

RELINING AND REBASING

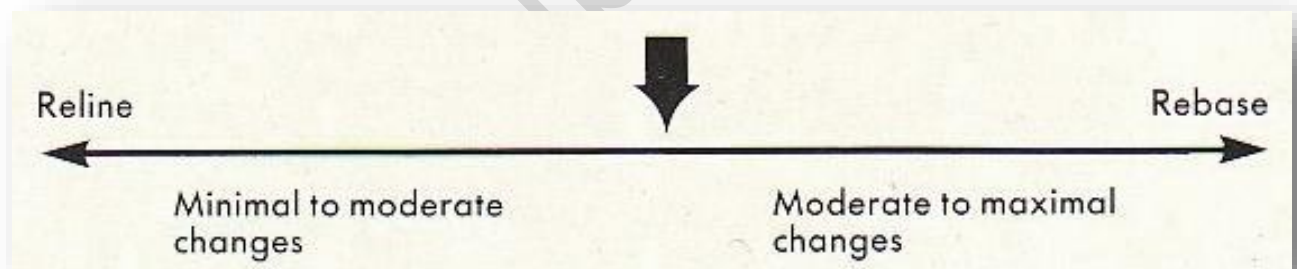
Relining: The process used to resurface the tissue side of a denture with new material layer, thus producing an accurate adaptation to the denture foundation area.

Rebasing: The laboratory process of replacing the entire denture base material on an existing prosthesis.

The indications for relining or Rebasing:

Observed clinical changes includes:

1. Loss of retention and stability.
2. Loss of vertical dimension of occlusion.
3. Loss of support for facial tissues.
4. Horizontal shift of dentures, incorrect occlusal relationship.
5. Reorientation of occlusal plane.



Contraindication of relining and rebasing:

1. When there is increased vertical dimension (insufficient inter-arch space).
2. Poor esthetic and incorrect position of teeth.
3. Unsatisfactory jaw relationship in the denture.
4. Excessive resorption of residual ridge.
5. Sever osseous undercuts.
6. Dentures causing major speech problems.
7. TMJ problems.

The impression techniques for relining and rebasing could be:

1. Static method.
 - a. Open mouth technique.
 - b. Closed mouth technique.
2. Functional methods.
3. Chair side technique.

Laboratory procedures for relining:

1. Beading and boxing of the impression ,then pouring the boxed impression with stone material.
2. The denture and the cast are not separated, but any excess impression on the teeth or facial surfaces of the base is removed, then the denture flaked in the usual manner.
3. Wax elimination by heating in hot water for 5 minutes, then separated and all impression materials cleaned from the cast and the denture base.
4. Painting the cast with a separating medium.
5. Paint the surface of the denture with cotton pellet moistened with monomer.
6. Mix the acrylic resin and place it in the flask.
7. Curing for 9 hours at 165 F.
8. The denture deflaked and the cast removed from the denture then polish the denture and remount the cast.
9. The maxillary and mandibular dentures remounted on articulator after correction of occlusion, the relined denture is ready to be inserted in the patient mouth.

Rebasing:

Rebasing procedure is the same as those for relining with some differences:

1. Impression made and a cast poured in the denture as in relining procedure.
2. The denture with cast mounted on an instrument as Hooper duplicator that maintain the relationship of teeth to the cast.
3. The old denture destroyed and removed.

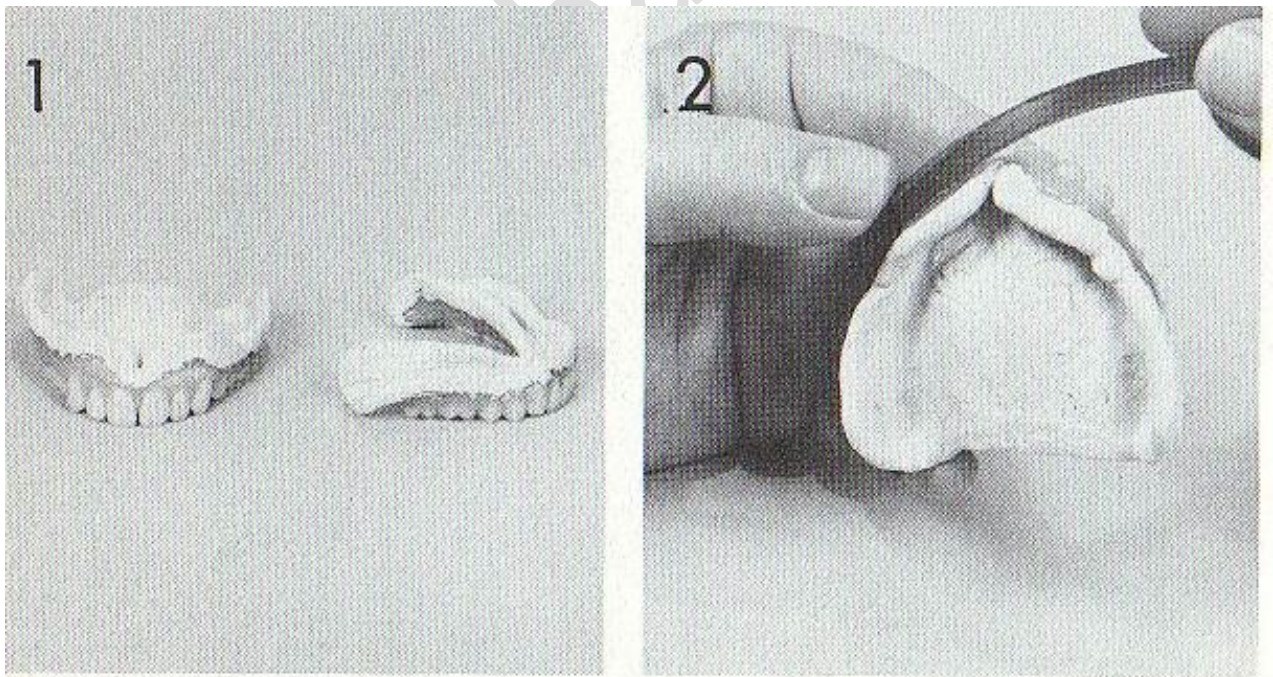
4. The original teeth rewaxed in their previous positions on the cast.
5. The denture then processed in the laboratory as for relining.

Note: A Hanau articulator with a remounting jig make a satisfactory instrument for rebasing instead of Hooper duplicator.

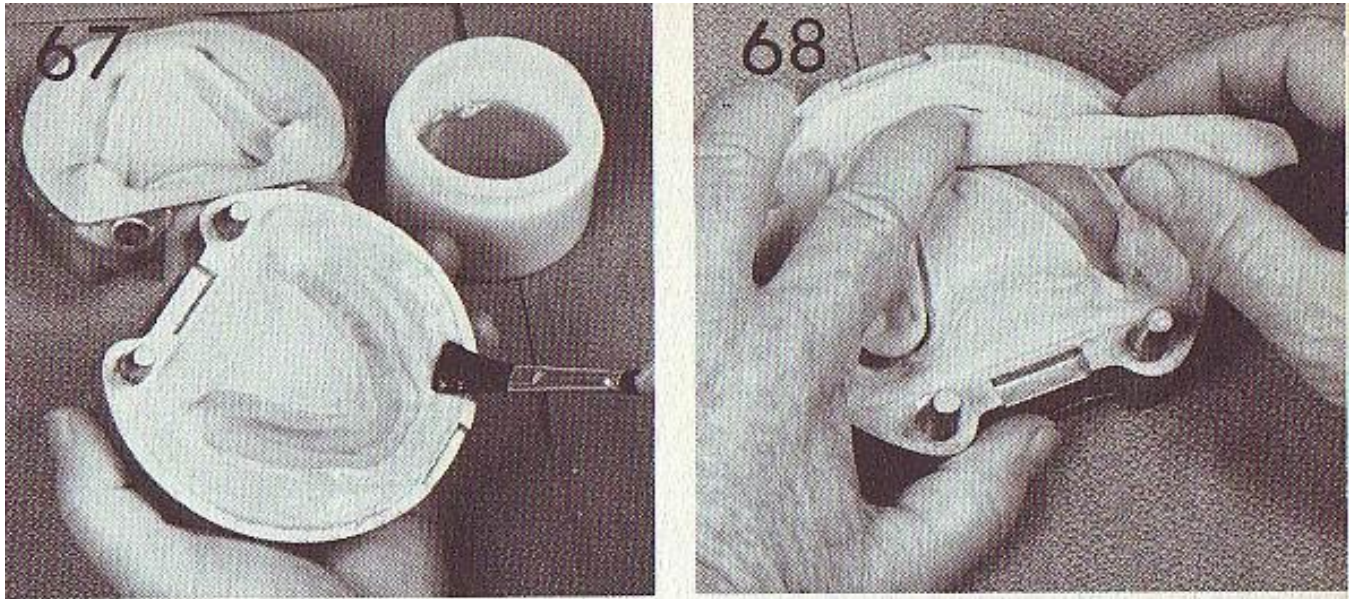
The chair-side reline technique:

Several attempts have been made to produce an acrylic or other plastic materials that can be added to the denture and allowed to set in the patient mouth, but these have been failed for several reasons:

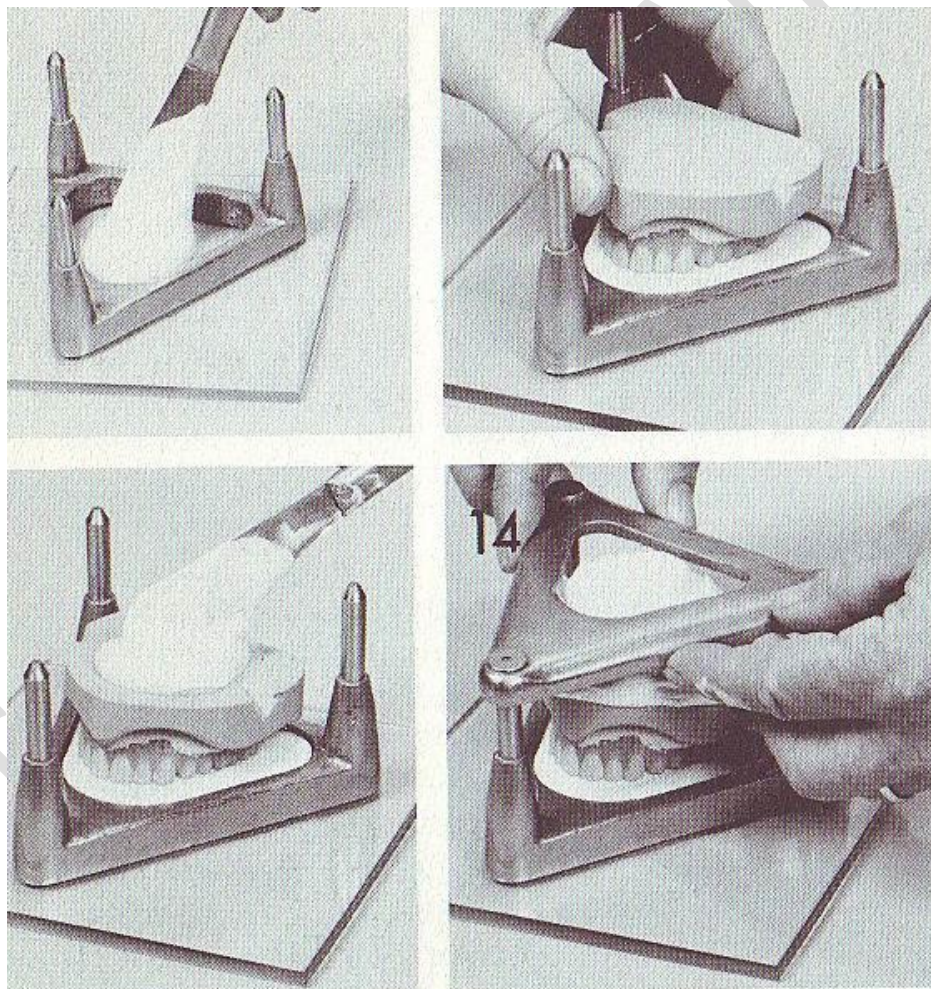
1. The material has often produced a chemical burn on the mucosa (exothermic reaction).
2. Color stability is very low, and bad odor due to porosity of the material since no flasking procedure is used.
3. Liability for errors and wrong positioning of the denture is great with difficulty in correction and removal of set material to start again.
4. Improvement in the denture requirement is very little and low.



Beading of the relined denture

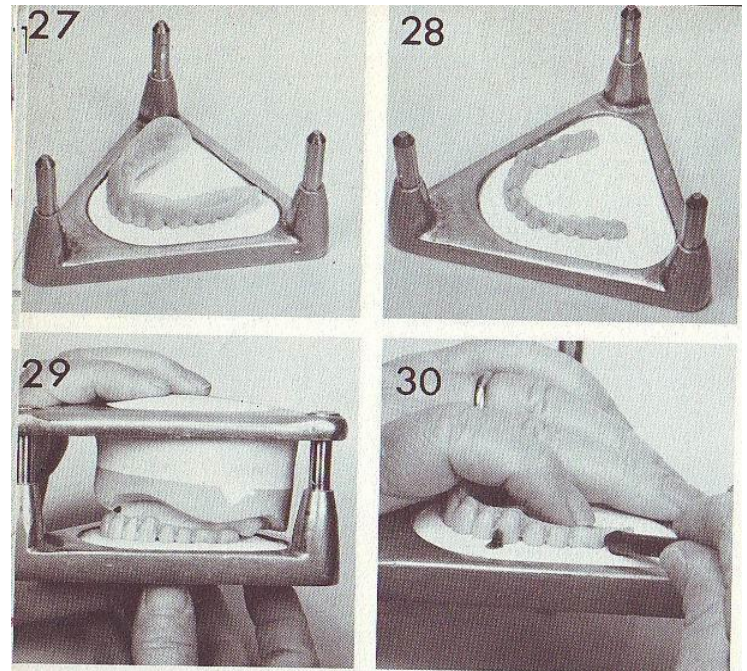


Acrylic dough added to the relined denture



Rebasing: Hooper duplicator used to maintain the relationship of teeth to the cast

The original teeth rewaxed in their previous position on the cast



The denture processed in the laboratory in the usual manner

