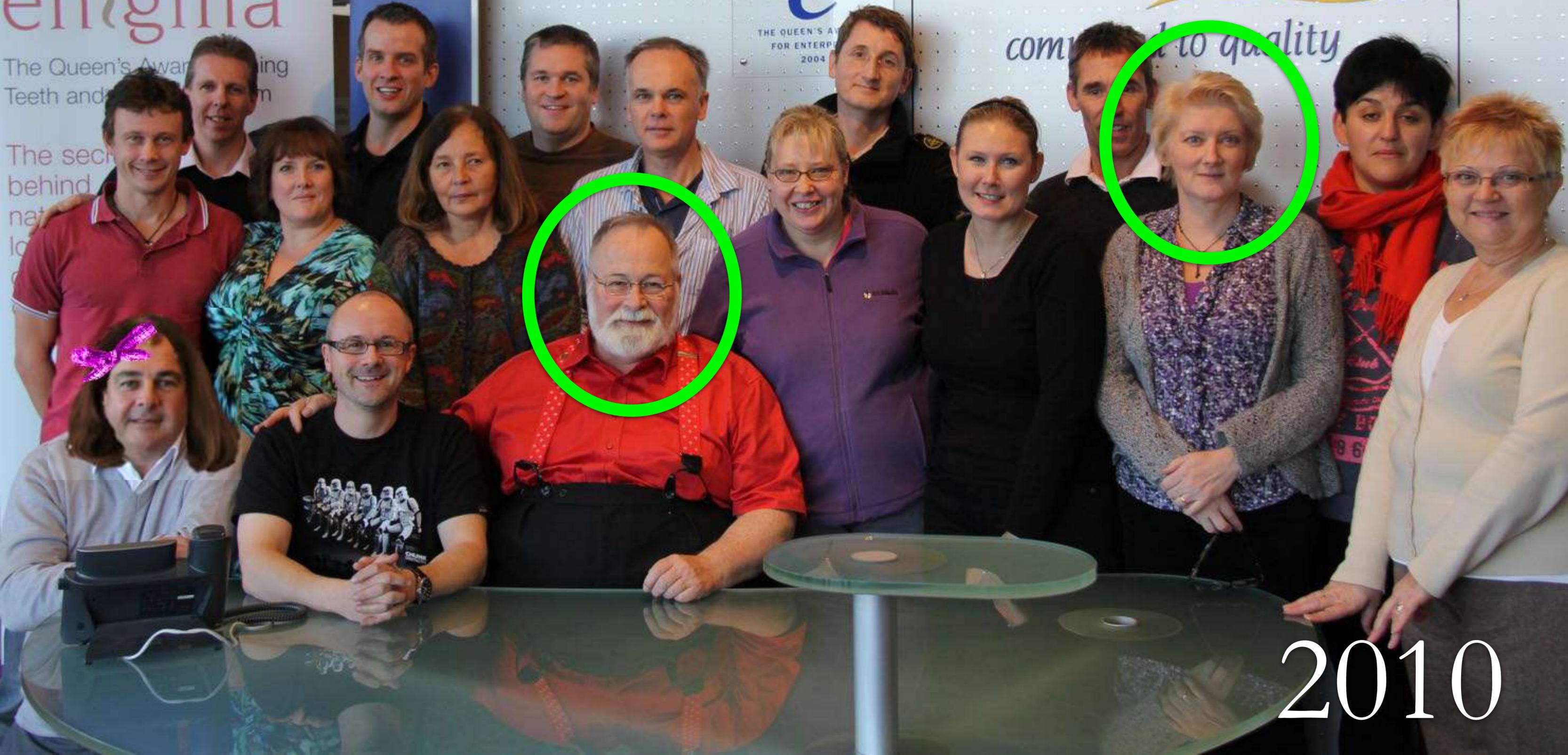
The Queen's Award for  
Teeth and

The secret  
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committed to quality



2010

enigma

The Queen's Award for  
Teeth and

The secret  
behind  
nat  
lo



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*committed to quality*



The Besford Study Club 2010



Charlotte

2011



Scandinavian  
hygienic design







10 years



Ken

2011 - 2024



2011 - 2024

327



2011 - 2024

327

1.5



2011 - 2024

327

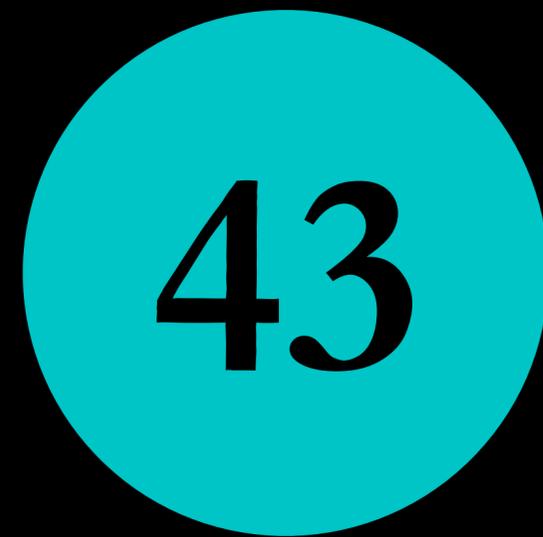
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2011 - 2024

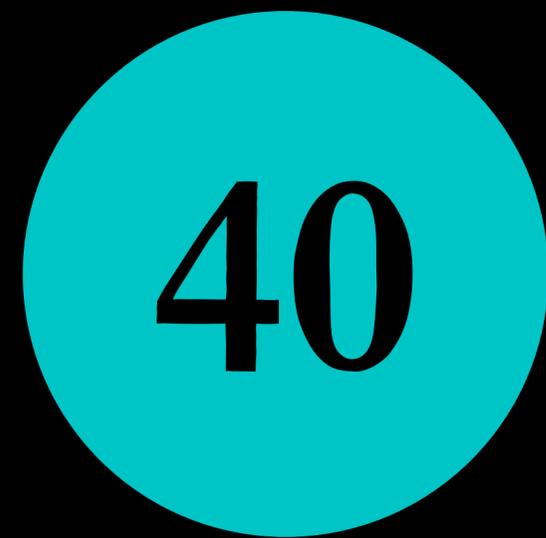
**302** hours saved

2011 - 2024



days saved

2011 - 2024



more RPDs

2011 - 2024



**£250,000**

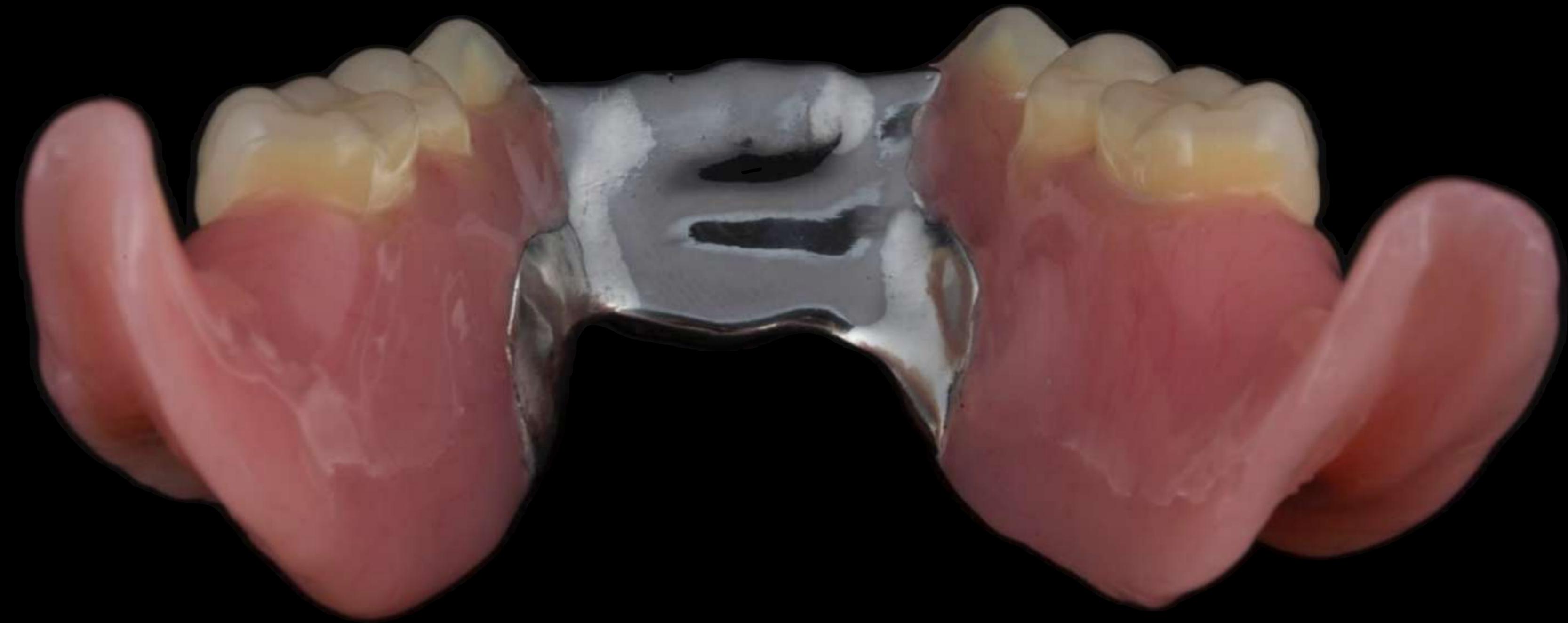


Dental Hospital



A John  
Besford  
disaster

# Lingual plate



Lingual plate



1979



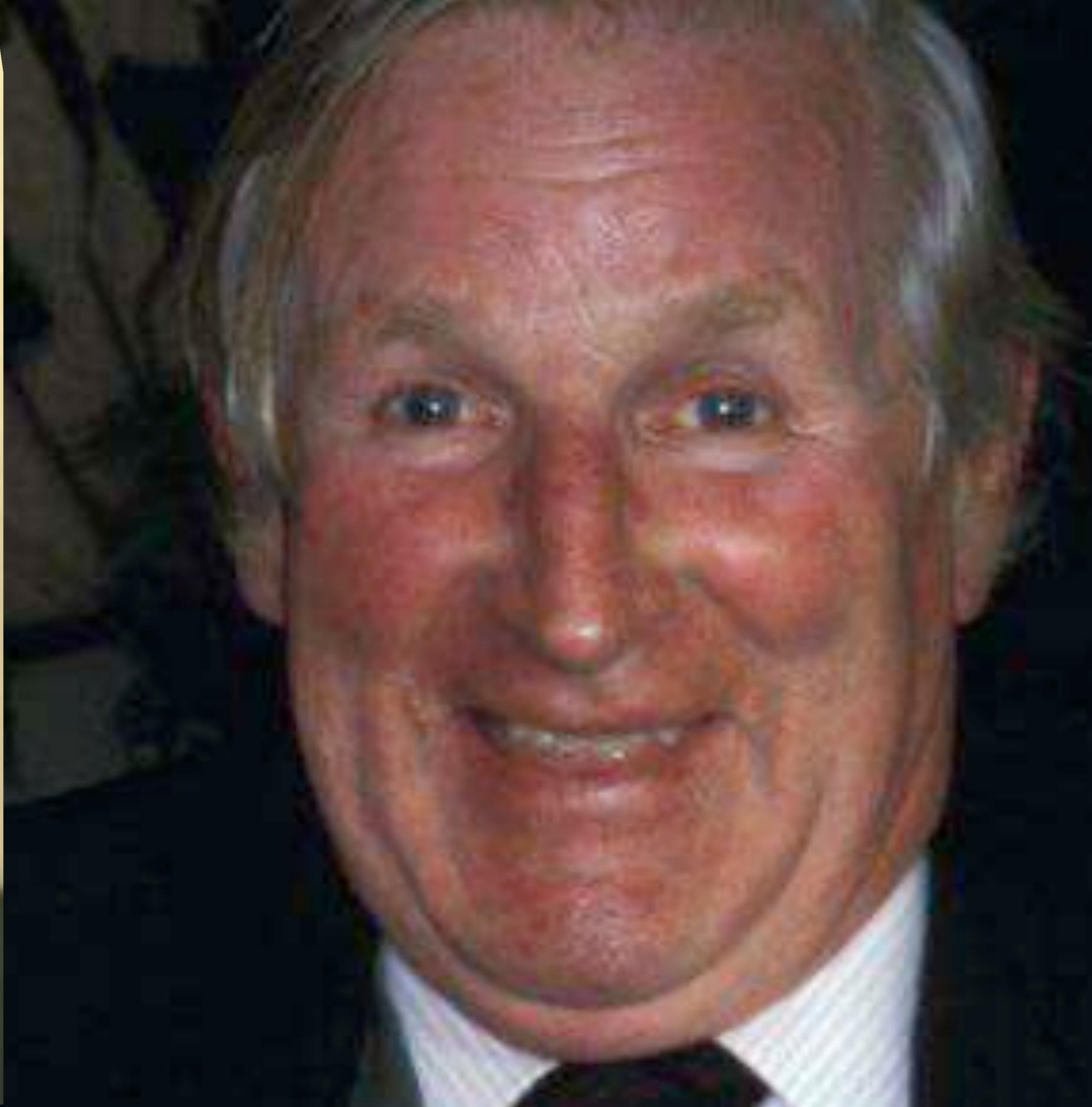












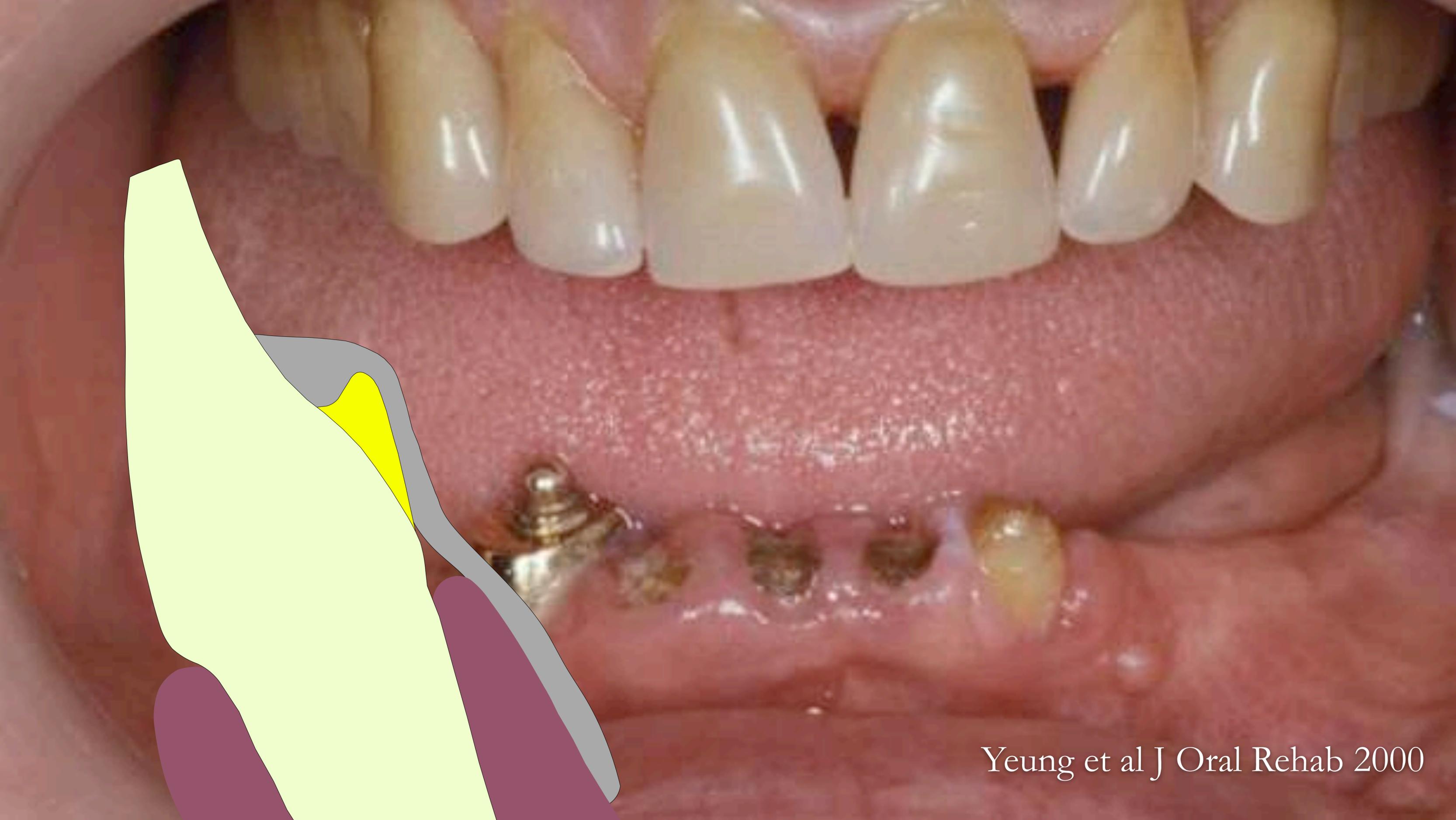


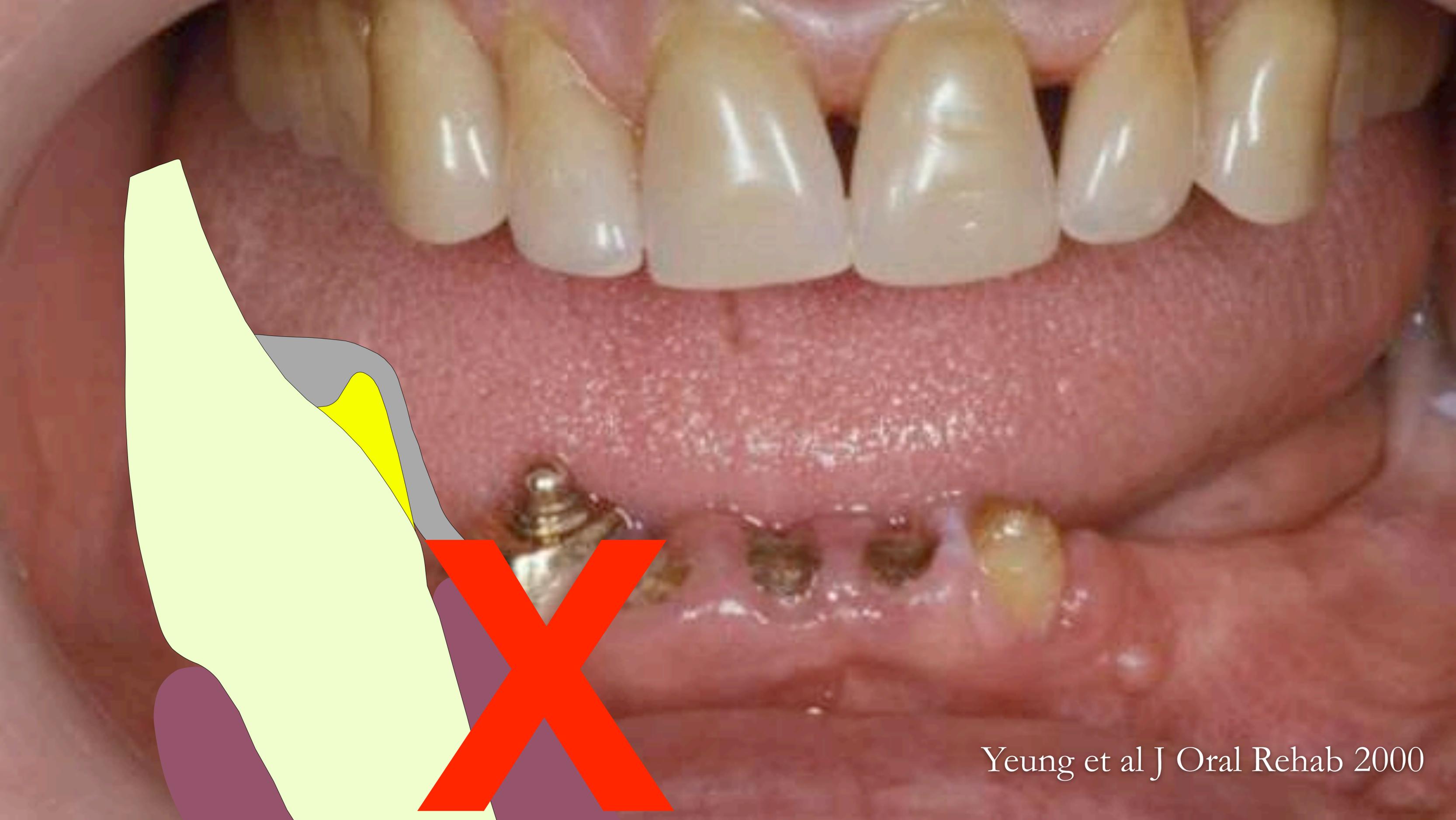














Margaret  
Thatcher

1979







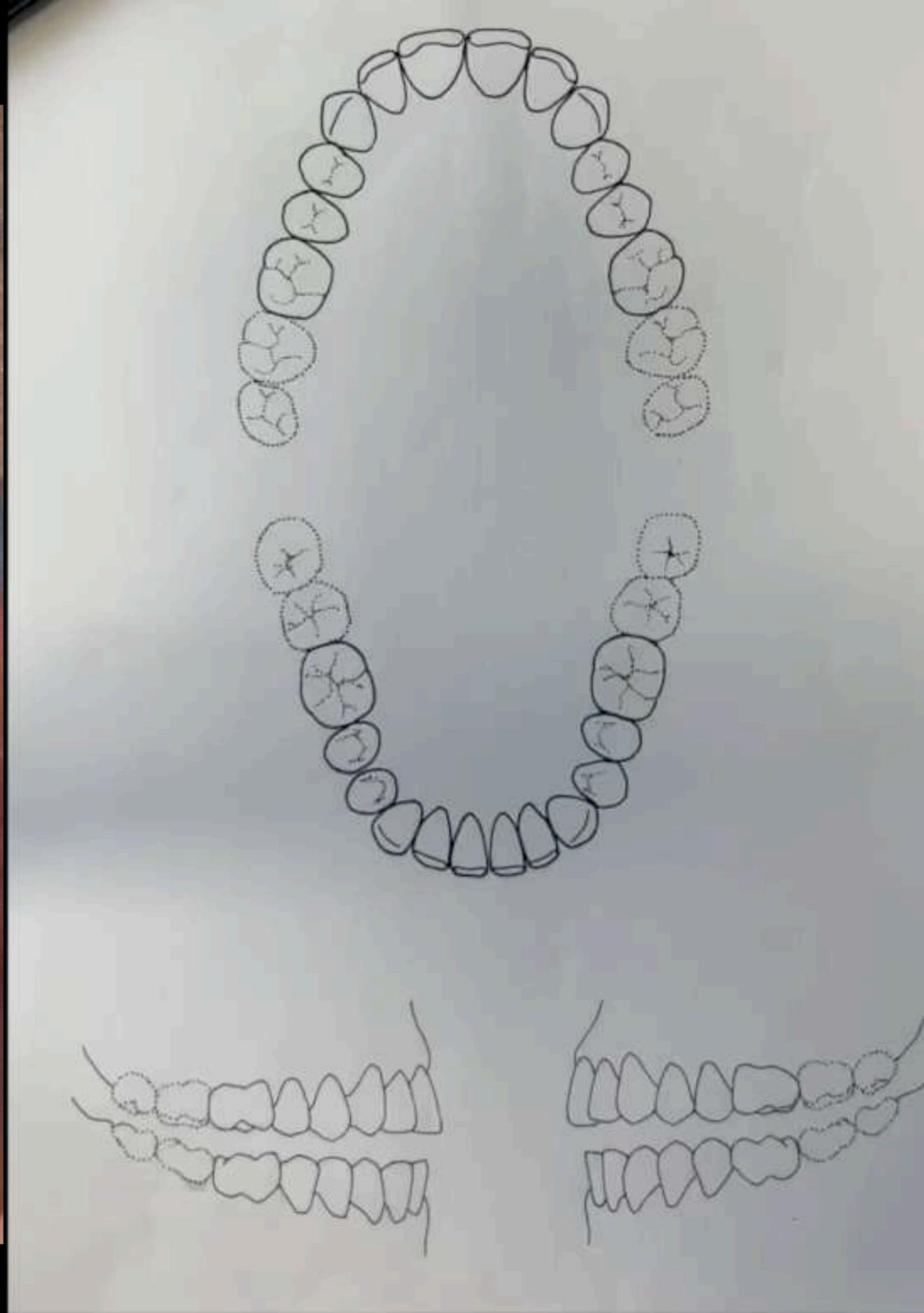


Helen Harris



Helen Harris

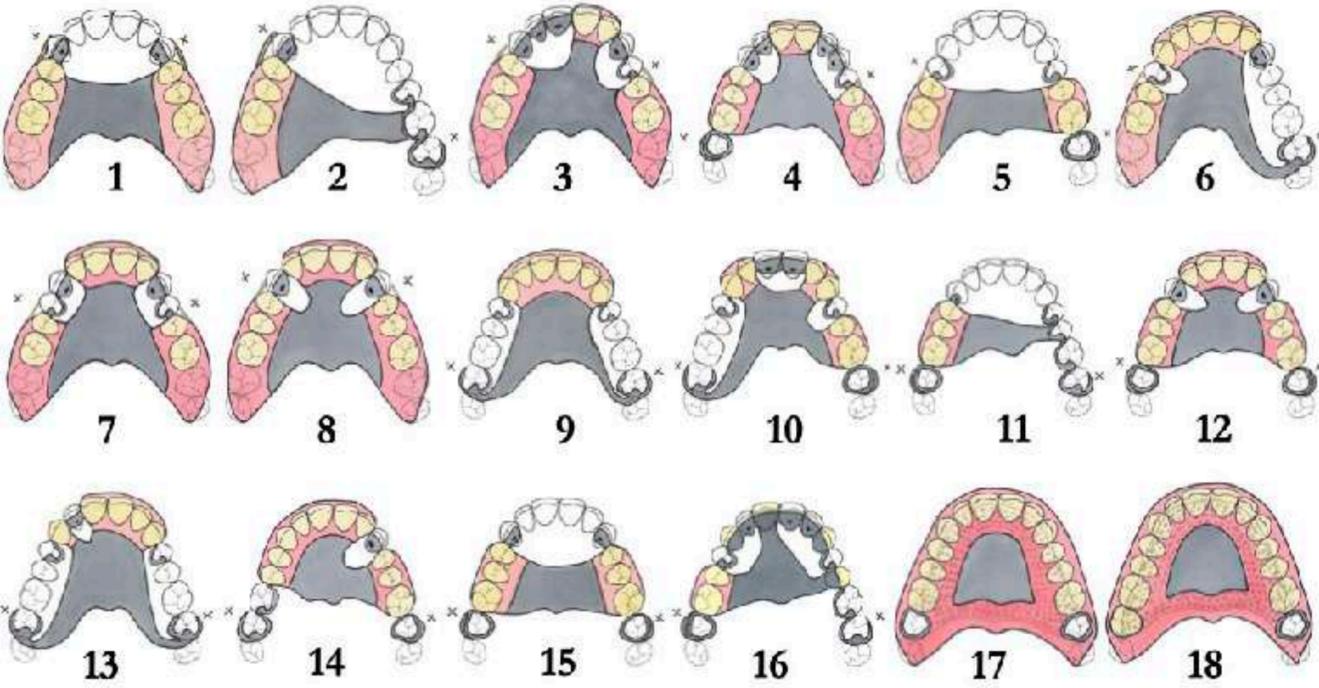




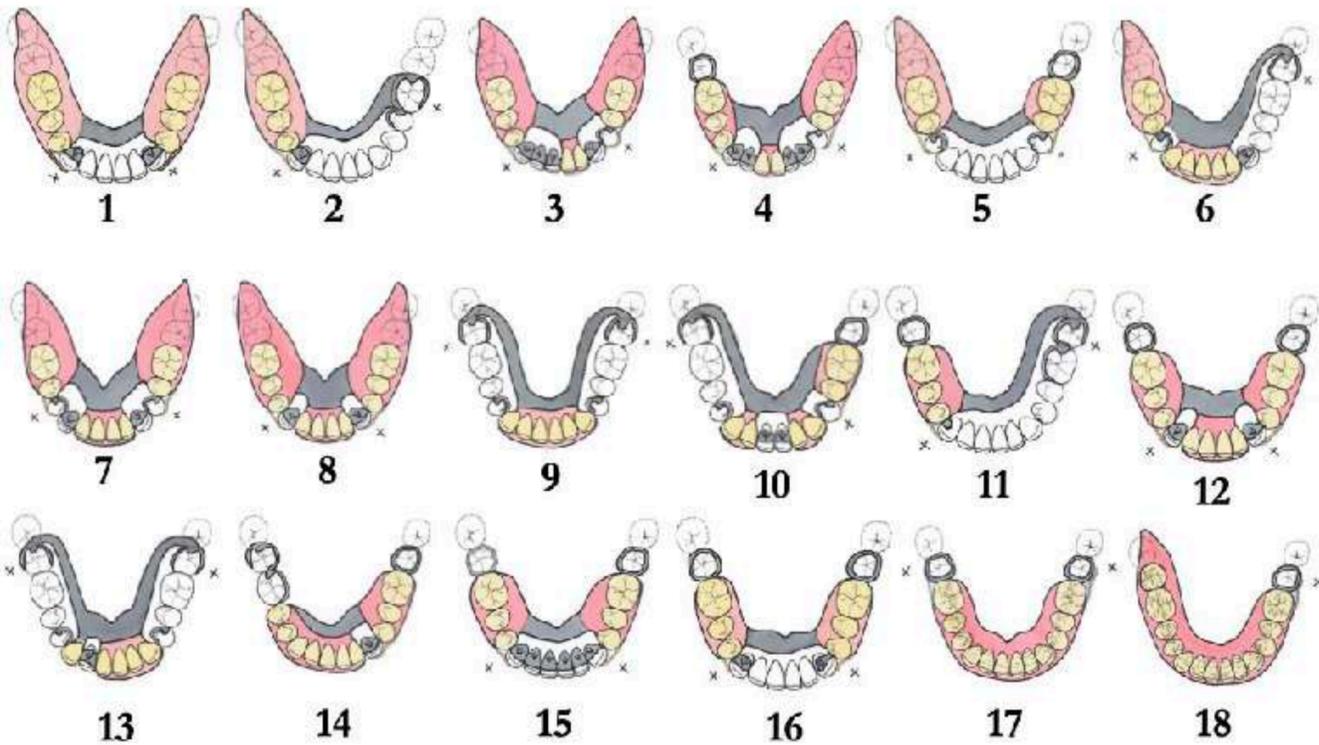


Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **GOOD** PROGNOSIS

Uppers

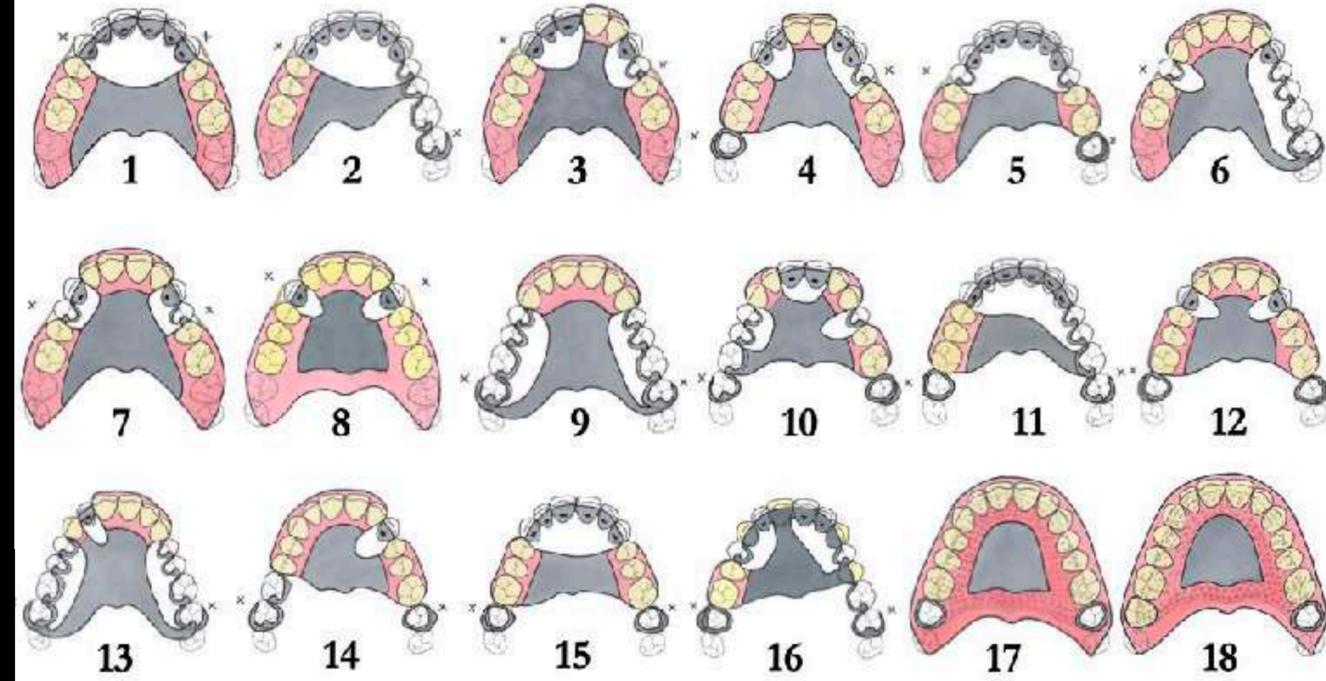


Lowers

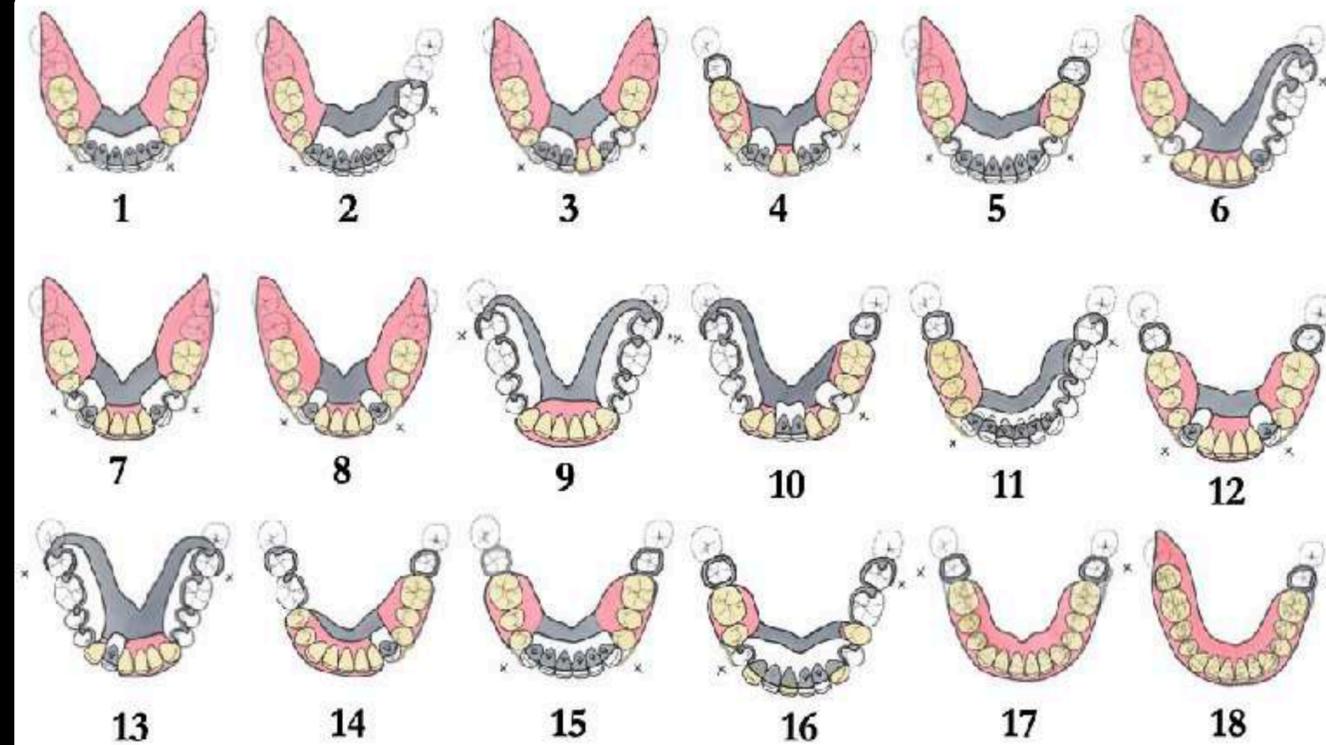


Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **DUBIOUS** PROGNOSIS

Uppers

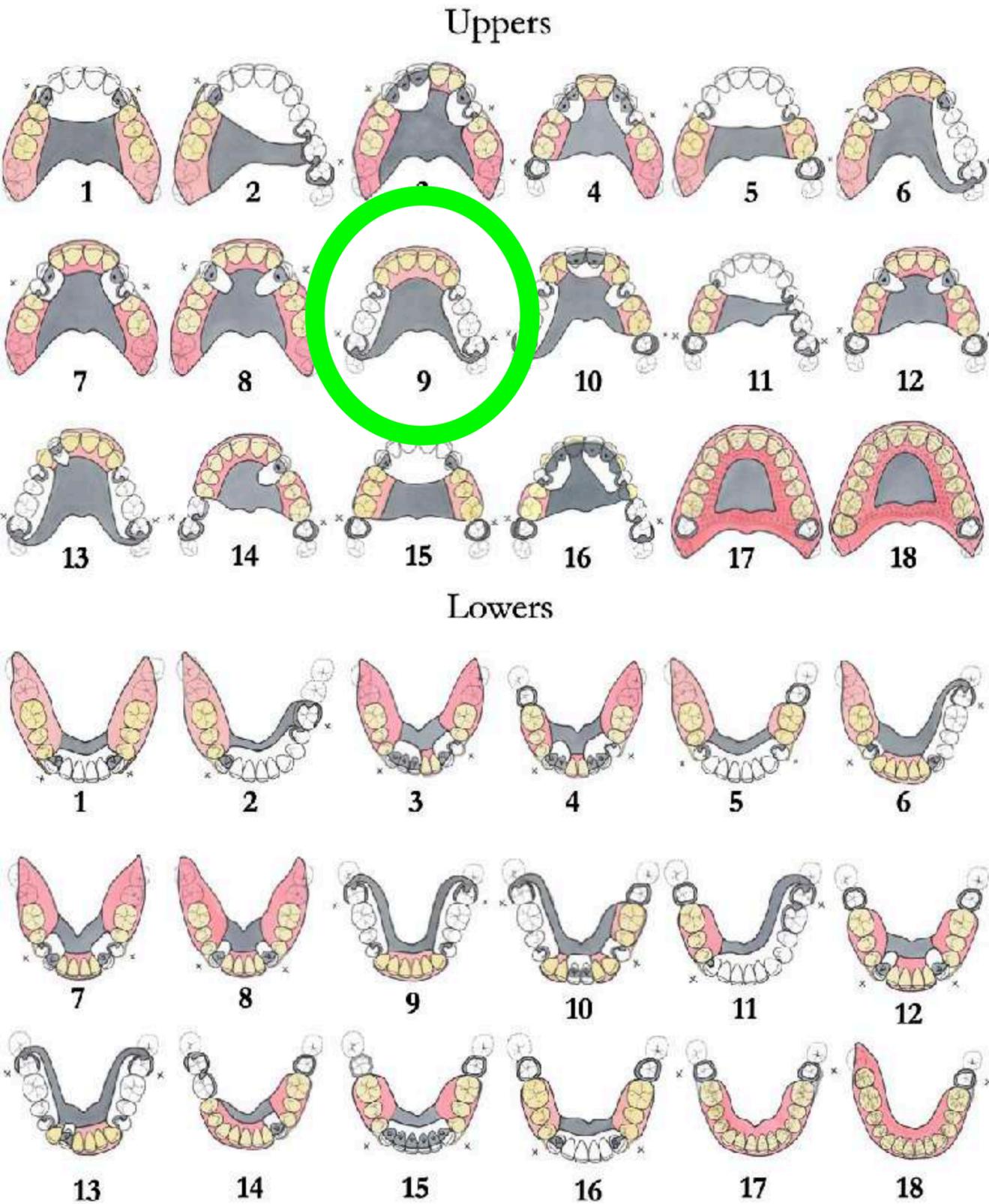


Lowers

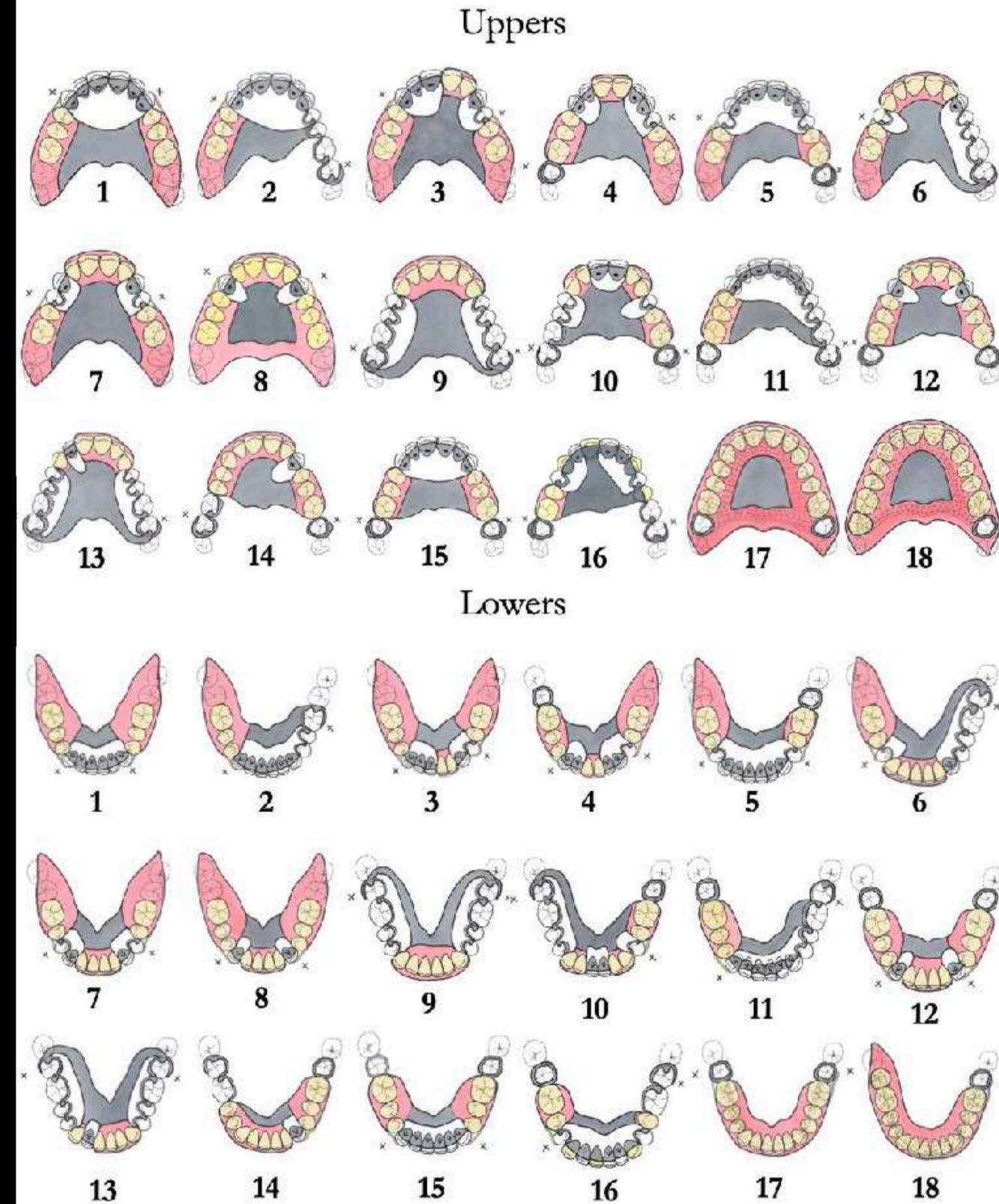


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Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **GOOD** PROGNOSIS



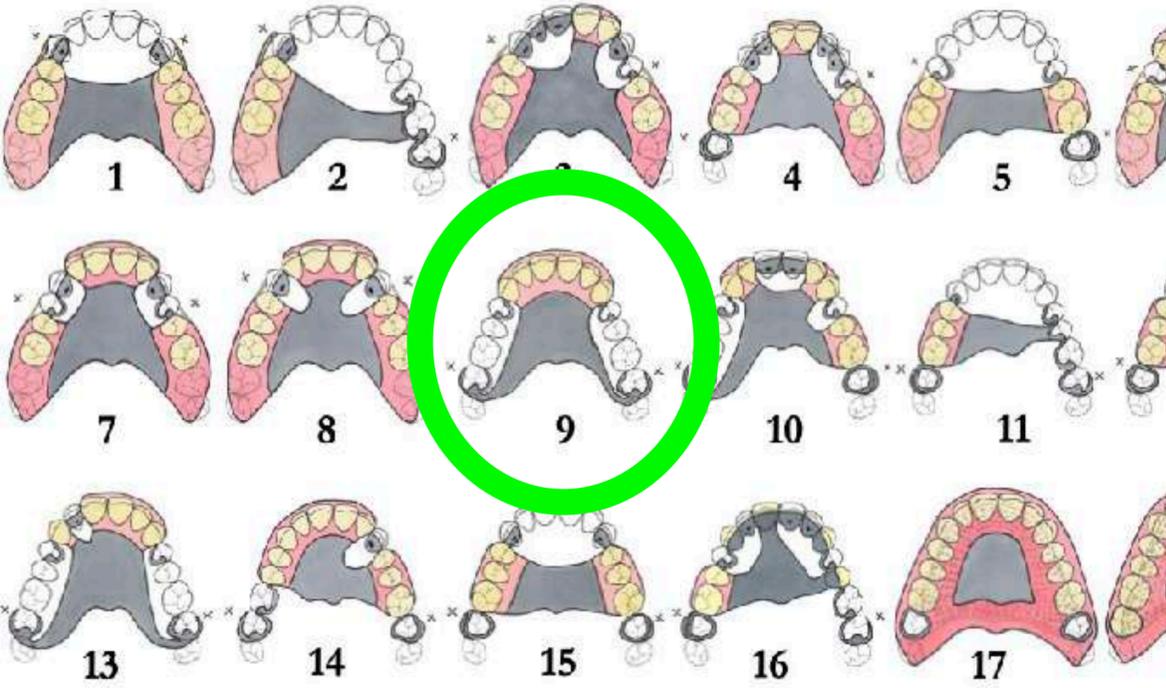
Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **DUBIOUS** PROGNOSIS



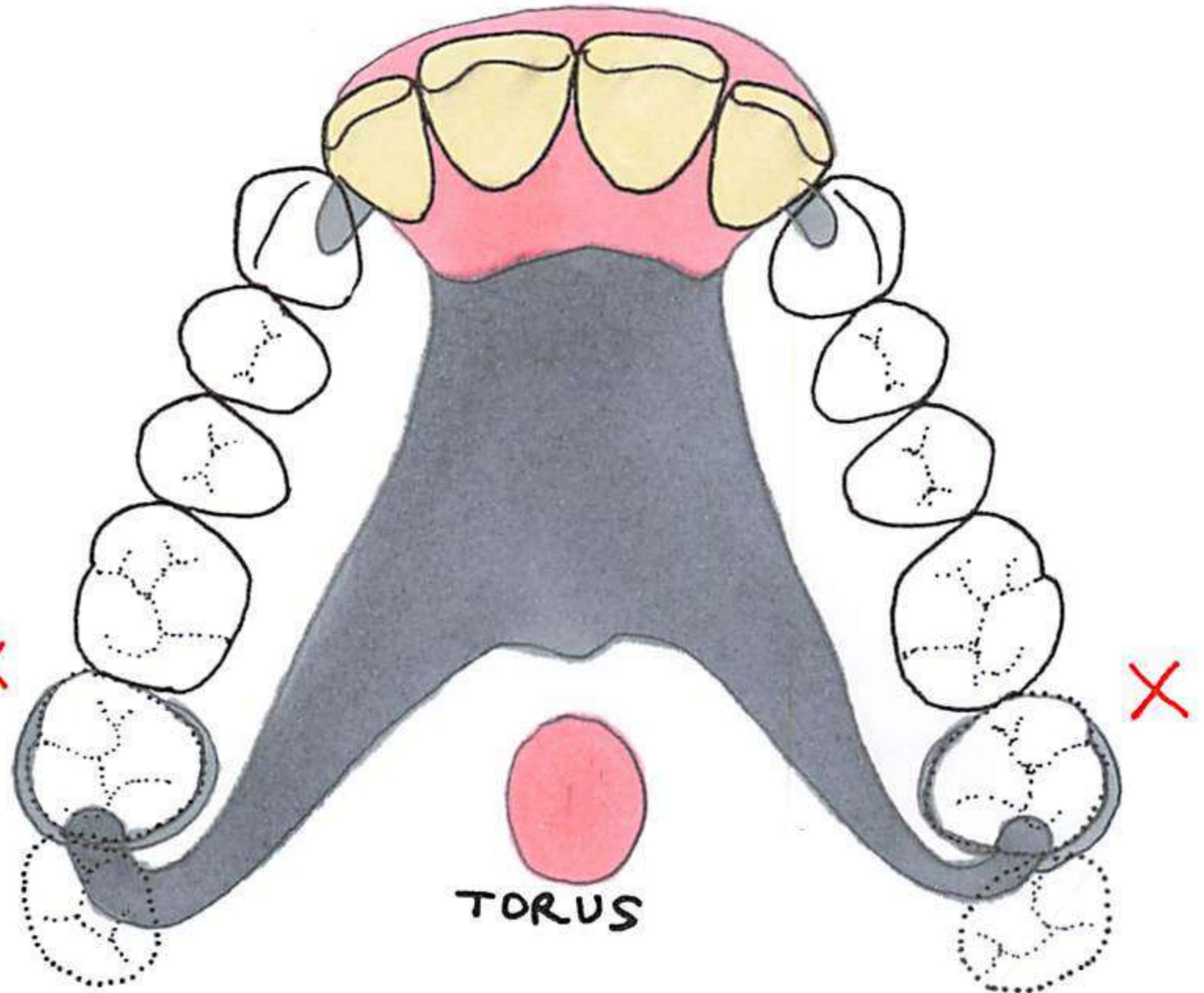
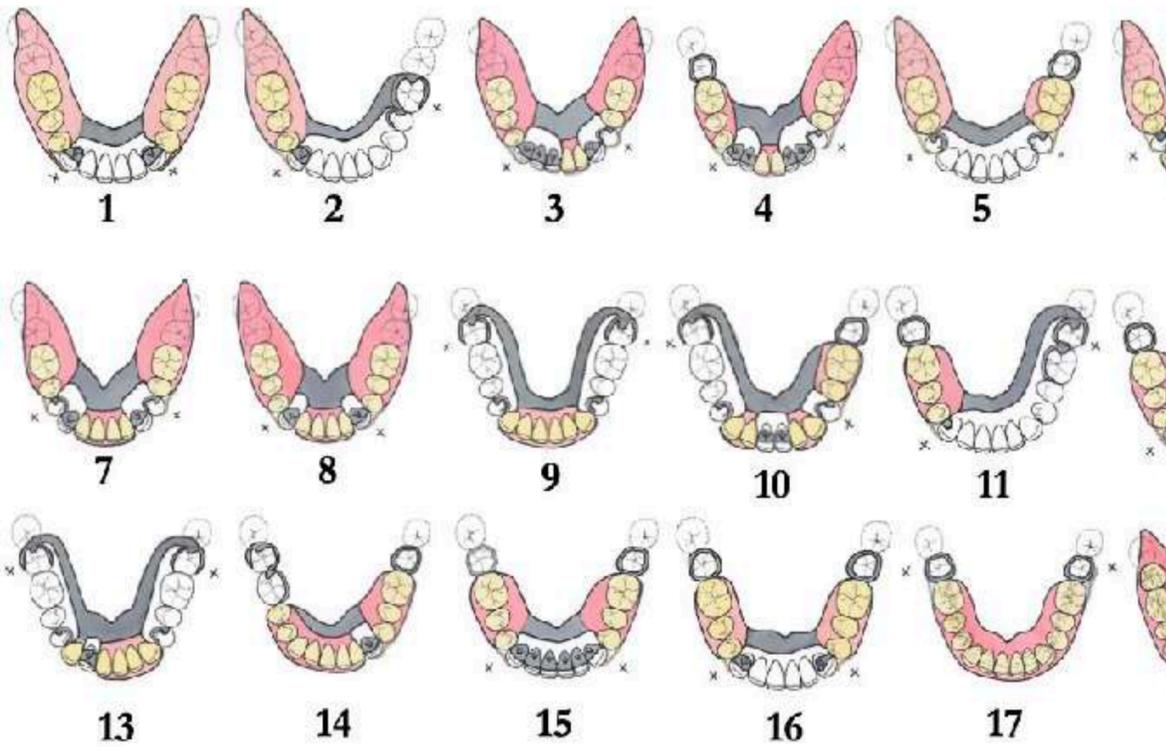
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resources](http://finlaysutton.co.uk/resources)

Scandinavian universal designs for **many** patterns of tooth  
REMAINING TEETH HAVE **GOOD** PROGNOS

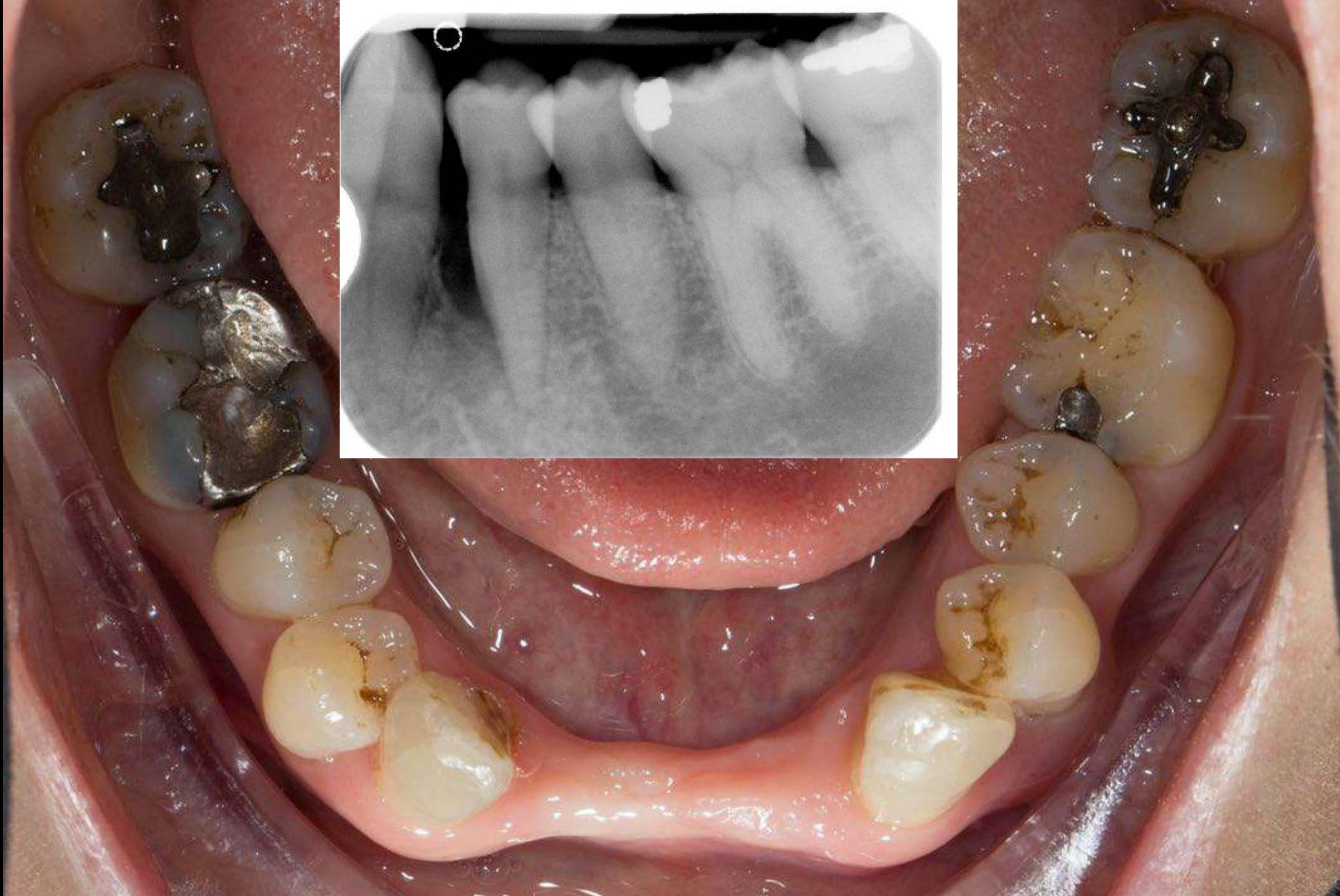
Uppers

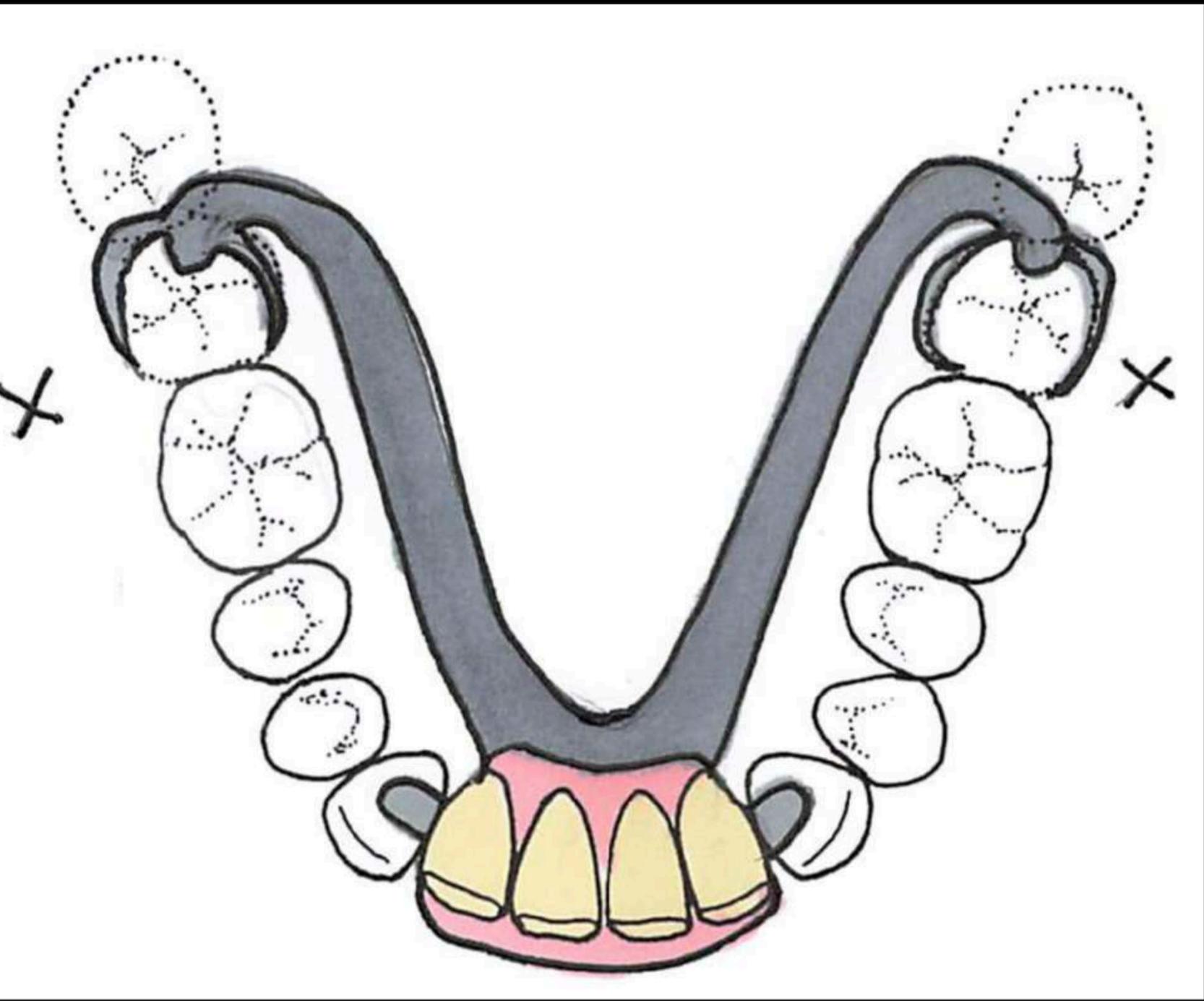


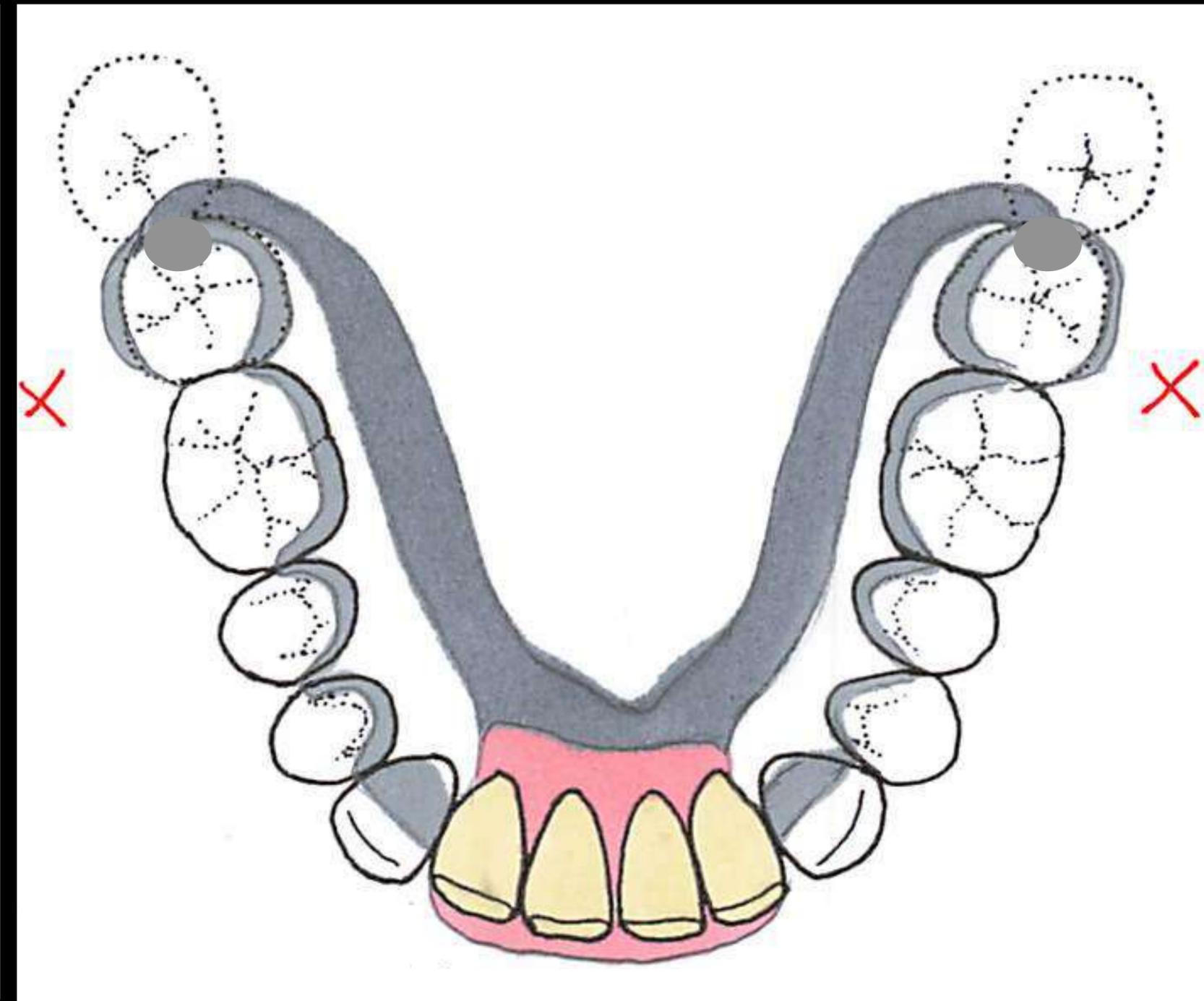
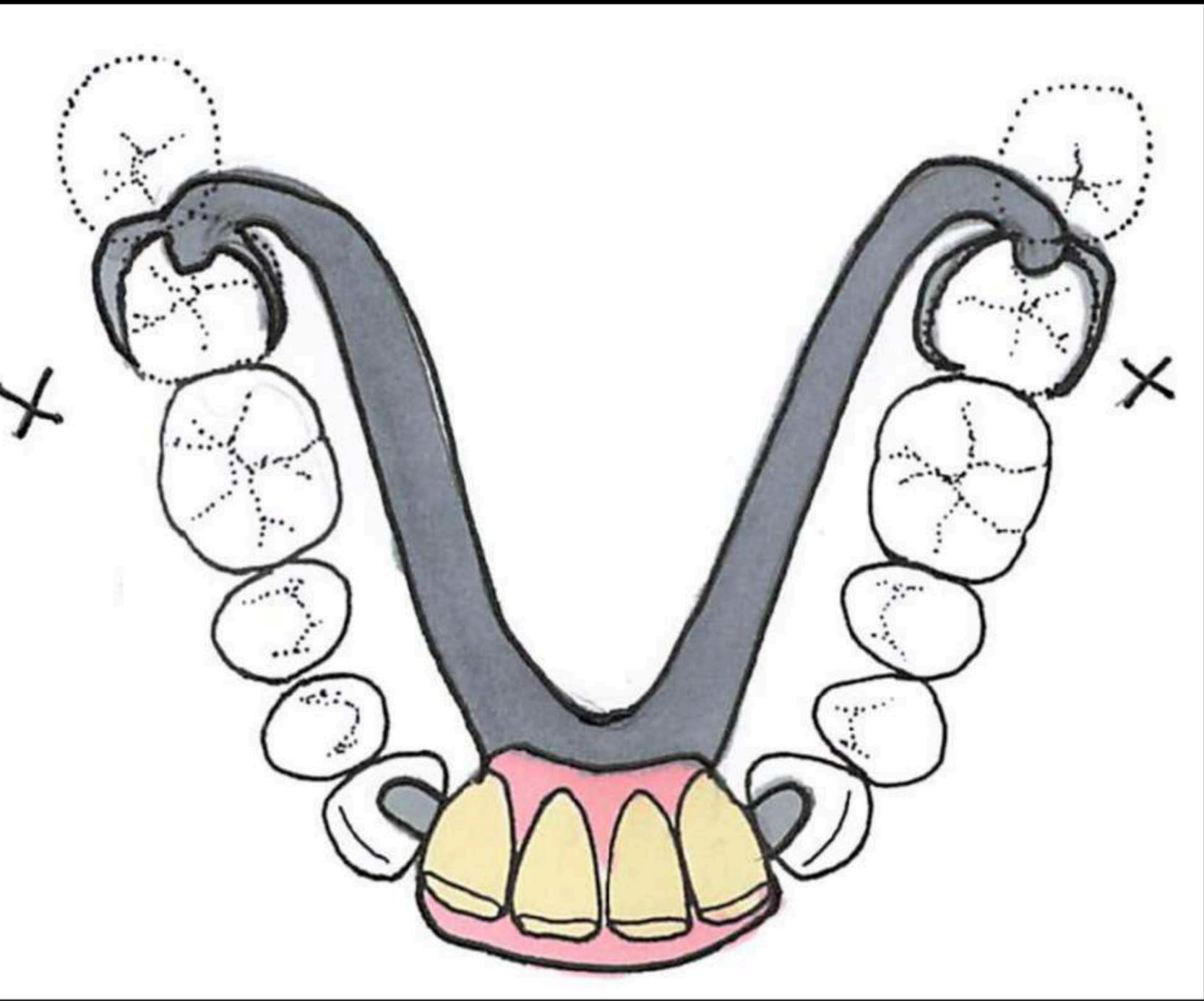
Lowers





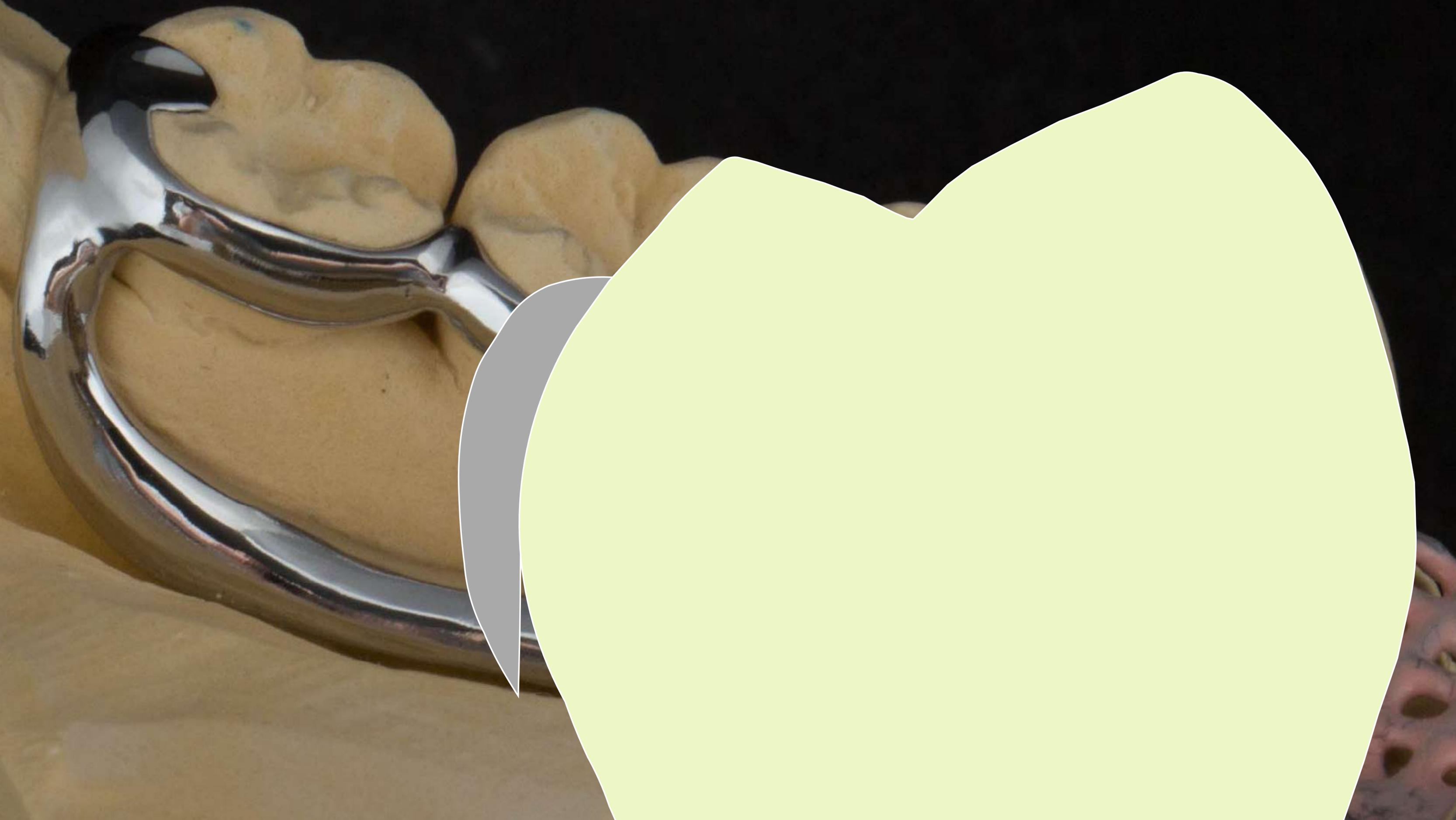
















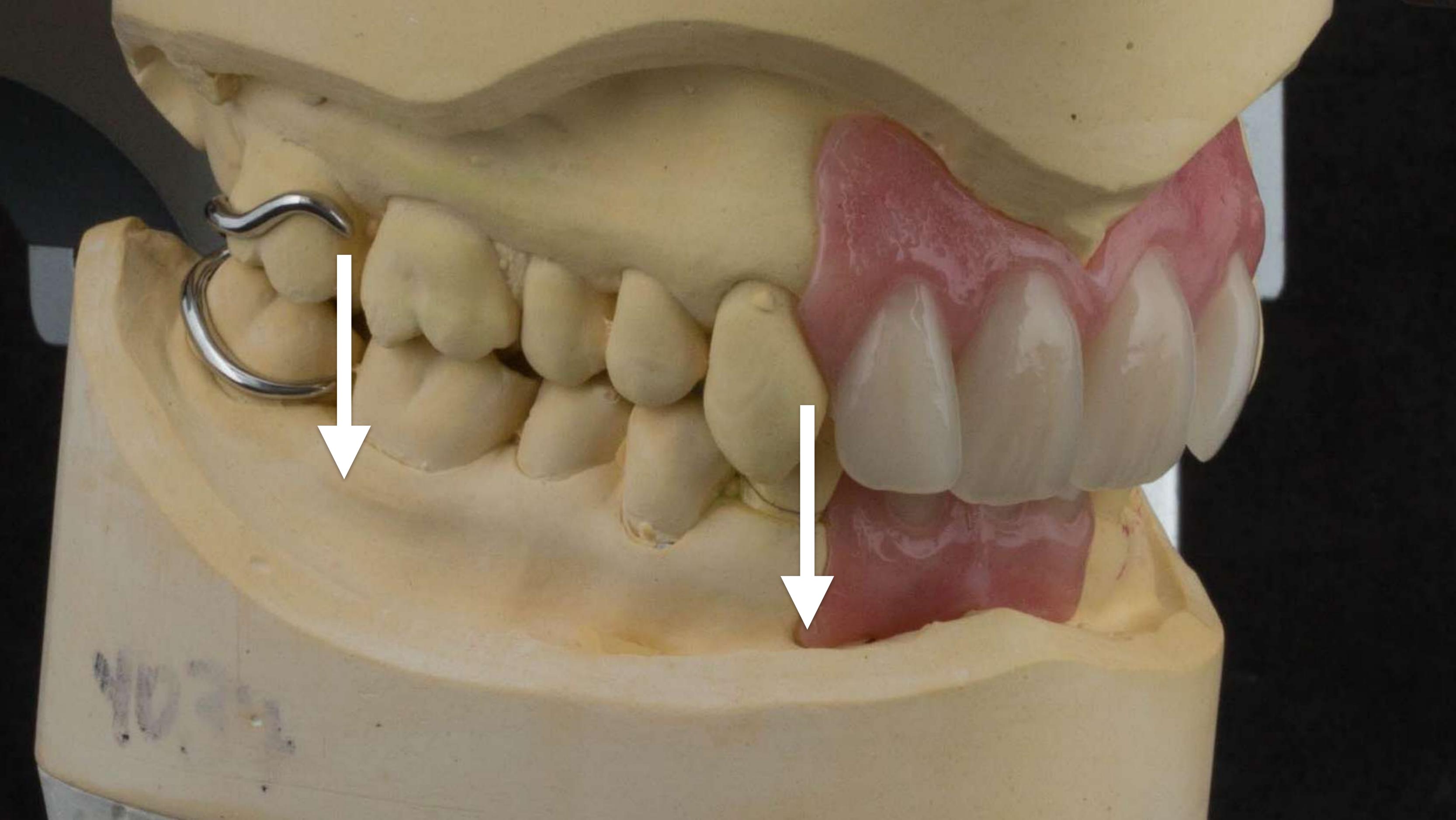






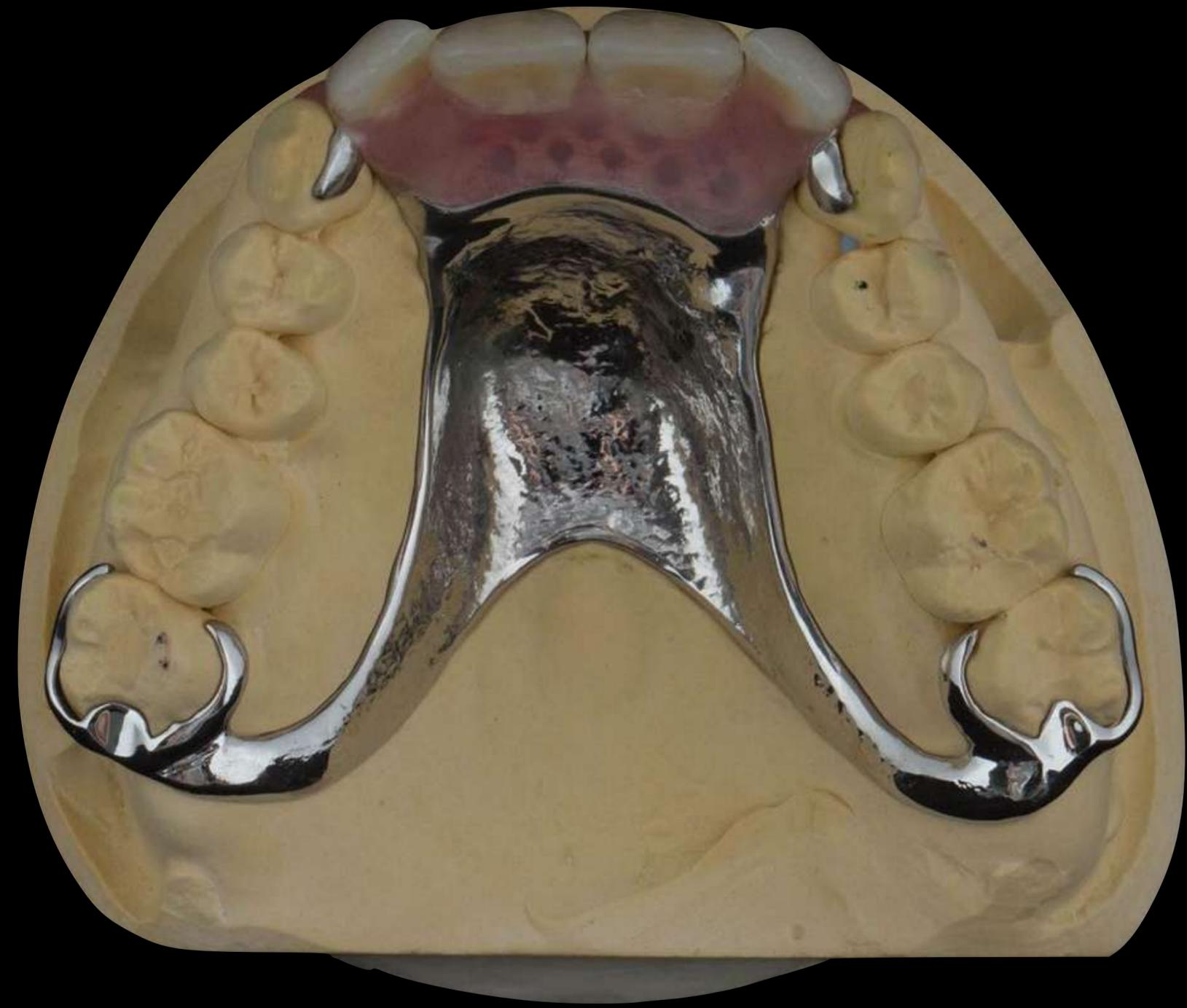


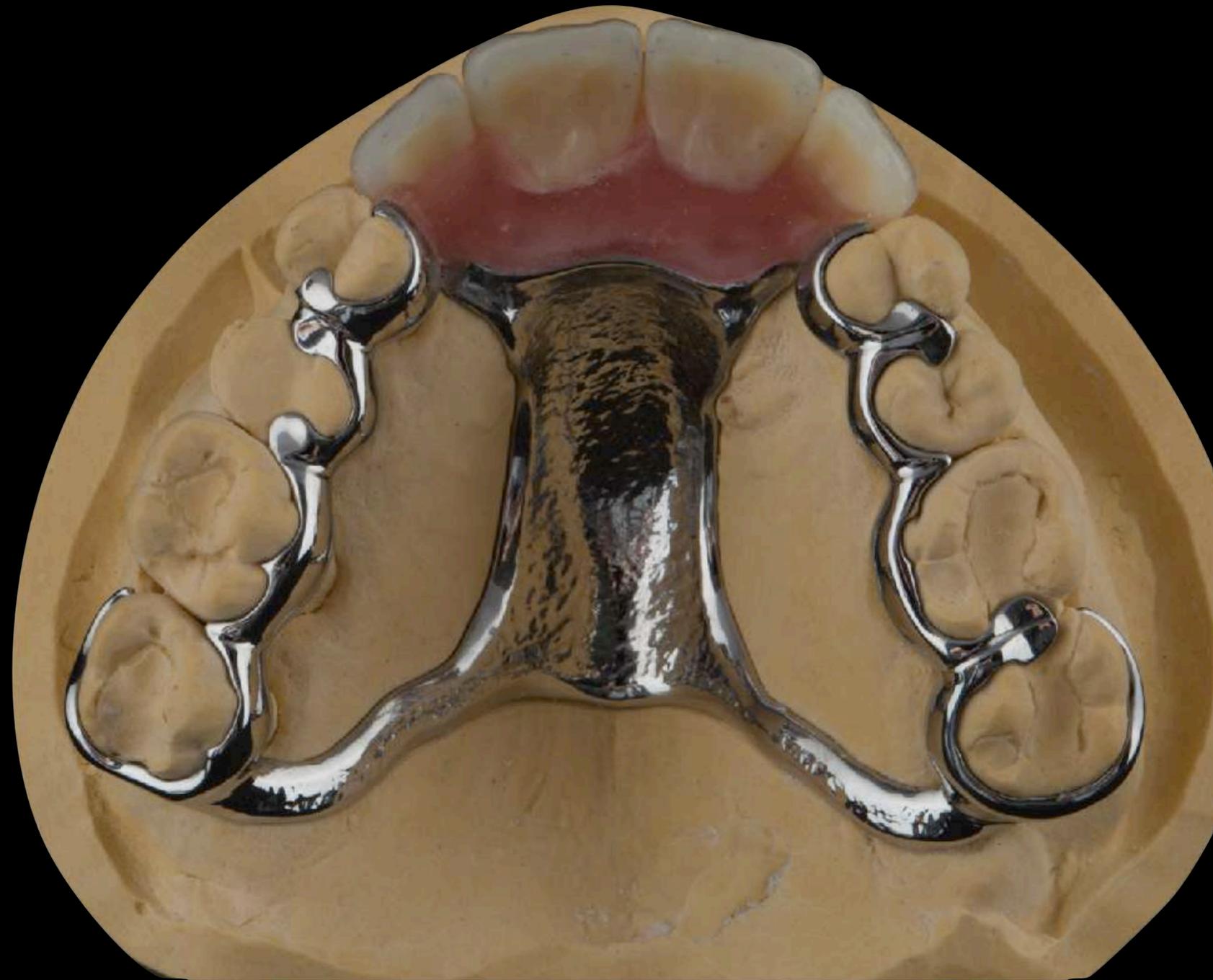
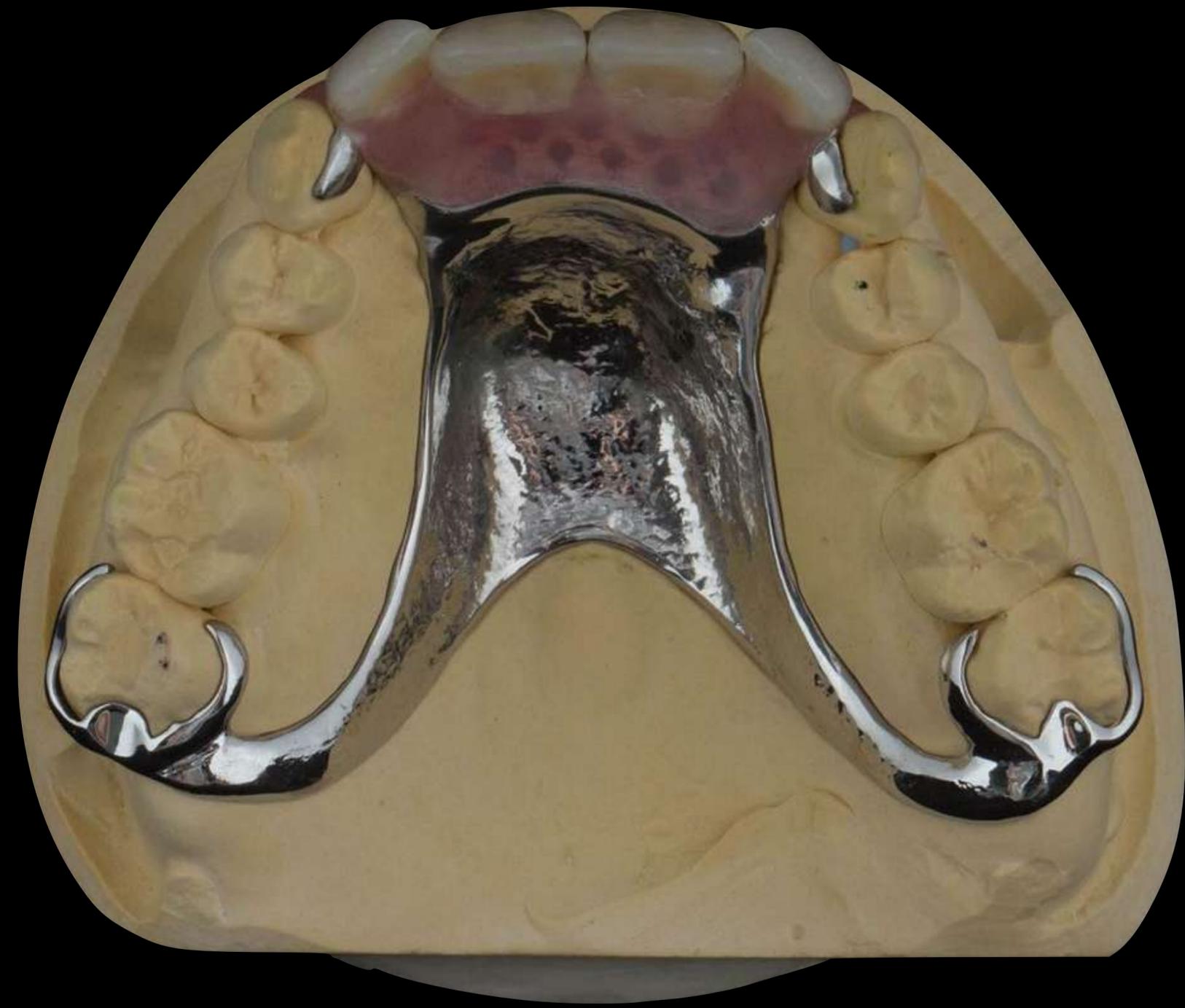




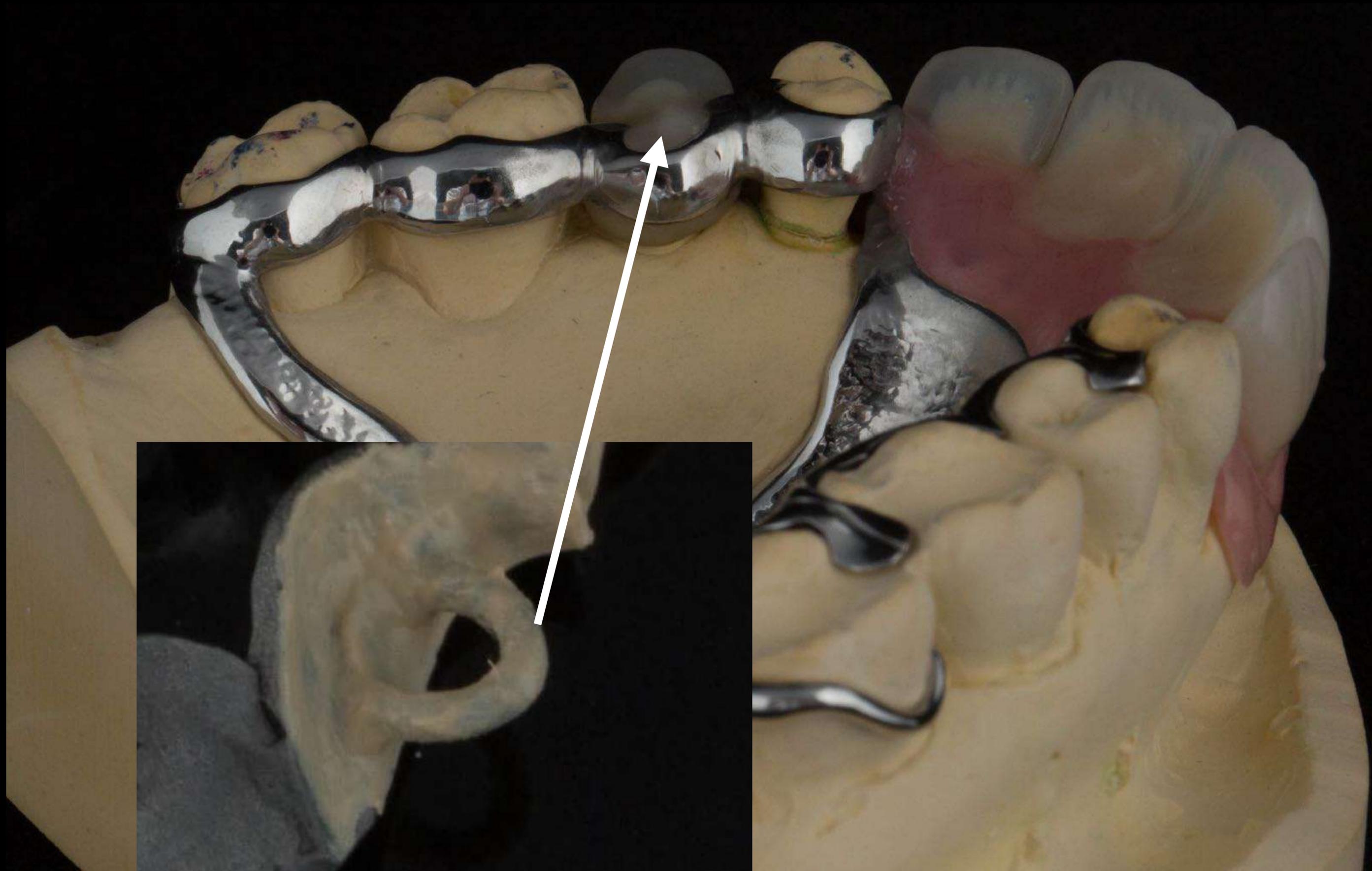


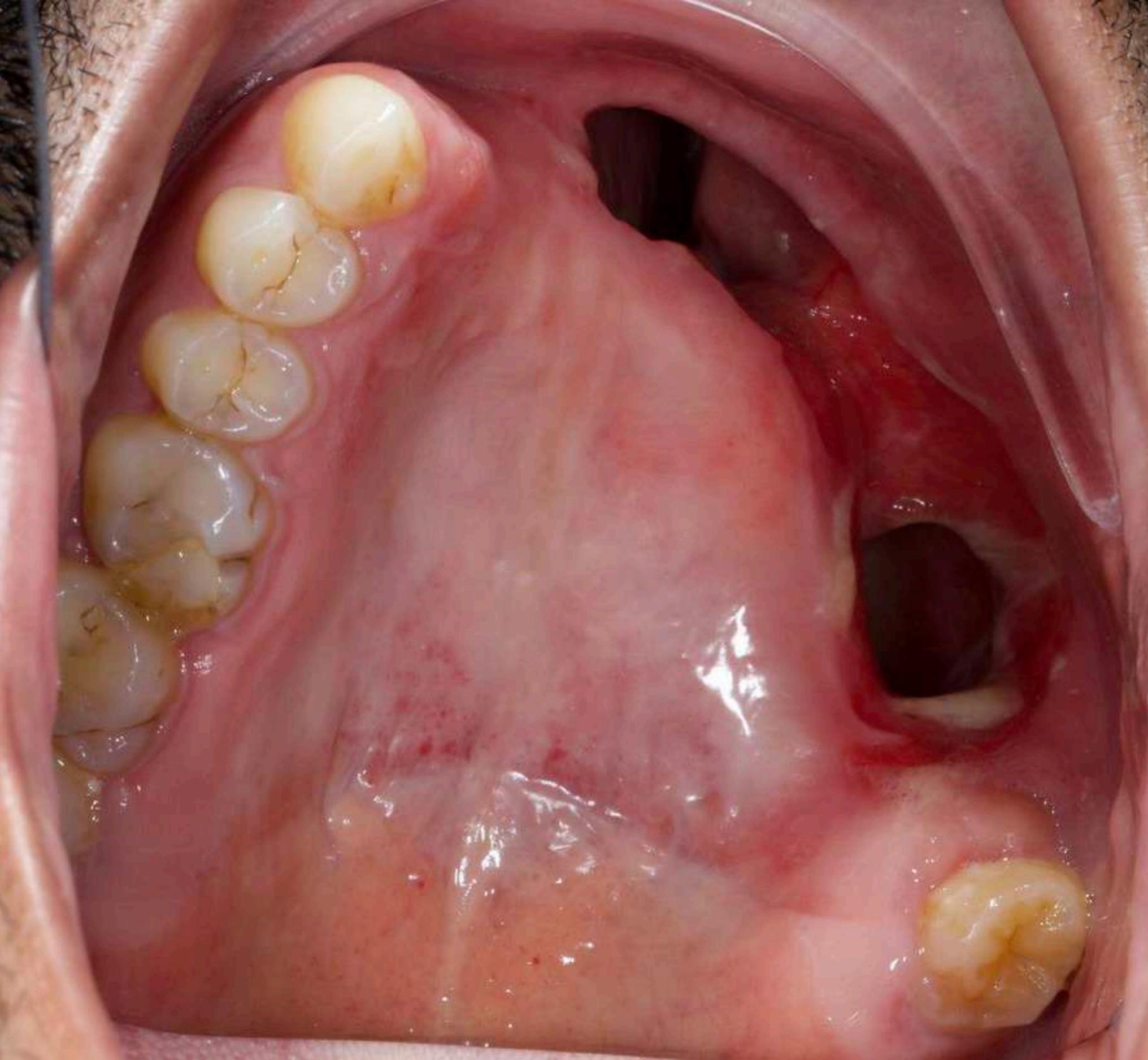












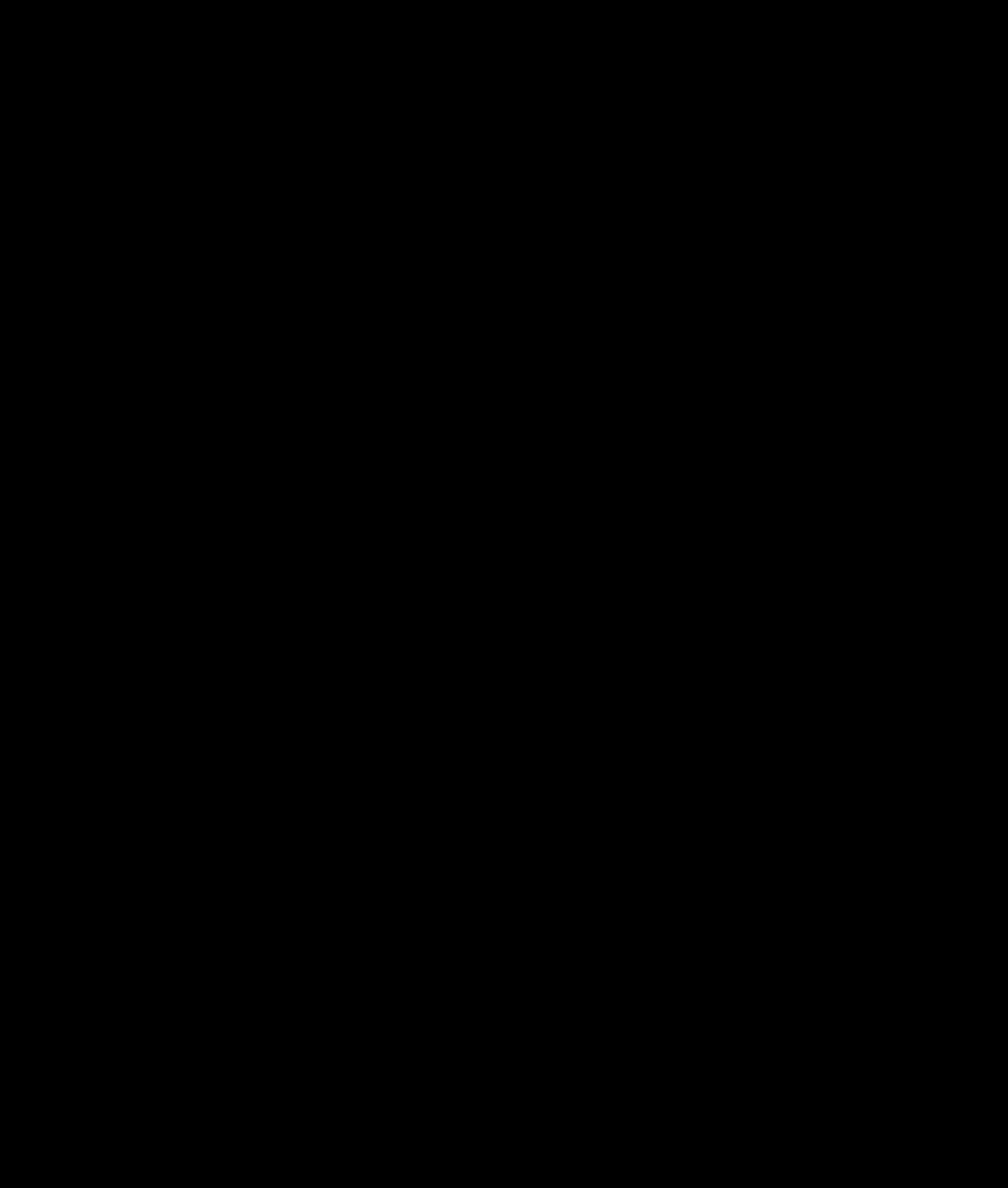
James



James

Odontogenic  
myxoma













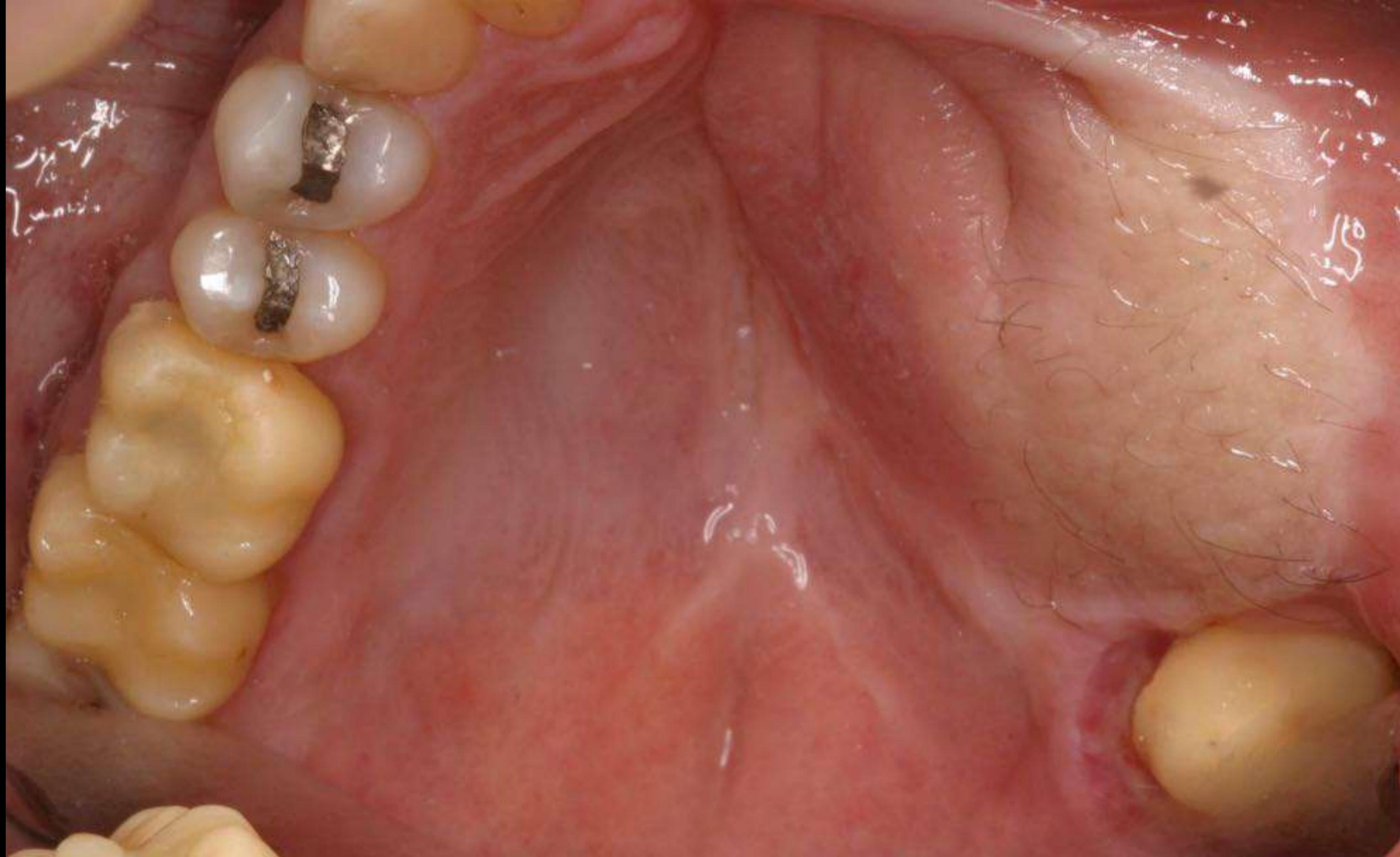


Stephen 2003  
Liverpool DH



LIVERPOOL D  
STEPHEN



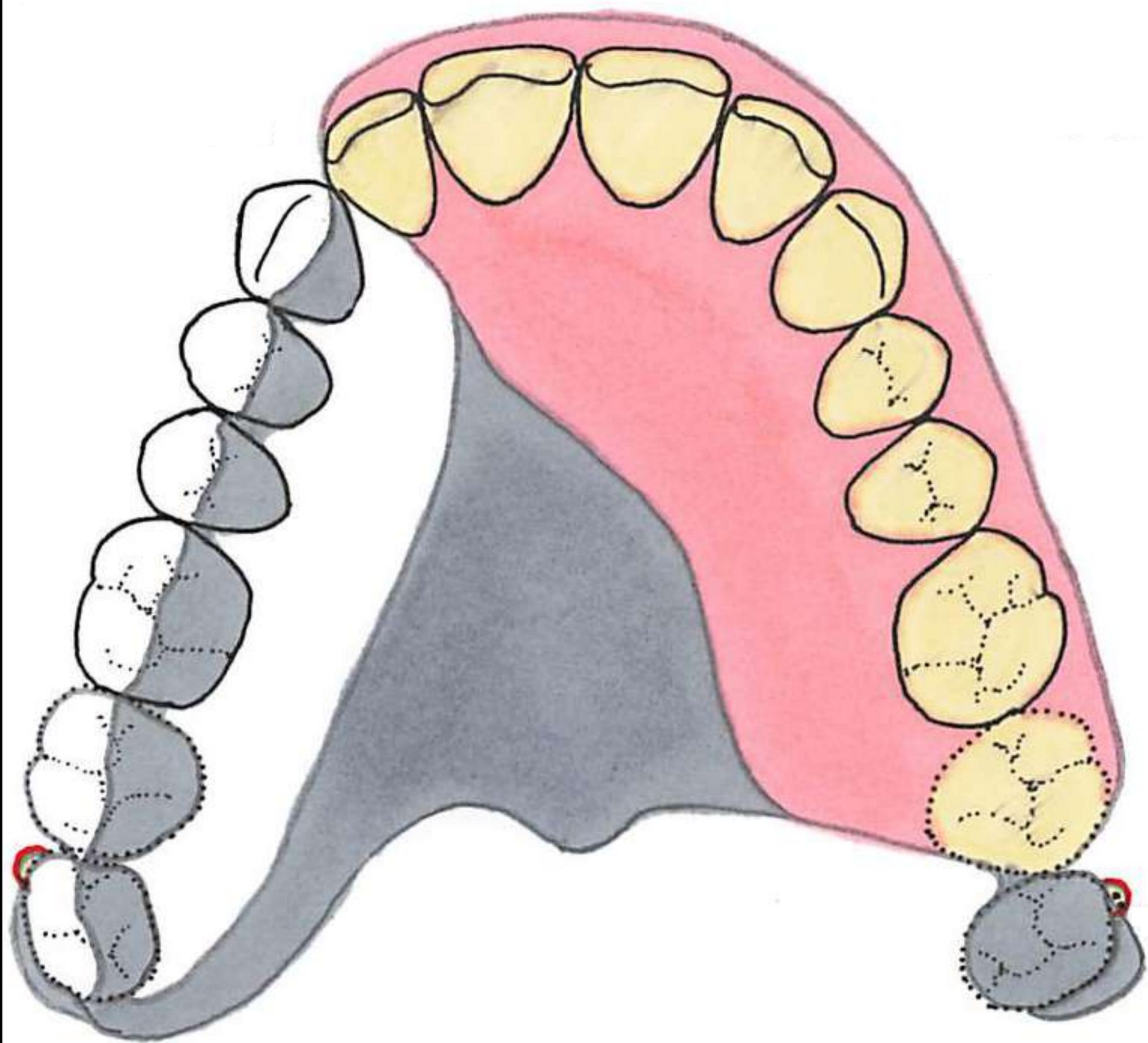




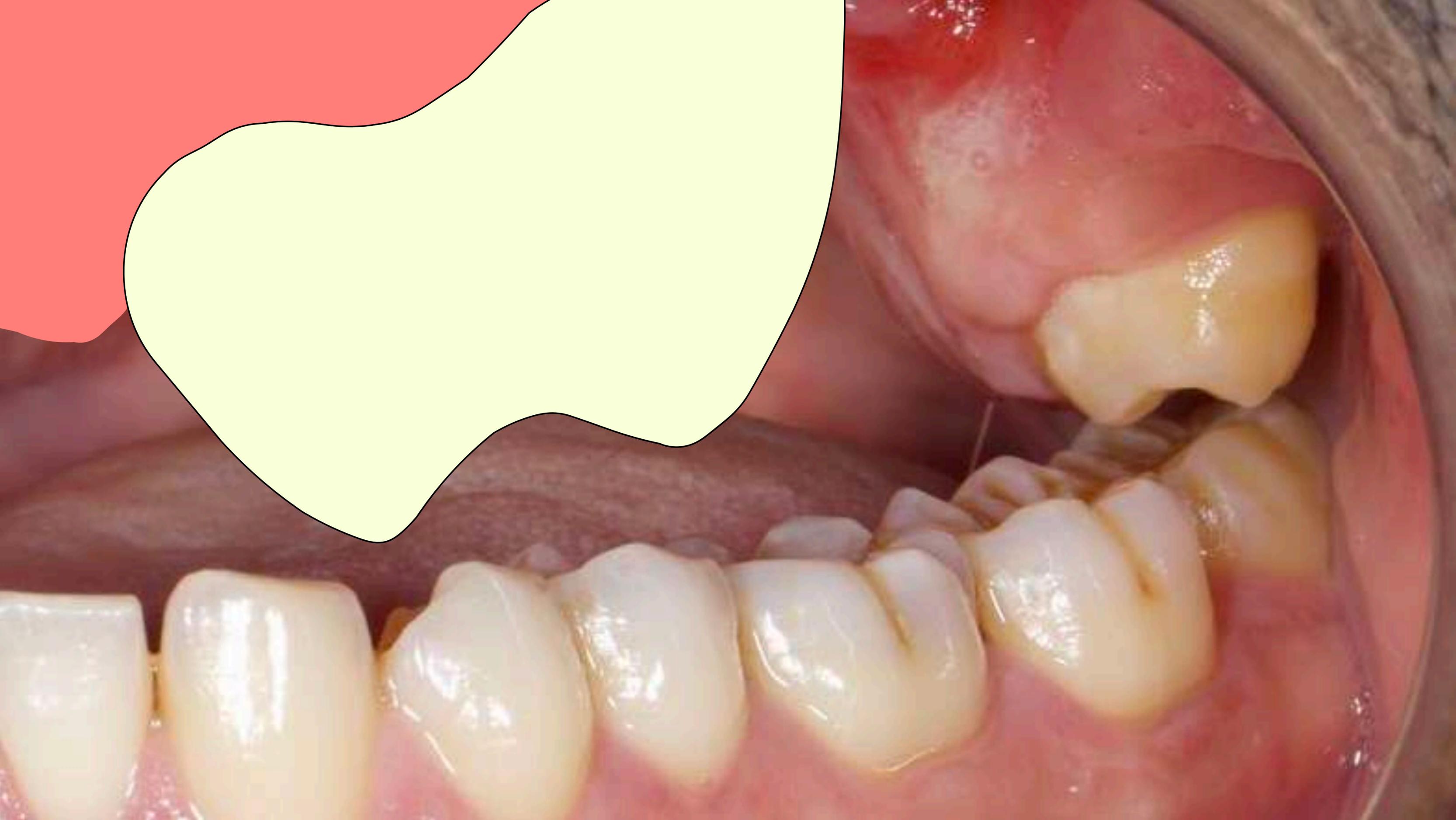
LIVERPOOL D  
STEPHEN

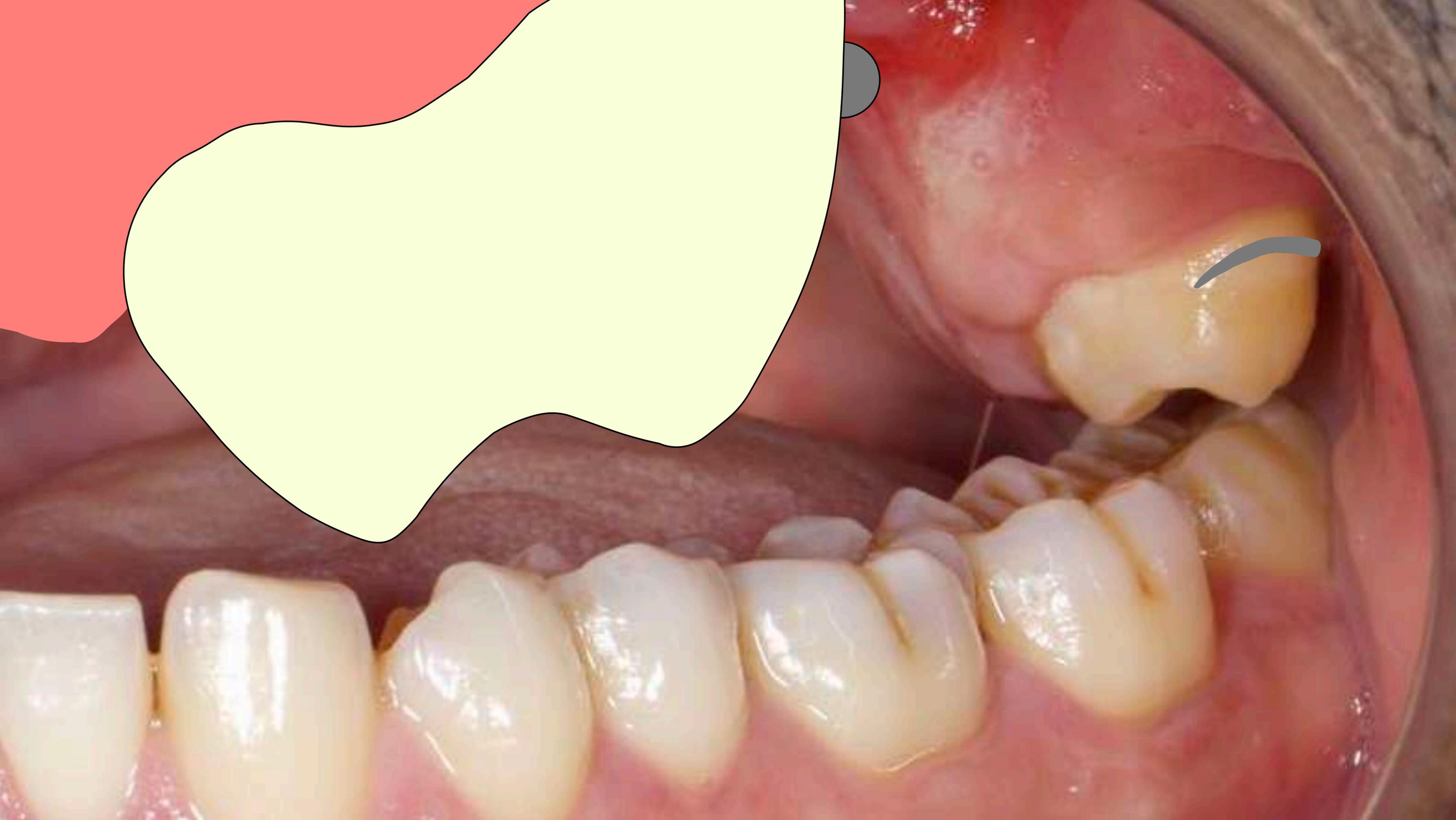


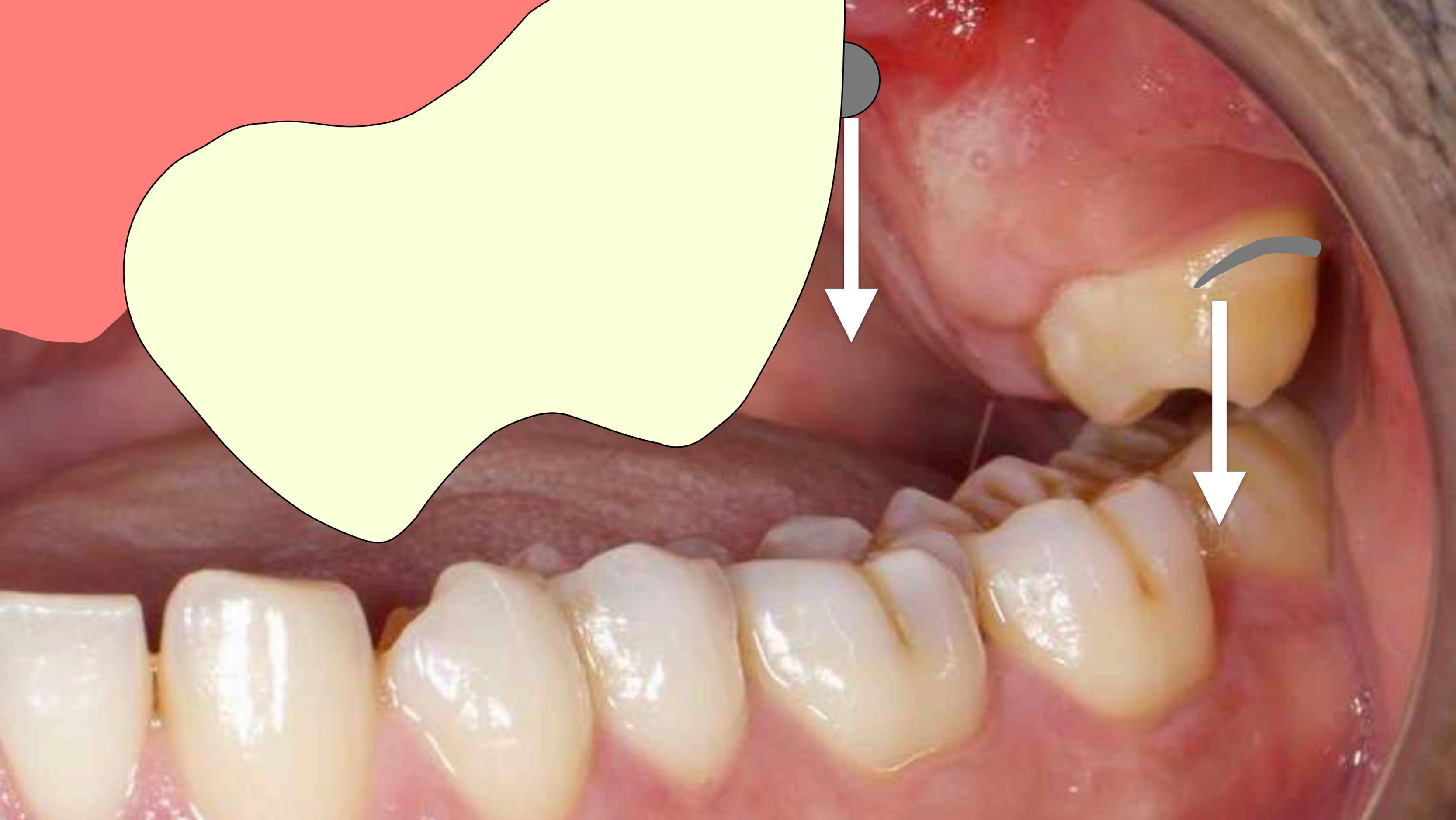


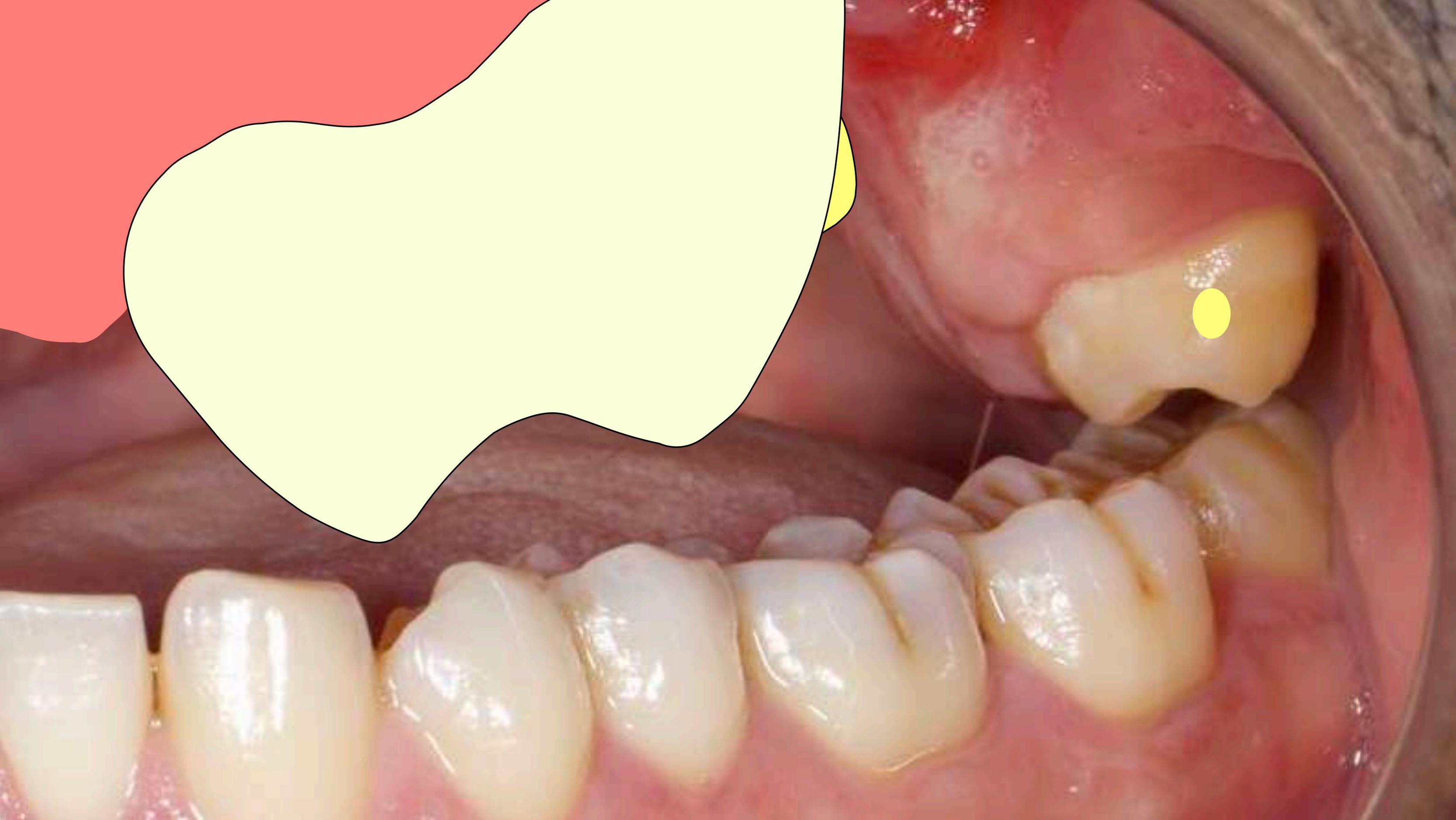


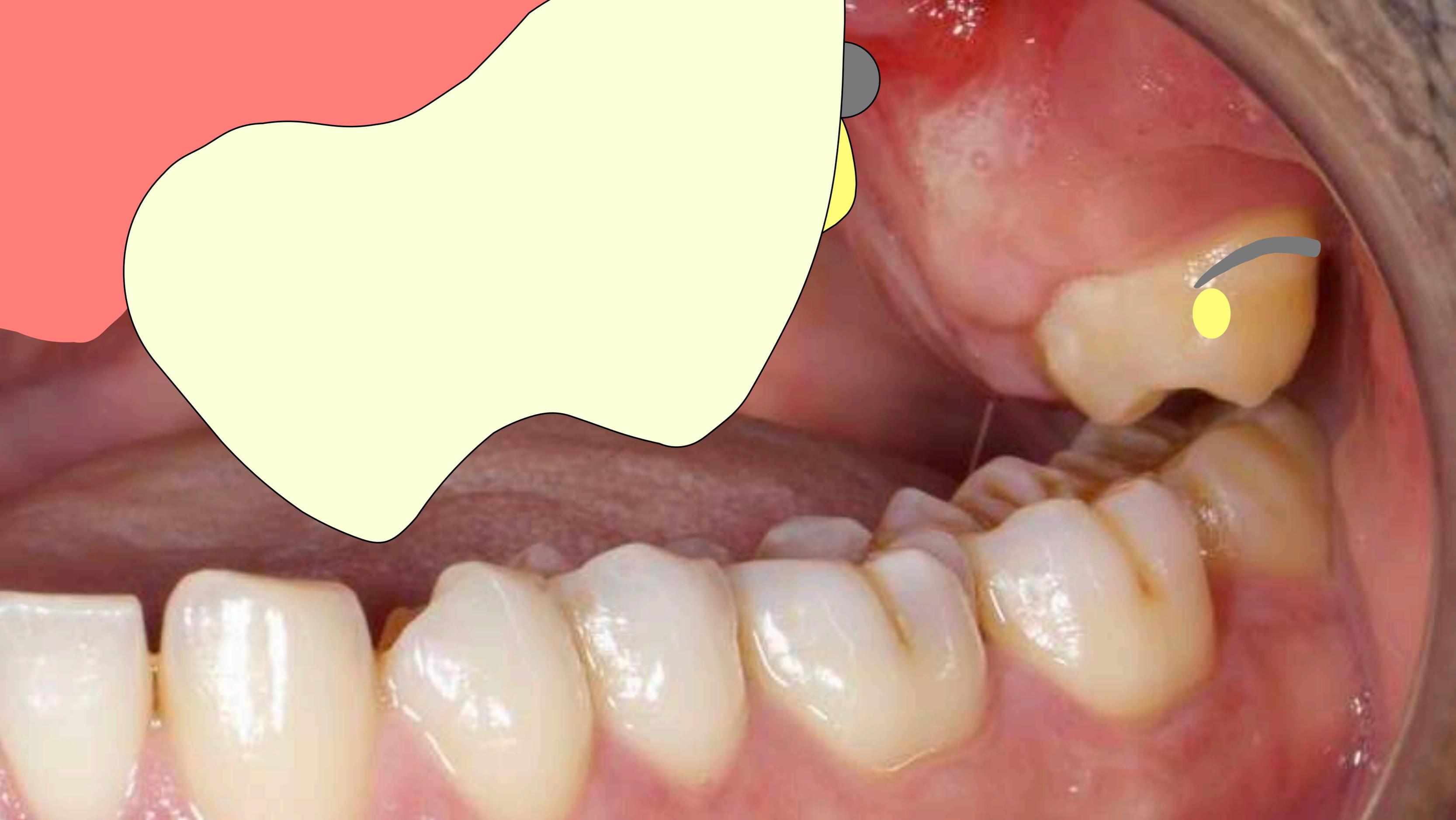


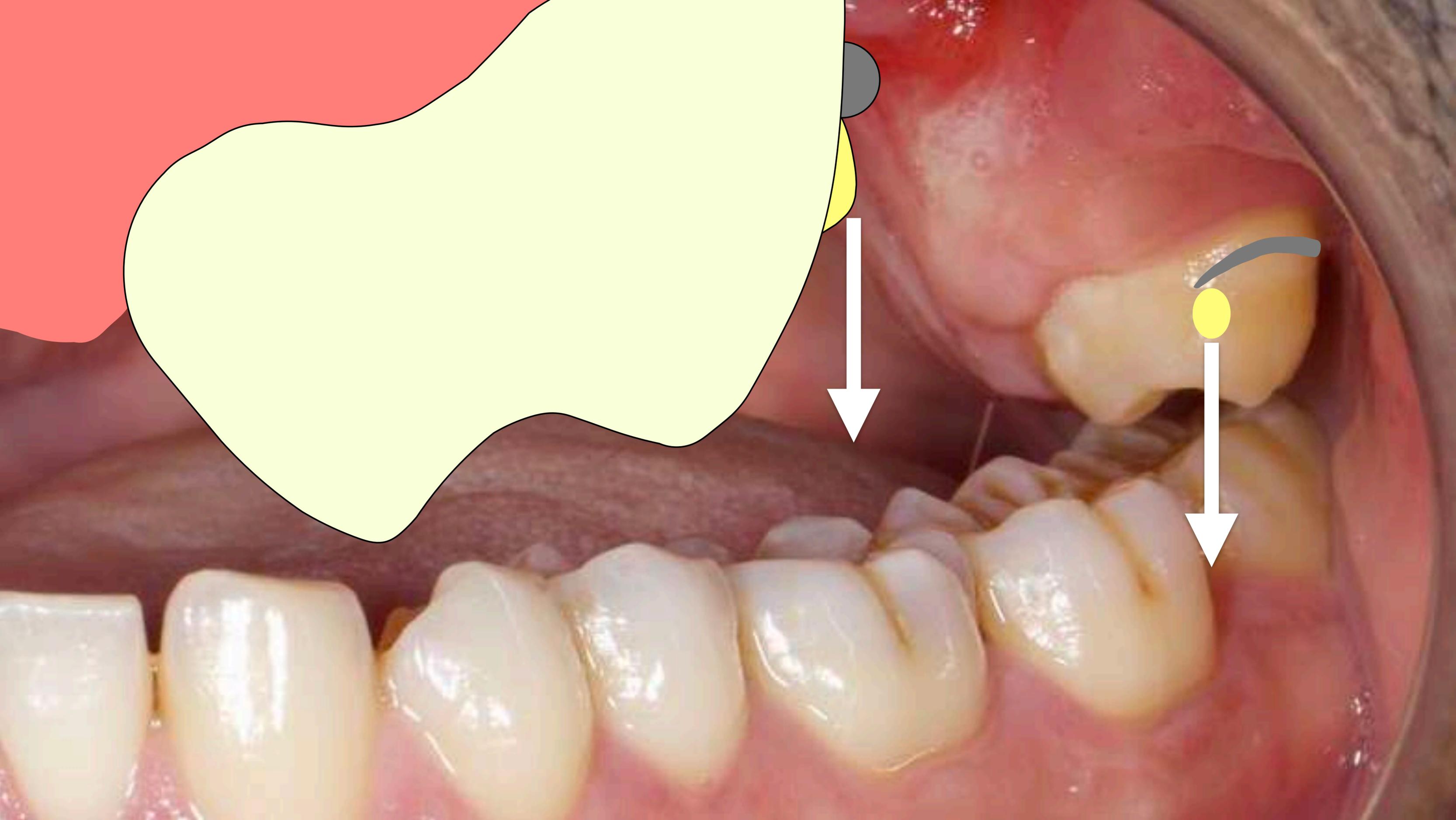








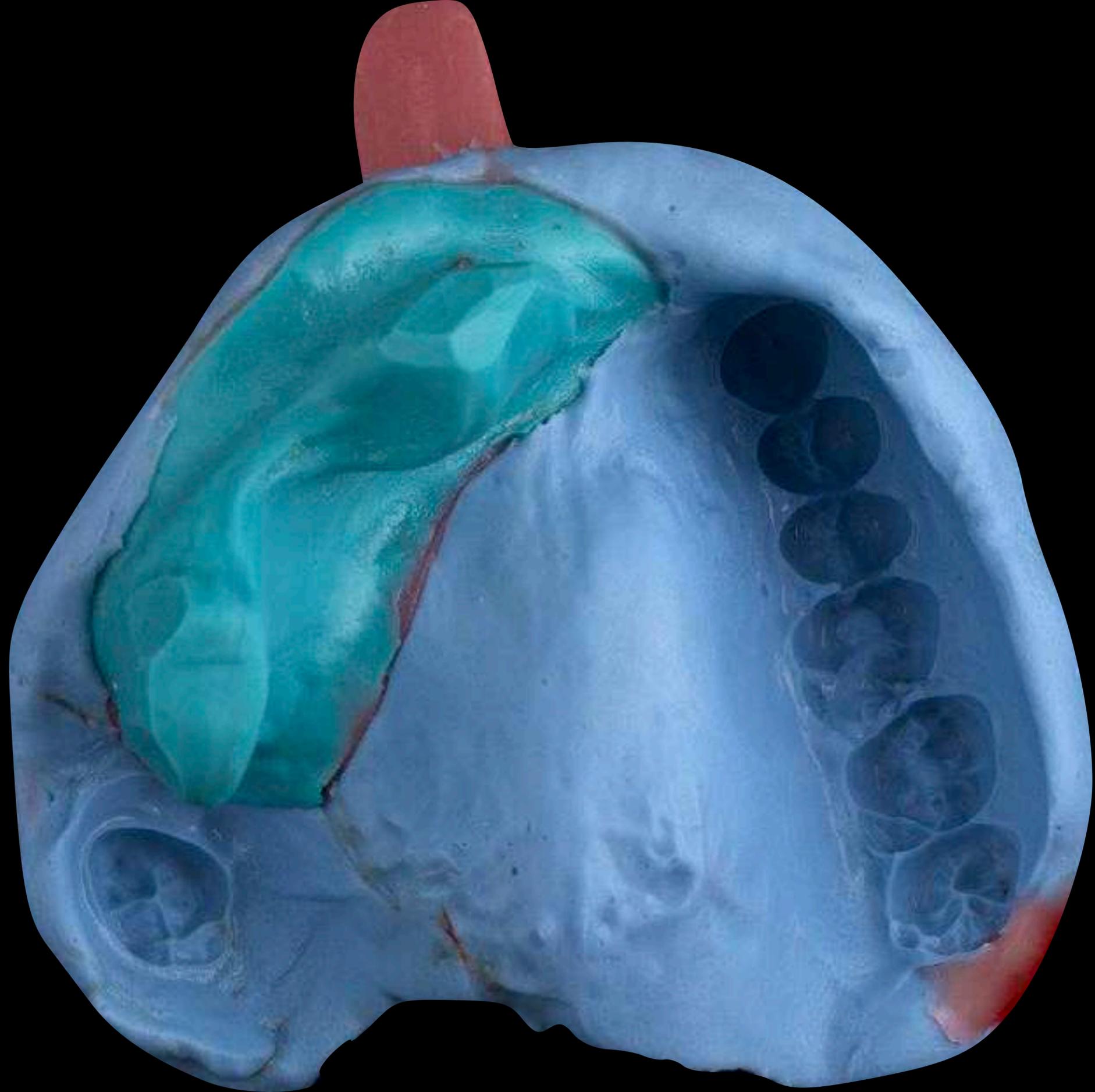






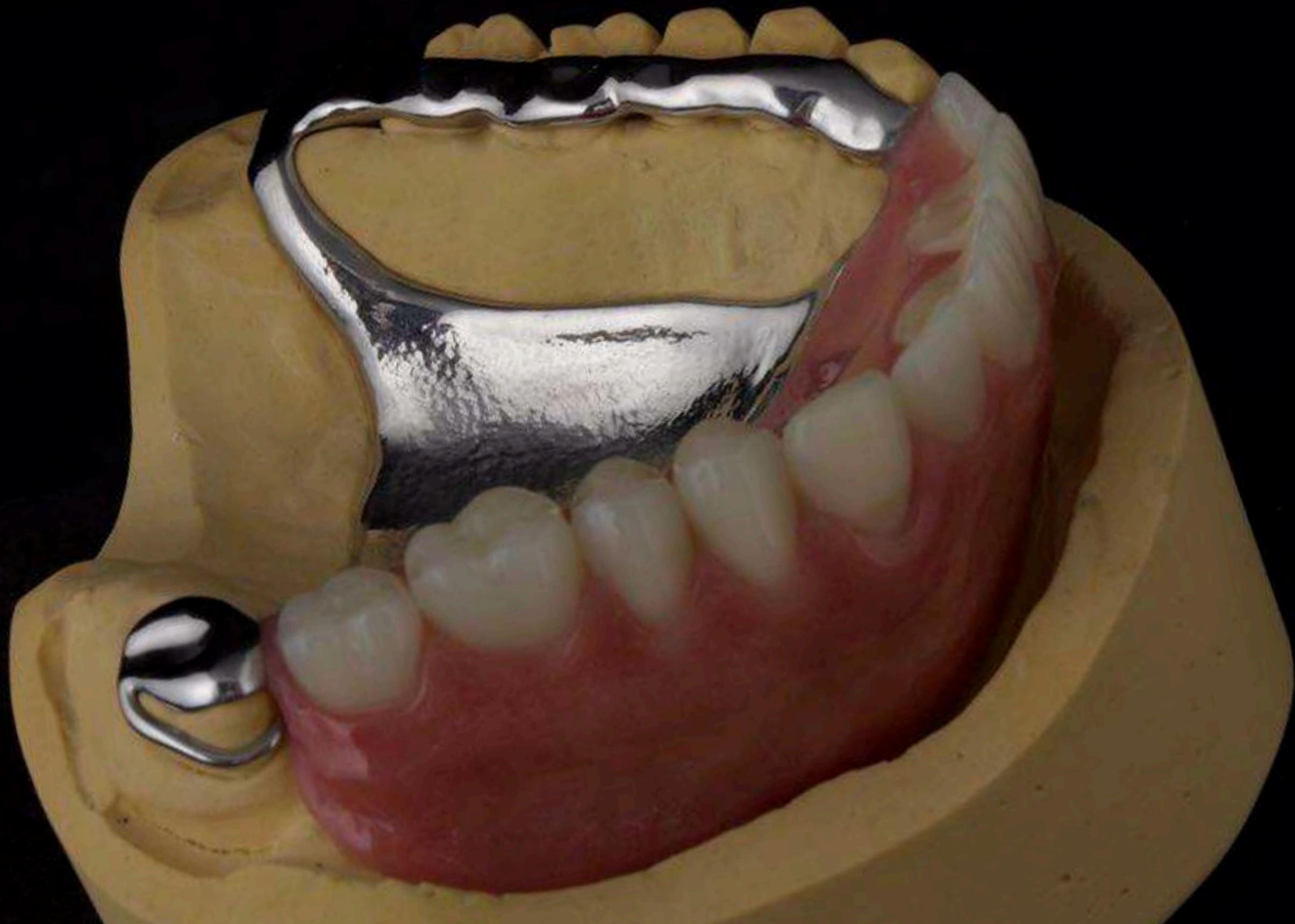


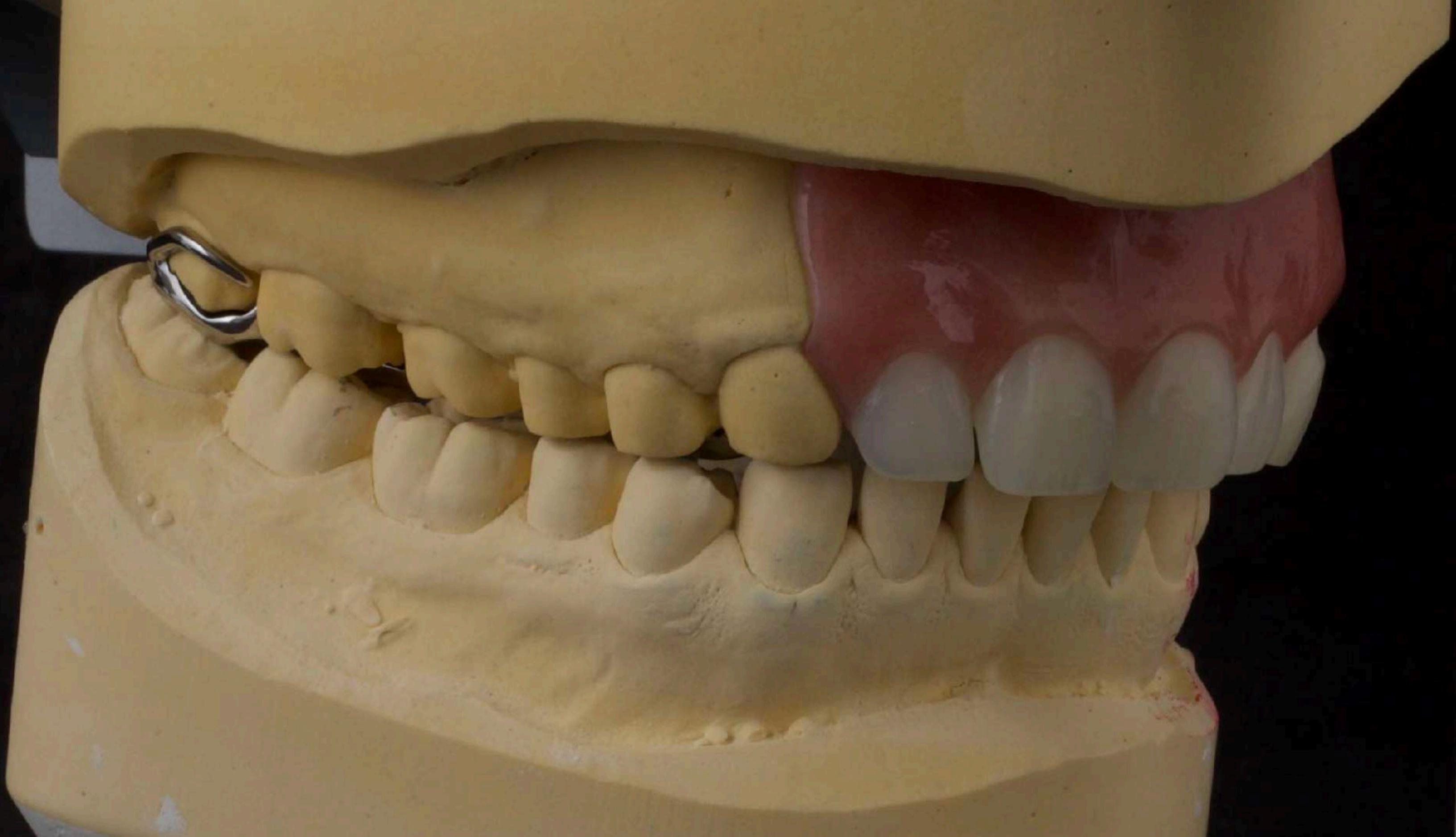


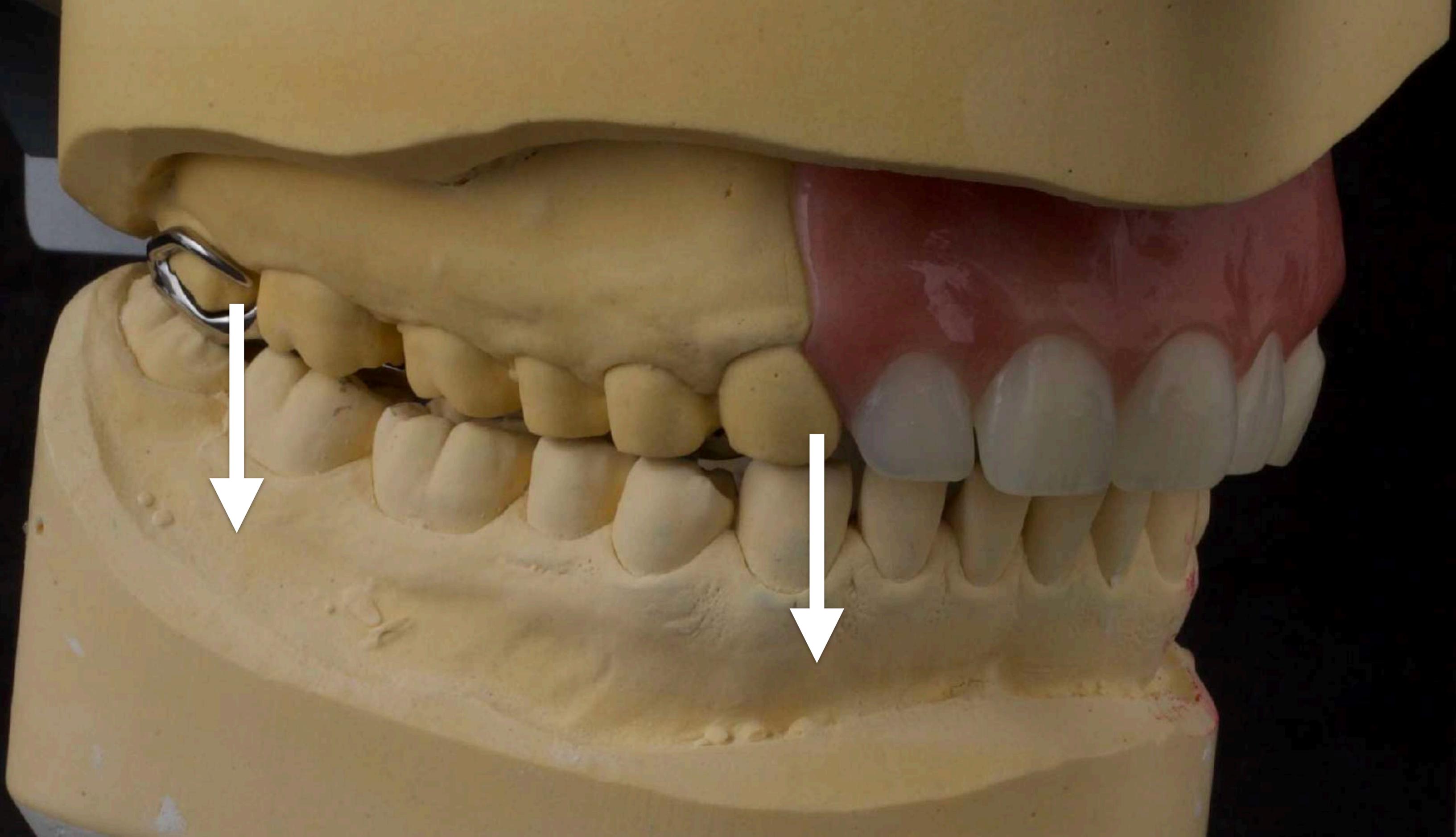








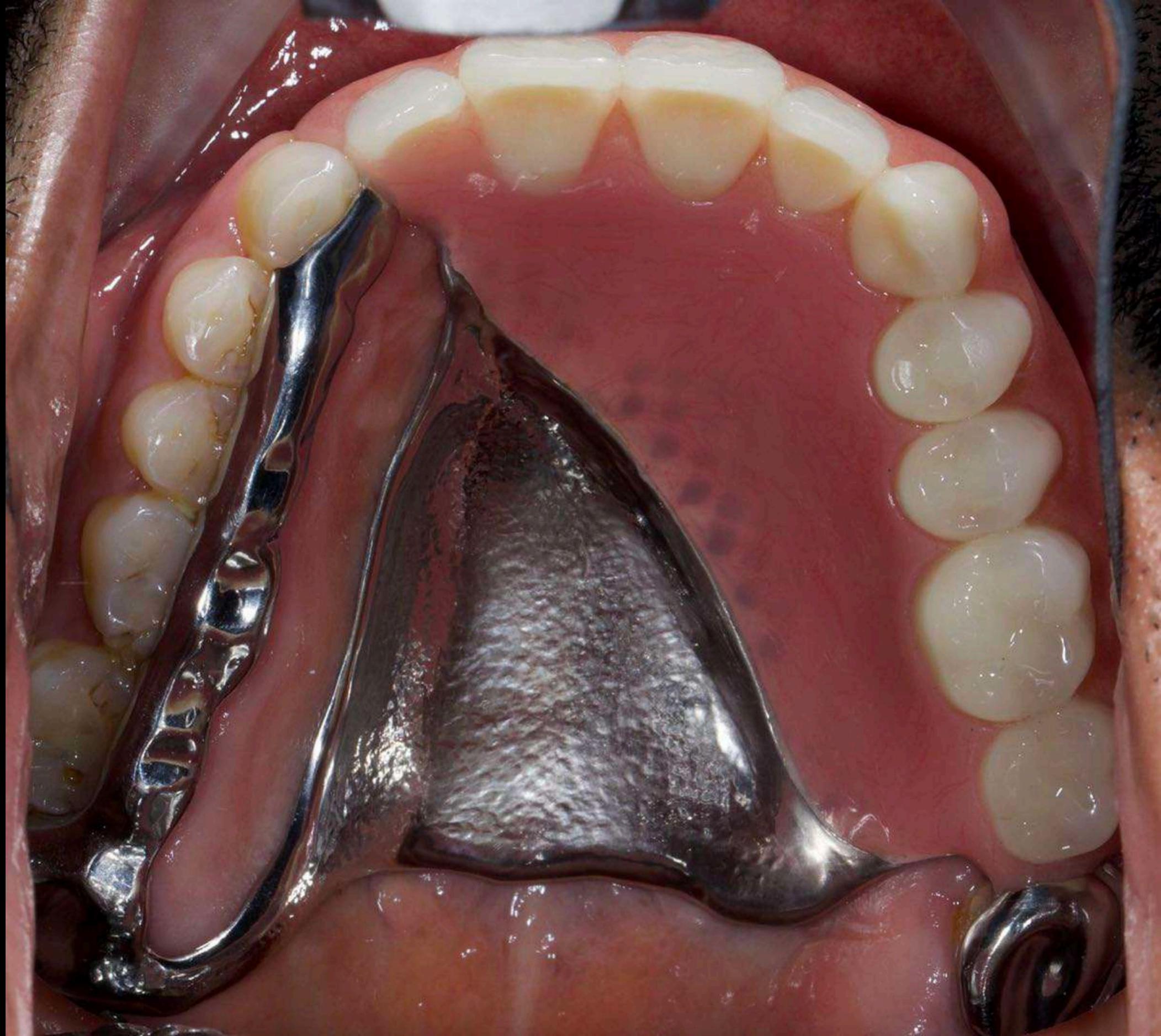






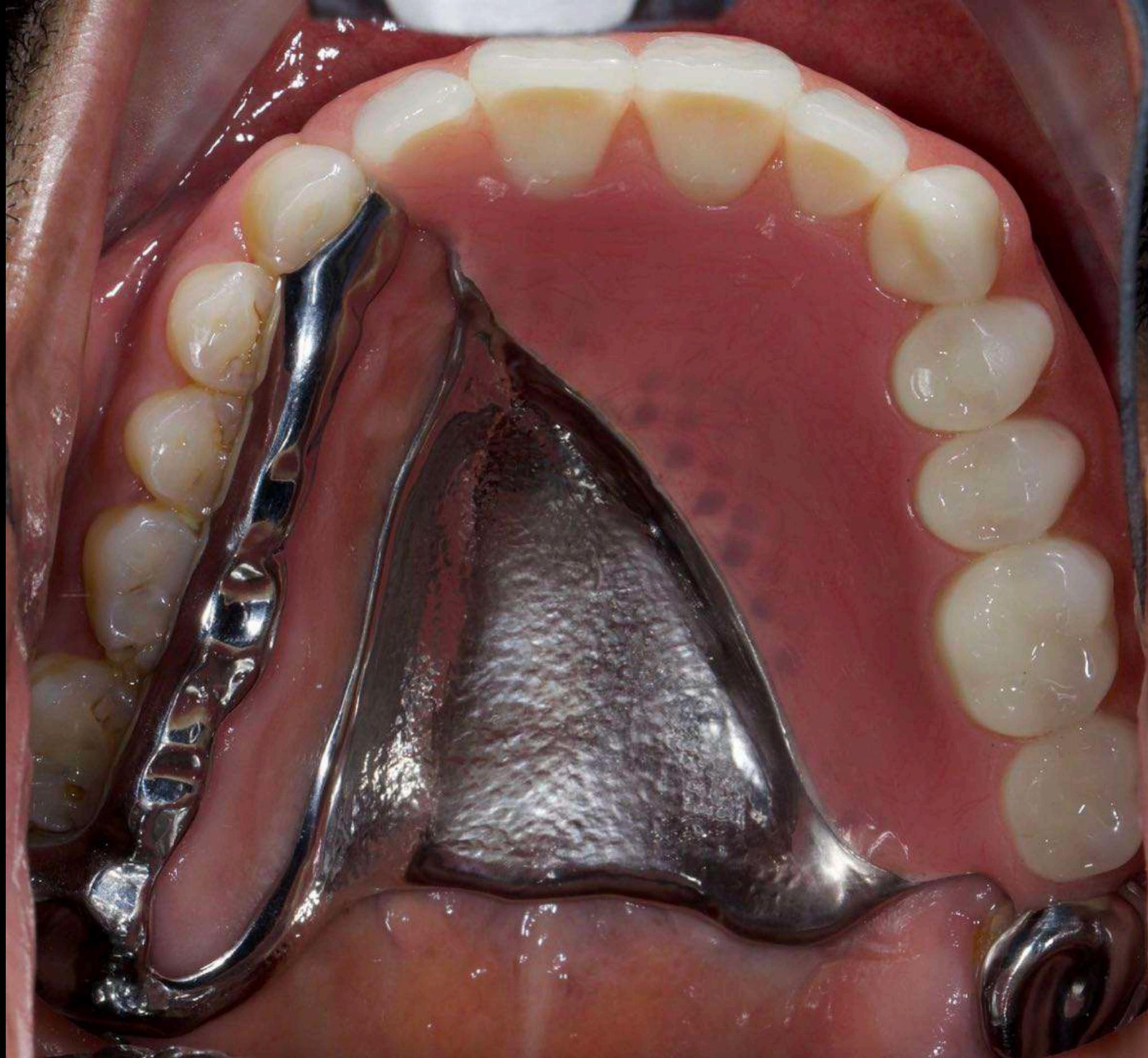






Tooth wear opposing  
CoCr

Alarcon et al  
J Prosthodont 2009

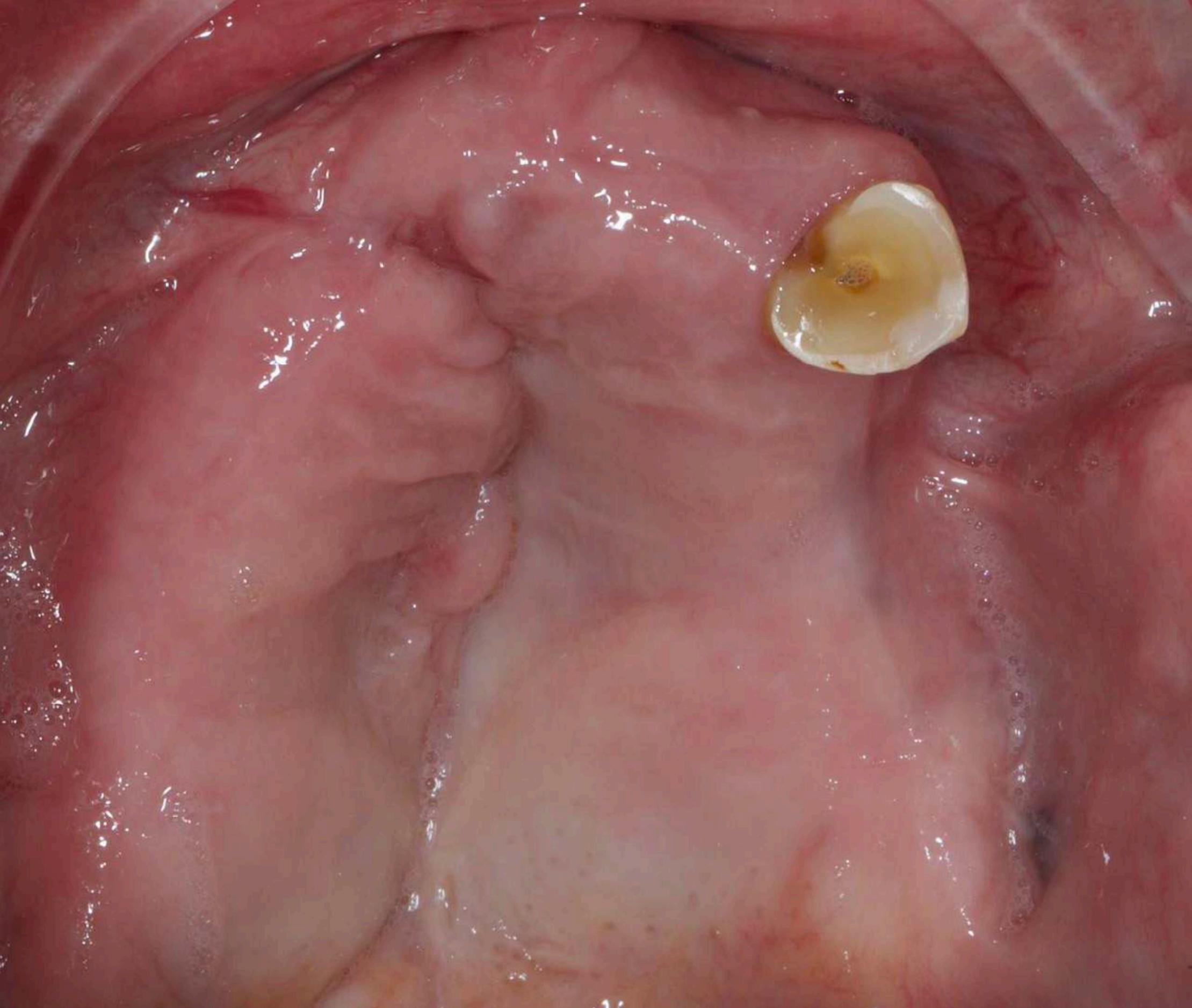








Zephyrine

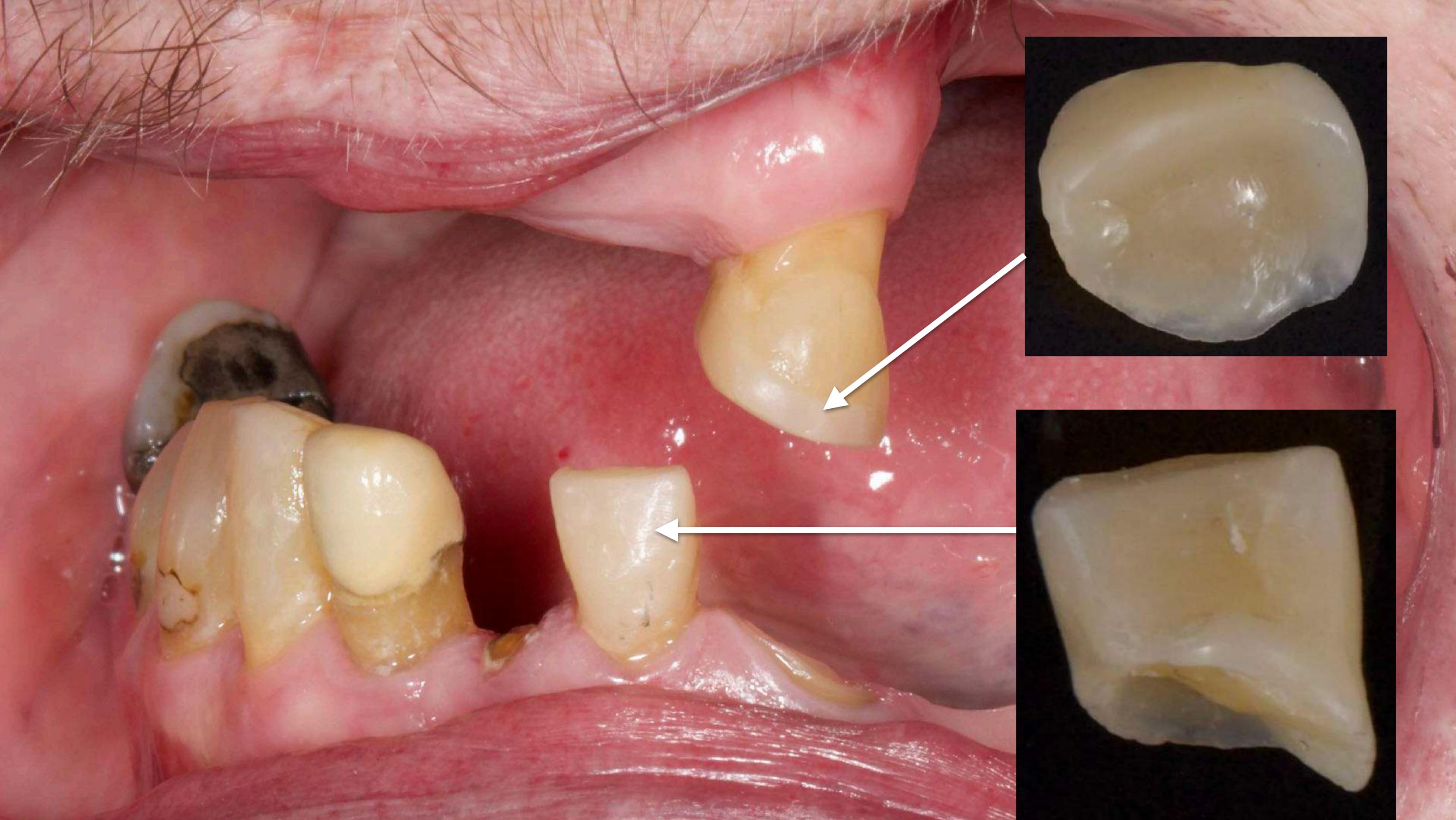




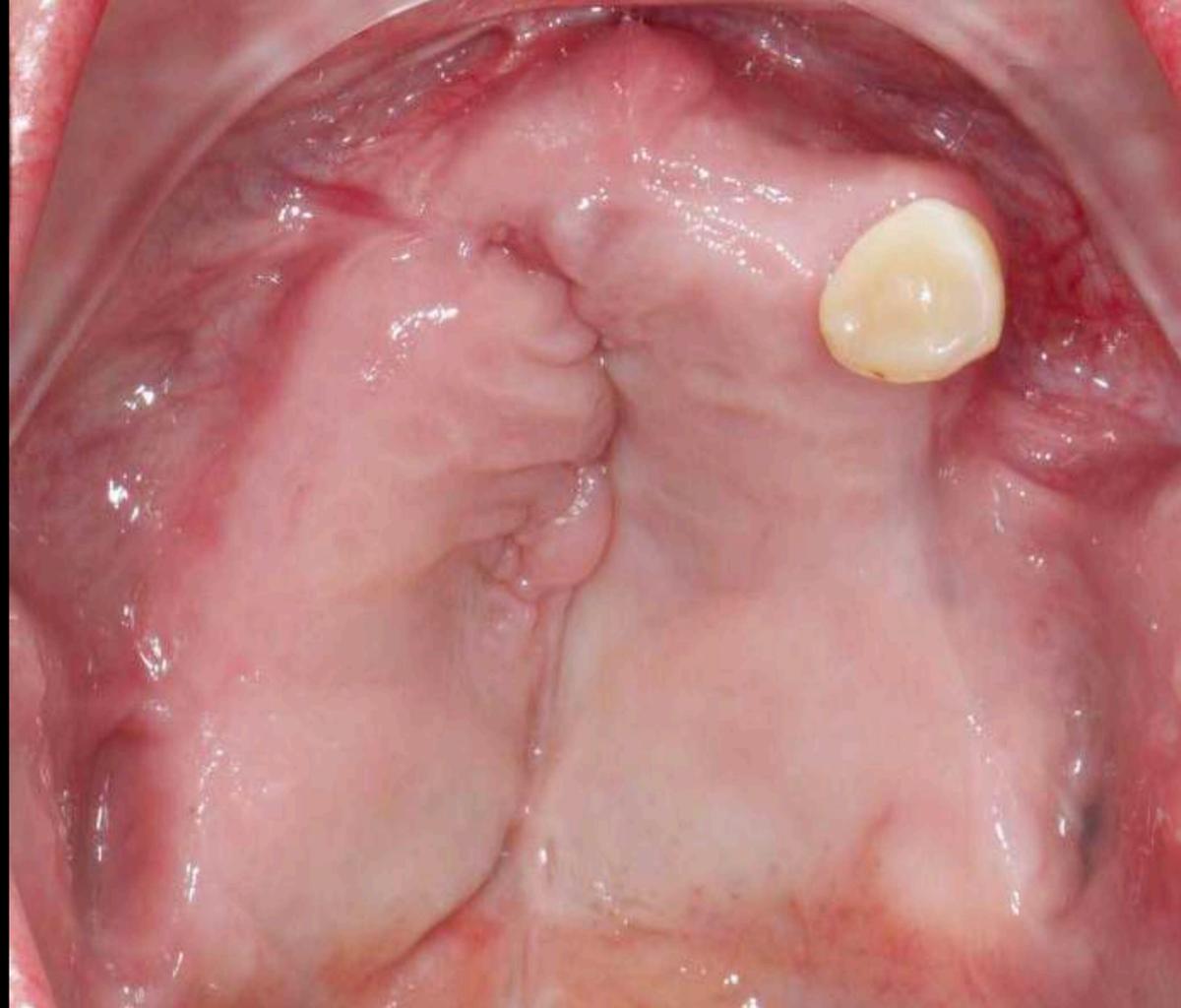








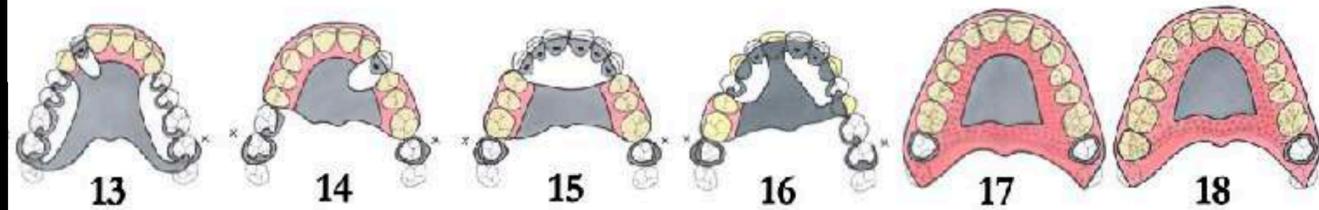
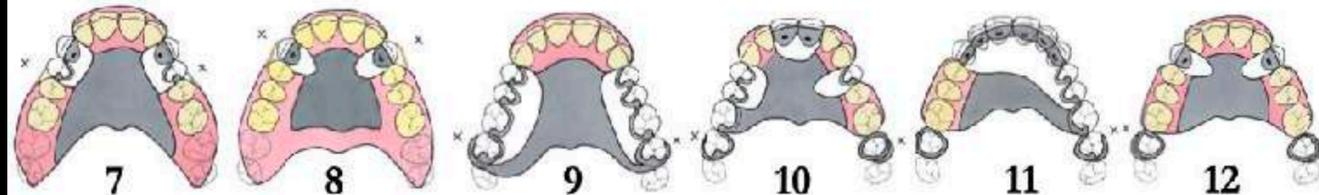
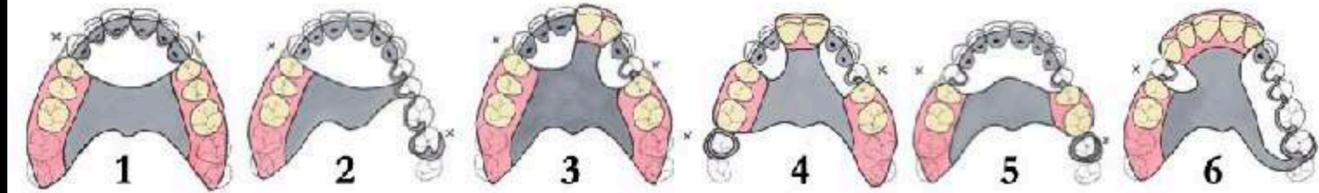




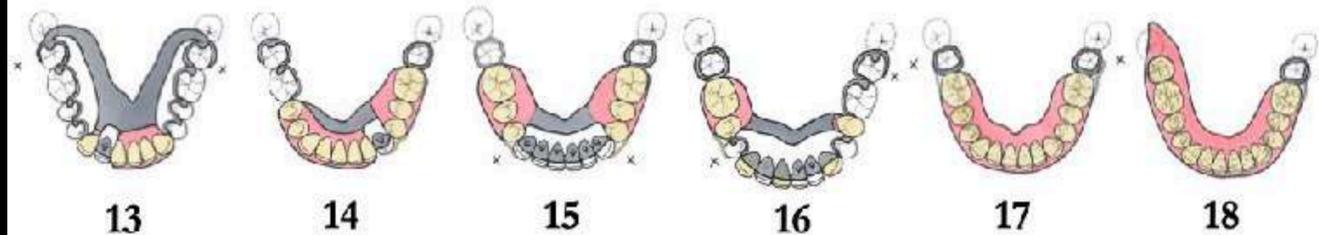
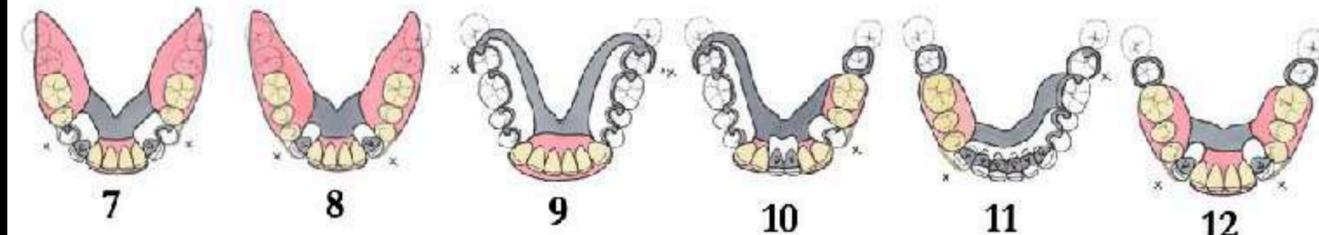
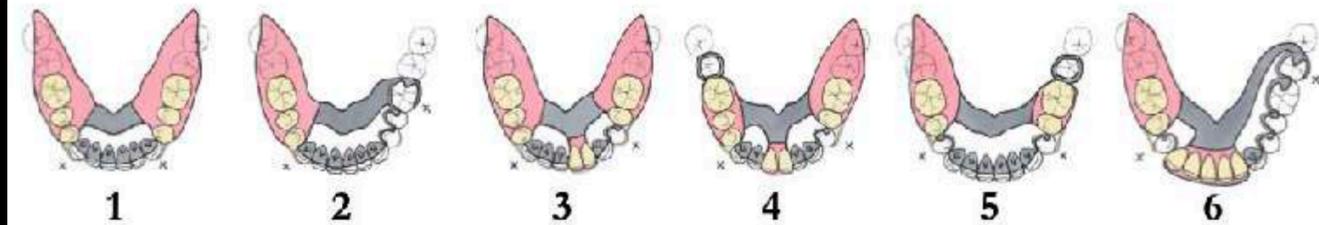
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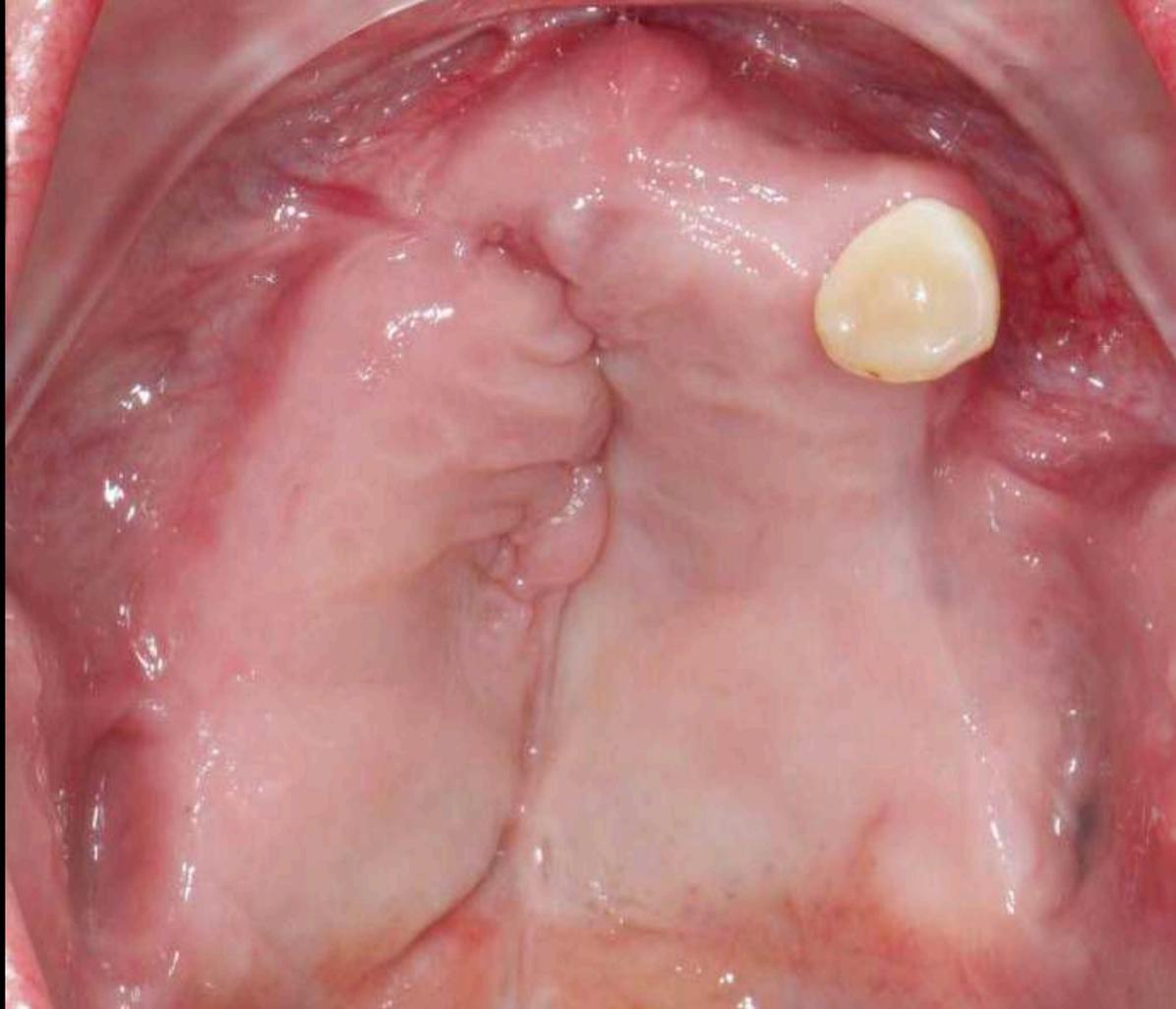
Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **DUBIOUS** PROGNOSIS

Uppers



Lowers

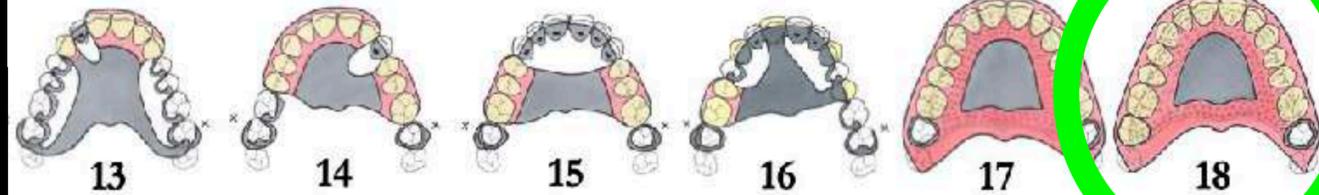
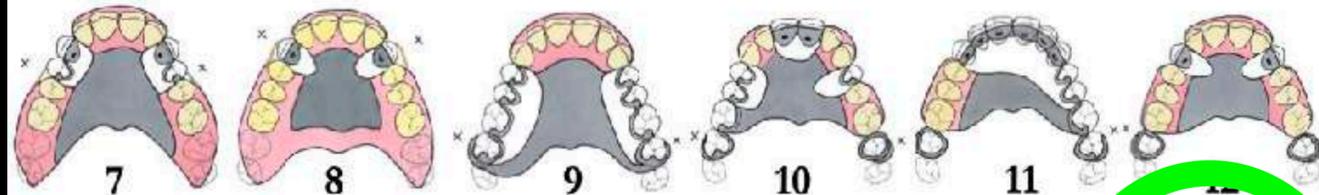
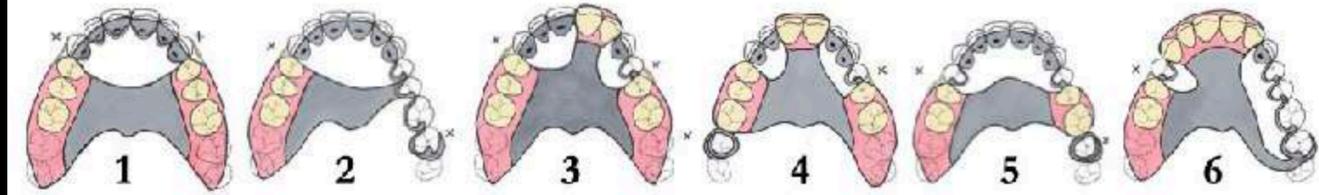




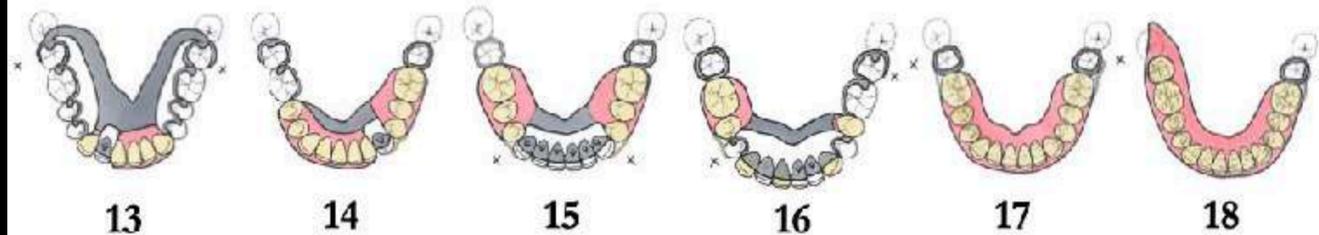
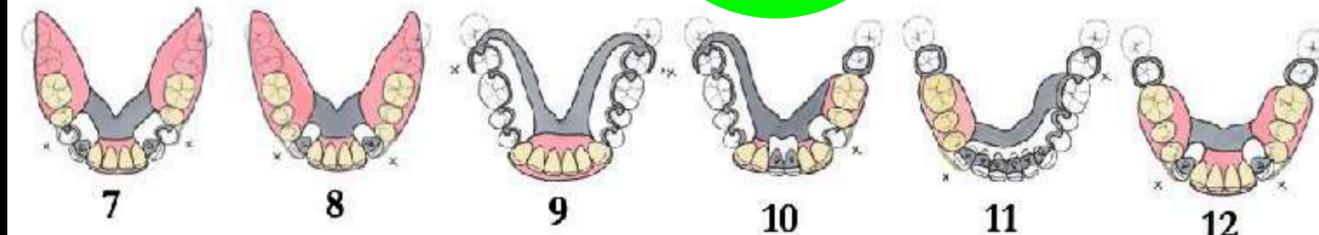
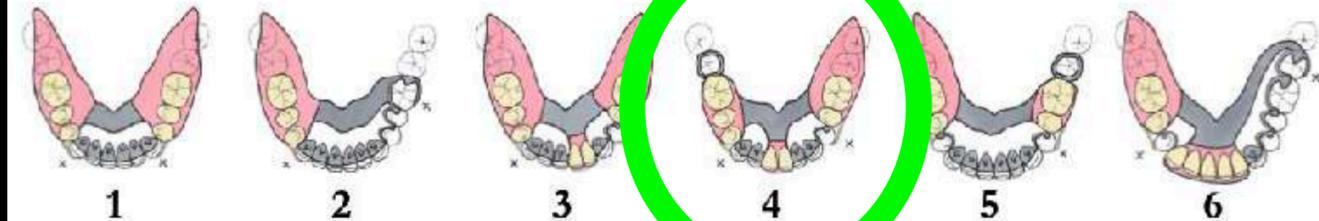
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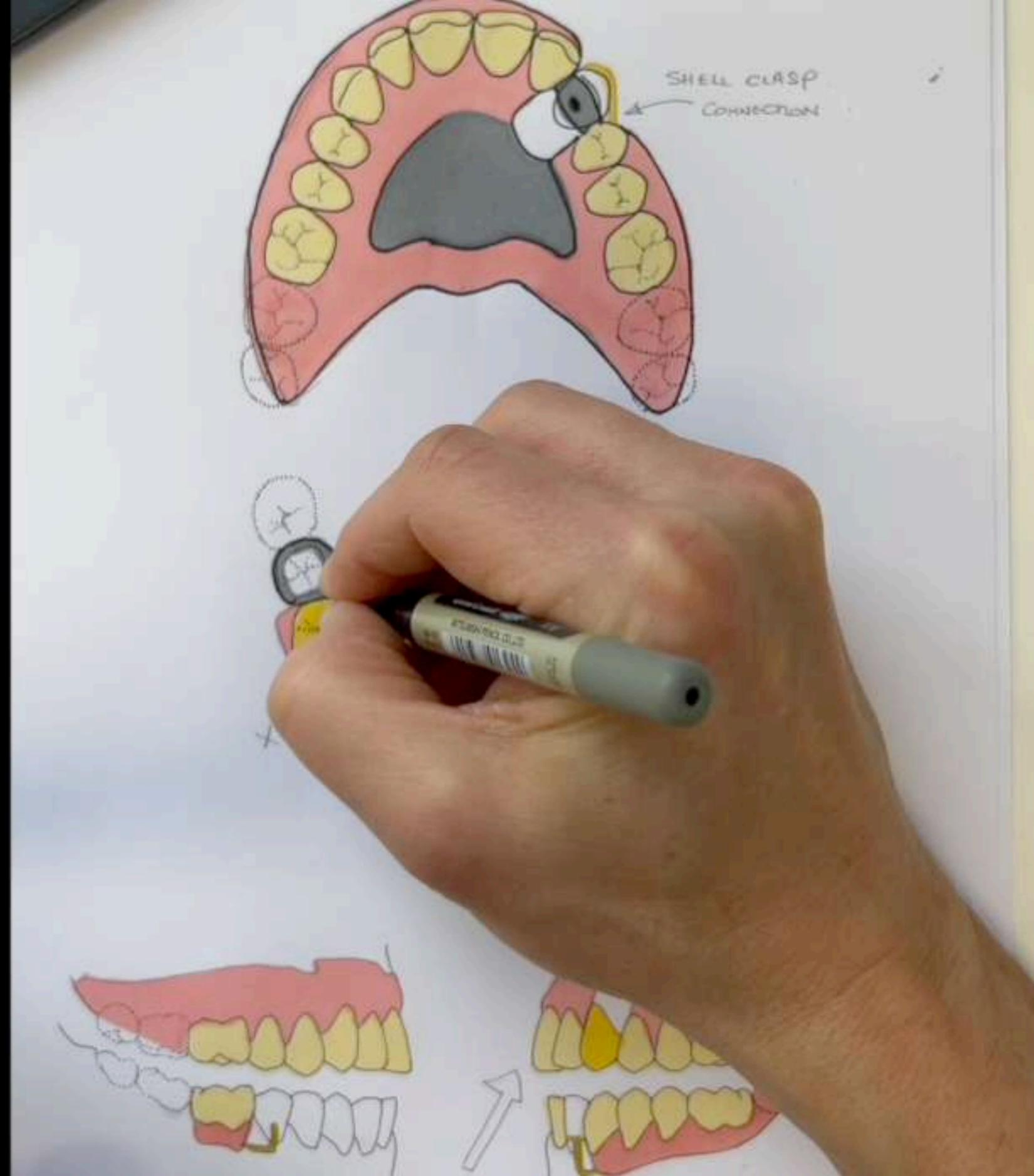
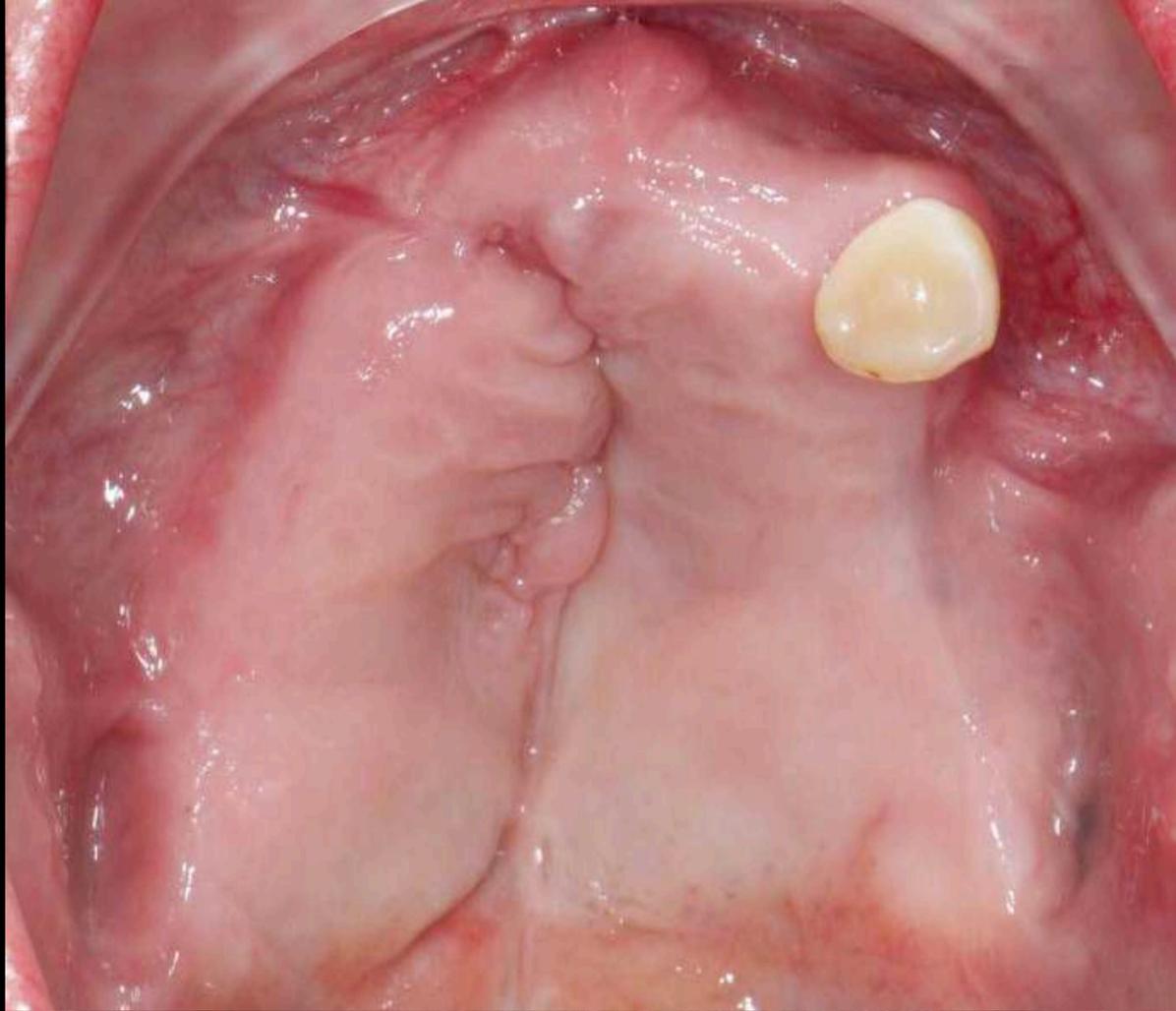
Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **DUBIOUS** PROGNOSIS

Uppers



Lowers





# Shell clasp - John Besford





Shell clasp - John Besford



















PLEASE  
TAKE (HOME) A  
'SILVER LINING'  
STONE



Life changing





Conor

Rupert

Paul

Simon

Bryn

Emily

Helen

David

Finlay

Andrew

Mike

Dominika

Mark

Nick

Steph

John Besford

# Besford Study Club

Charlotte



Conor

Rupert

Paul

Simon

Bryn

Emily

Helen

David

Finlay

Andrew

Mike

Dominika

Mark

Nick

Steph

John Besford

# Call to action

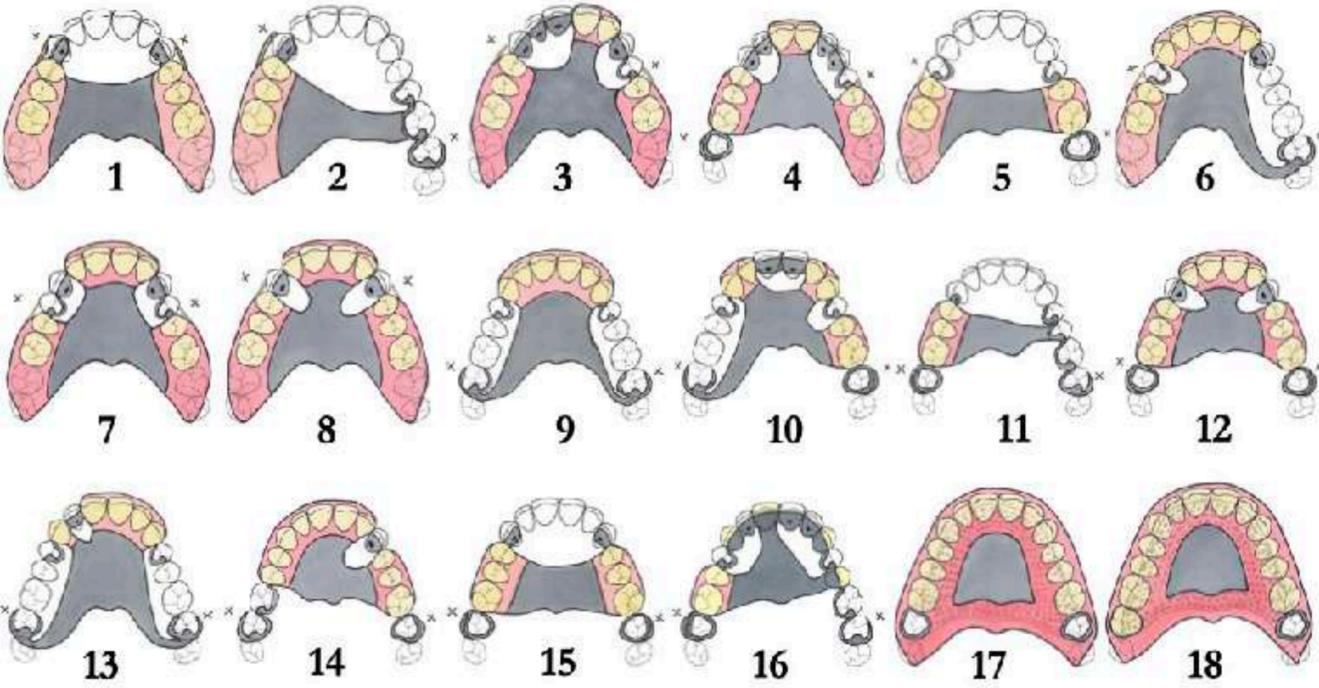
Charlotte

1. Do it

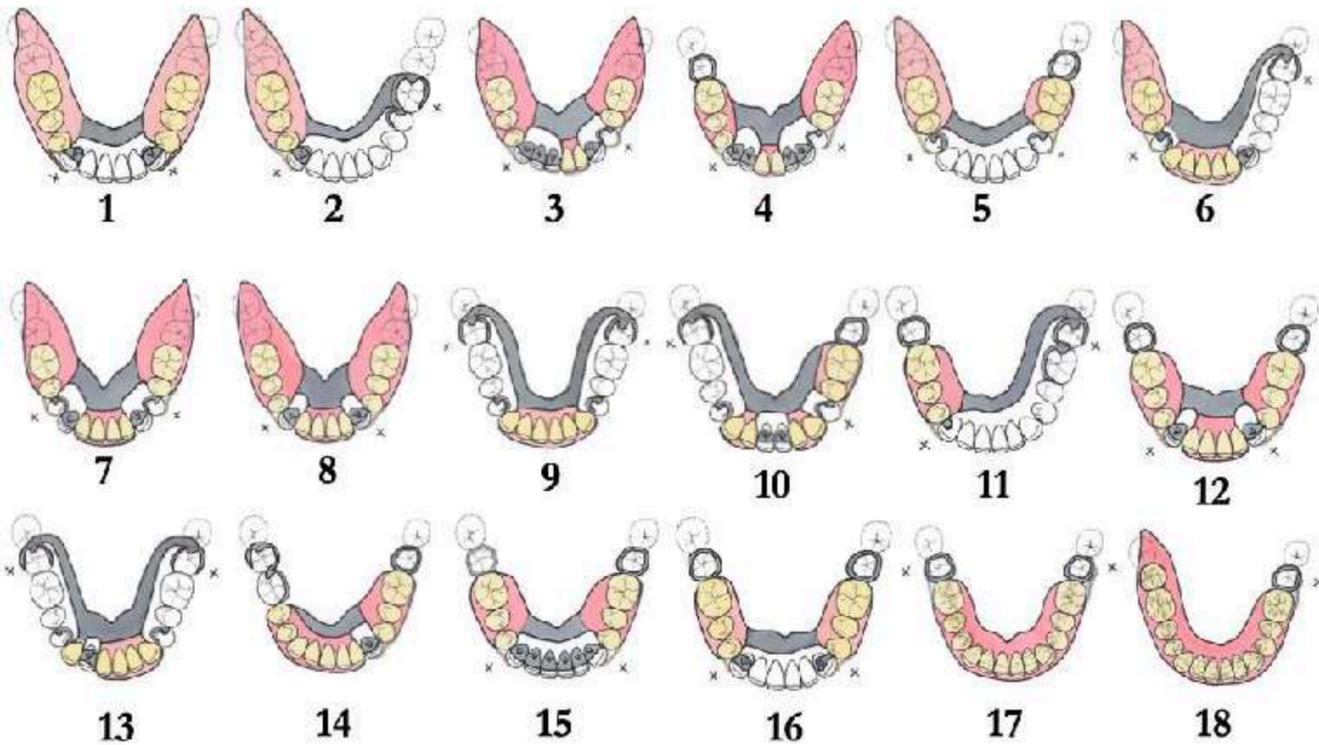


Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **GOOD** PROGNOSIS

Uppers

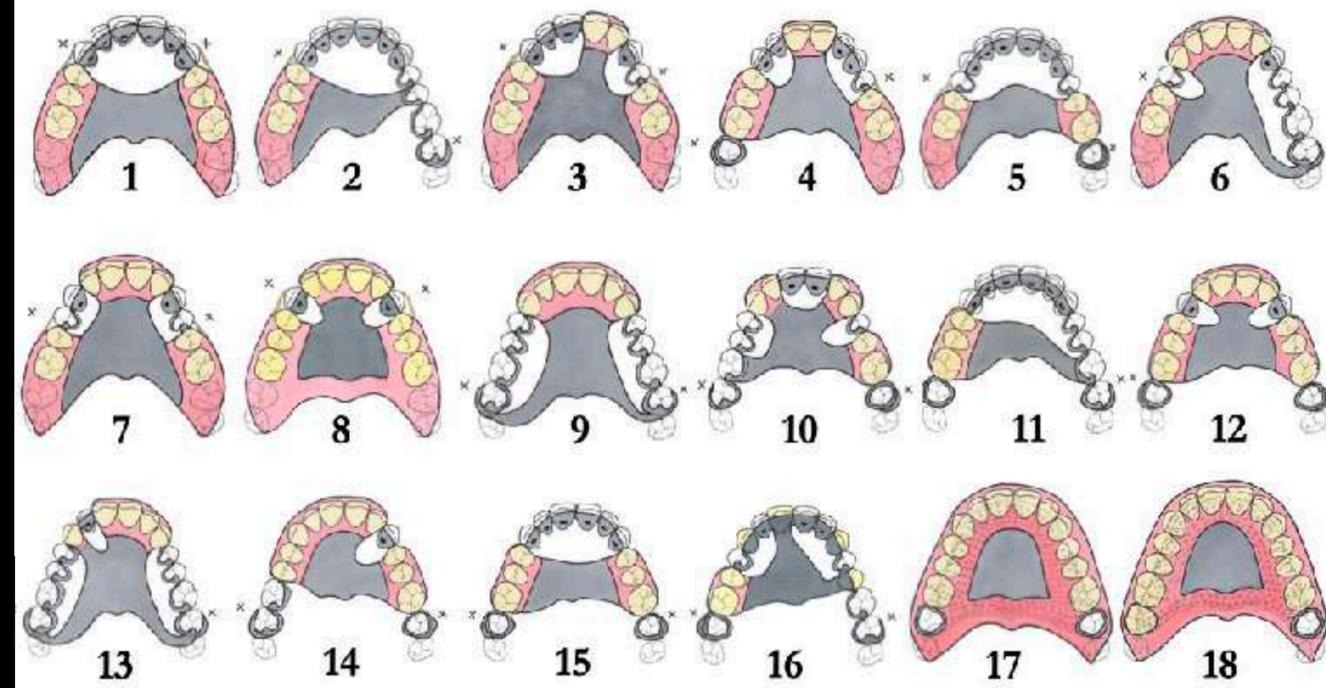


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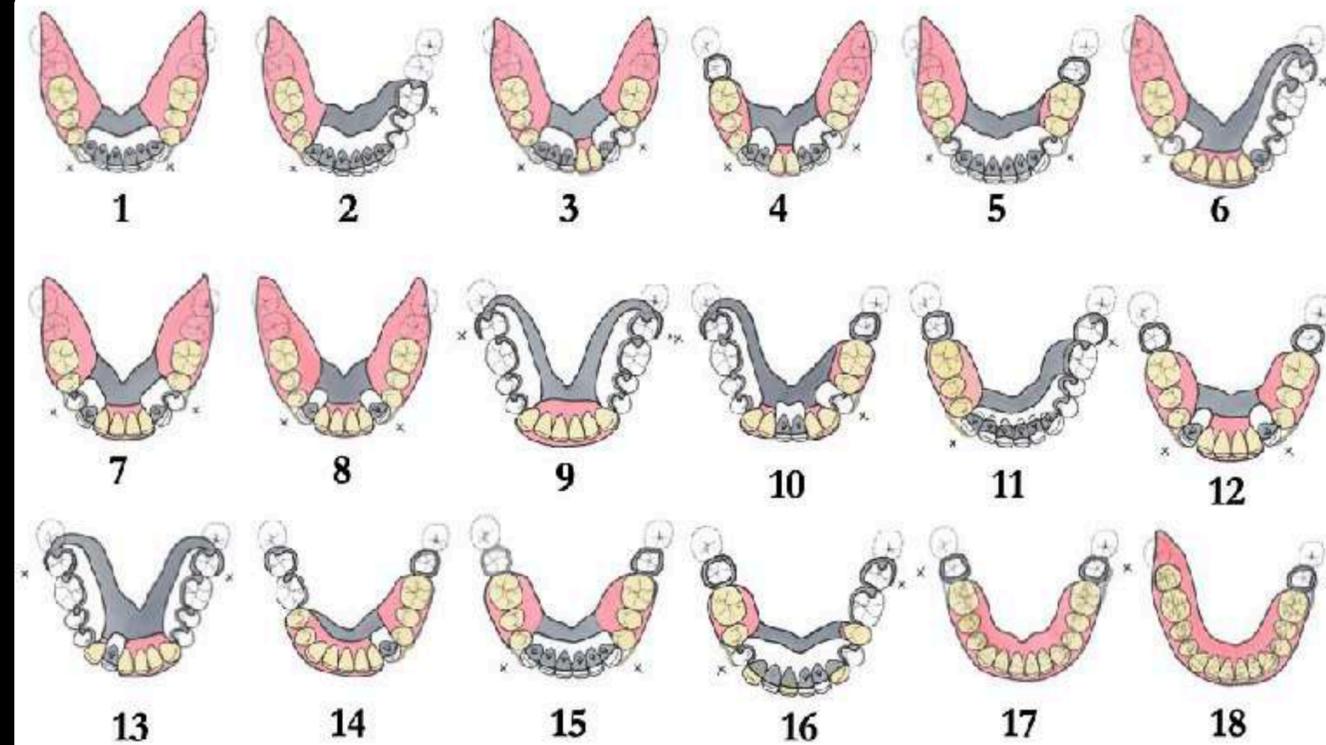


Scandinavian universal designs for **many** patterns of tooth loss  
REMAINING TEETH HAVE **DUBIOUS** PROGNOSIS

Uppers



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1. Do it

2. Randomised Cross over  
Trials



A.F. Sutton<sup>1\*</sup>, H.V. Worthington<sup>1</sup>,  
and J.F. McCord<sup>2</sup>

<sup>1</sup>The School of Dentistry, The University of Manchester, Higher Cambridge Street, Manchester, M15 6FH, UK; and <sup>2</sup>Glasgow Dental Hospital and School, 378 Sauchiehall Street, Glasgow, G2 3JZ, UK; \*corresponding author, finlaysutton@another.com

*J Dent Res* 86(7):651-655, 2007

### ABSTRACT

Complete dentures can be produced with different types of occlusal forms. There is some evidence to suggest that it may be advantageous to provide complete dentures with cusped posterior teeth. The aim of this research was to compare the levels of subject satisfaction with 3 types of posterior occlusal forms for complete dentures, in a randomized cross-over trial design. Forty-five participants were randomly assigned 3 sets of complete dentures with different posterior occlusal forms (zero-degree, anatomic, and lingualized occlusions). Subjective data were collected according to visual analogue scales after 8 weeks of denture-wearing. Statistical analysis consisted of repeated-measures analysis of variance, followed by paired *t* tests. Lingualized and anatomic occlusal forms were perceived to be significantly superior in terms of chewing ability, when compared with zero-degree posterior occlusal surfaces.

**KEY WORDS:** randomized controlled trial, complete dentures, occlusal forms, patient satisfaction.

## RCT Comparing Posterior Occlusal Forms for Complete Dentures

### INTRODUCTION

The stability and retention of complete dentures can be compromised by displacing forces, which are created during mastication, swallowing, and parafunctional habits. Throughout these functions, the maxillary and mandibular teeth come into contact, and unfavorable displacing forces can overwhelm the retention and stability of the dentures, creating discomfort from trauma to the underlying mucosa.

If the fitting and polished surfaces are ideal, it is assumed that the form of the occlusal surfaces and the nature of their contacts become critical for successful denture function. The search for the most appropriate occlusal form and tooth arrangement for complete denture occlusion has been ongoing for almost two centuries (Lang, 2004).

Before this research was conducted, a Cochrane review was performed to determine if there had been previous randomized controlled trials comparing the efficacy of different occlusal schemes for complete dentures (Sutton *et al.*, 2005). The objective of the systematic review was to identify a superior occlusal scheme for complete dentures in terms of the patient satisfaction. Of the 1076 papers reviewed, one paper satisfied the inclusion criteria for the review (Clough *et al.*, 1983). The trial suggested that participants preferred prosthetic teeth with cusps as opposed to cusplless ones (zero degree), because of their improved chewing performance. However, this study was judged to be at high risk of bias, owing to the provision of insufficient information regarding the method of randomization and allocation concealment. In addition, the method for assessing participant satisfaction was unclear. This paper was published in 1983, when validated indices were in their infancy. With the advent of implant-stabilized prostheses and an emphasis on demonstrating value for money in medical and dental health care, there are now numerous indices available (Feine *et al.*, 2002).

The purpose of this research was to conduct a randomized cross-over trial to test the null hypothesis that there is no variation in the level of people's satisfaction for 3 different types of posterior occlusal forms for complete dentures.

### MATERIALS & METHODS

A medical statistician (HVW) was consulted regarding protocol design prior to the study. A randomized cross-over design was chosen, since this method of assessment has been used successfully in evaluating individual preferences for different types of prostheses in previous high-quality trials (de Grandmont *et al.*, 1994; Feine *et al.*, 1994; Tang *et al.*, 1997; Awad and Feine, 1998; de Albuquerque Junior *et al.*, 2000; Awad *et al.*, 2003).

This study used 50 edentulous individuals taken from the waiting list of the University Dental Hospital of Manchester, UK, and requiring the provision of replacement complete dentures. The protocol of the study was approved by the City of Manchester local research ethics committee (study number 01/454).

A.F. Sutton<sup>1\*</sup>, H.V. Worthington<sup>1</sup>,  
and J.F. McCord<sup>2</sup>

<sup>1</sup>The School of Dentistry, The University of Manchester, Higher Cambridge Street, Manchester, M15 6FH, UK, and <sup>2</sup>Glasgow Dental Hospital and School, 378 Sauchiehall Street, Glasgow, G2 3JZ, UK; \*corresponding author, finlaysutton@another.com

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#### ABSTRACT

Complete dentures can be produced with different types of occlusal forms. There is some evidence to suggest that it may be advantageous to provide complete dentures with cusped posterior teeth. The aim of this research was to compare the levels of subject satisfaction with 3 types of posterior occlusal forms for complete dentures, in a randomized cross-over trial design. Forty-five participants were randomly assigned 3 sets of complete dentures with different posterior occlusal forms (zero-degree, anatomic, and lingualized occlusions). Subjective data were collected using a validated linguistic scale after 2 weeks of use. Statistical analysis consisted of a 3-way analysis of variance of various parameters by paired *t* tests. Lingualized and anatomic occlusal forms were perceived to be significantly superior in terms of chewing ability, when compared with zero-degree posterior occlusal surfaces.

**KEY WORDS:** randomized controlled trial, complete dentures, occlusal forms, patient satisfaction.

## RCT Comparing Posterior Occlusal Forms for Complete Dentures

#### INTRODUCTION

The stability and retention of complete dentures can be compromised by displacing forces, which are created during mastication, swallowing, and parafunctional habits. Throughout these functions, the maxillary and mandibular teeth come into contact, and unfavorable displacing forces can overwhelm the retention and stability of the dentures, creating discomfort from trauma to the underlying mucosa.

If the fitting and polished surfaces are ideal, it is assumed that the form of the occlusal surfaces and the nature of their contacts become critical for successful denture function. The search for the most appropriate occlusal form and tooth arrangement for complete denture occlusion has been ongoing for almost two centuries (Lang, 2004).

Before this research was conducted, a Cochrane review was performed to assess the evidence for a superior occlusal scheme for complete dentures in terms of patient satisfaction. Of the 1076 papers reviewed, one paper satisfied the inclusion criteria for the review (Clough *et al.*, 1983). The trial suggested that participants preferred prosthetic teeth with cusps as opposed to cusplless ones (zero degree), because of their improved chewing performance. However, this study was judged to be at high risk of bias, owing to the provision of insufficient information regarding the method of randomization and allocation concealment. In addition, the method for assessing participant satisfaction was unclear. This paper was published in 1983, when validated indices were in their infancy. With the advent of implant-stabilized prostheses and an emphasis on demonstrating value for money in medical and dental health care, there are now numerous indices available (Feine *et al.*, 2002).

The purpose of this research was to conduct a randomized cross-over trial to test the null hypothesis that there is no variation in the level of people's satisfaction for 3 different types of posterior occlusal forms for complete dentures.

#### MATERIALS & METHODS

A medical statistician (HVW) was consulted regarding protocol design prior to the study. A randomized cross-over design was chosen, since this method of assessment has been used successfully in evaluating individual preferences for different types of prostheses in previous high-quality trials (de Grandmont *et al.*, 1994; Feine *et al.*, 1994; Tang *et al.*, 1997; Awad and Feine, 1998; de Albuquerque Junior *et al.*, 2000; Awad *et al.*, 2003).

This study used 50 edentulous individuals taken from the waiting list of the University Dental Hospital of Manchester, UK, and requiring the provision of replacement complete dentures. The protocol of the study was approved by the City of Manchester local research ethics committee (study number 01/454).

1. Do it

2. Randomised Cross over  
Trials

3. Teach it



Thank you

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