

SHORT COMMUNICATION

Method of Using an Articulating Paper to Locate the Interferences during an Insertion of Prosthesis

C Tony Thomas¹, Sreeprabha G Mohan², Rajan Sharanya Raj³

ABSTRACT

Removable partial denture insertion is a very challenging procedure even for an experienced clinician. Even after the block out, the denture needs minor adjustments during the insertion. This article explains about an easy method of using an articulating paper for correct identification of interferences. This is very important during prosthesis insertion, and this prevents the unnecessary over trimming of the denture base.

Keywords: Articulating paper, Interferences, Over trimming, Prosthesis insertion.

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INTRODUCTION

Articulating paper is used very often in dentistry. The most common use of articulating paper is for the correction of occlusion in prosthesis.^[1] However, articulating paper can also be used for other purposes in dentistry. One among them is for the location of interferences during an insertion of prosthesis. Correction of interferences is an important step during the insertion of the prosthesis. This helps not only for the correct seating of the prosthesis but also for getting a good proximal contact.

Articulating papers are used to detect high spots. The occlusal contacts marked with a articulating paper varies with the width, thickness and dye type of the articulating paper.^[4] The color coating of many articulating papers consists of waxes, oils, and pigments, a hydrophobic mixture which repels saliva. High spots can be detected easily as dark marks and contact as light

marks. Articulating paper is available in various thickness and forms. Articulating paper comes in strips and horseshoe-shaped sheets (Bausch Articulating Paper Inc., Nashua, NH, USA).^[2,3]

The disadvantages of articulating papers have been that they can be affected by saliva and are thick and have a relatively inflexible base material; all of these factors contribute to greater number of pseudocontact markings.

MATERIALS AND METHODS

Articulating paper is available in different thickness such as 200 μ , 100 μ , and 40 μ . It's better to use a thin flexible paper since chances of pseudomarkings are more when a thick articulating paper is used.^[5] The horseshoe-shaped articulating papers are more convenient because all the interferences are recorded together.

The articulating paper is wet and adapted over the tissue surface of the prosthesis [Figure 1]. The prosthesis along with the articulating paper is tried in the patient mouth [Figure 2]. Then, the prosthesis is taken out and articulating paper is carefully removed and inspected for markings. Interferences are shown as color markings [Figure 3]. It's carefully relived and reinserted. This is repeated until the prosthesis is freely inserted without any interference.

DISCUSSION

Articulating paper is used for recording pressure areas or spots in the mouth. These areas of pressure or



Figure 1: Intaglio surface of RPD with undercut

¹Professor, ^{2,3}Assistant Professor

¹⁻³Department of Prosthodontics, Amrita School of Dentistry, Amrita Vishwa Vidyapeetham, Cochin, Kerala, India

Corresponding Author: Dr. Sreeprabha G Mohan, Department of Prosthodontics, Amrita School of Dentistry, Amrita Vishwa Vidyapeetham, Cochin, Kerala, India. E-mail: shreebcool@gmail.com

interferences appear as marked with the specific color. The articulating paper is commonly used for correction of high points, but they can be also used for other applications also.



Figure 2: Articulating paper adapted to the intaglio surface of RPD

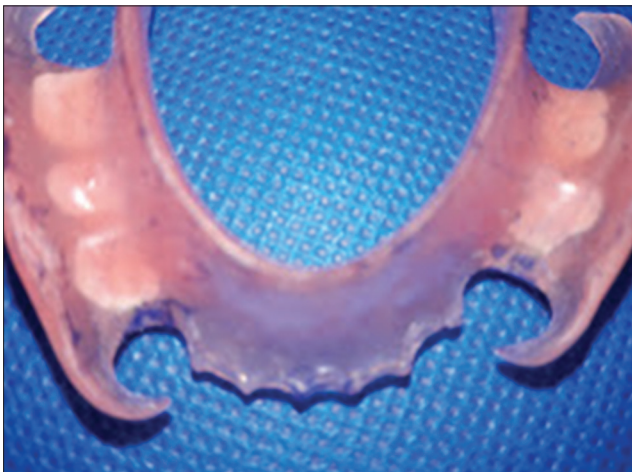


Figure 3: RPD with the interference marked

Insertion of prosthesis in the mouth is a challenging procedure even for an experienced clinician, especially when undercuts are present. Correct identification of areas of interferences and its removal is very important in the treatment of removable prosthesis. A simple and easy method to correctly identify and locate the interferences using articulating paper is discussed. Trimming of the denture without a guide can lead to over-trimming which in turn results in gap between the tooth and prosthesis. This result in food getting in between the tissue and prosthesis, hence, should be avoided.

CONCLUSION

An easy method to locate the areas of interferences during the insertion of prosthesis is explained. This method helps the clinician to correctly locate and relieve the areas of interferences during removable partial denture insertion, thus avoiding chances of over-trimming and associated problems.

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