COMPLETE DENTURE INSTRUCTIONS

You have just received your new dentures. You must be aware that artificial teeth are not like natural teeth and will require a period of adjustment. This period of adjustment varies in length with each patient, but as you become skilled in the use of your dentures they will become more comfortable eating and speaking.

New dentures often cause sore areas in the mouth. Dr. Paparian must adjust the dentures to allow these sores to heal. If the dentures are terribly uncomfortable, remove them from the mouth and leave them in water. You will need to wear the dentures the day you are coming to see Dr. Paparian, unless the mouth is quite sore. Many dentures will need to be adjusted at least twice during the initial phase.

Denture wearers need to see the dentist annually for examination and evaluation. Chronic denture problems often cause no pain and denture users learn unconsciously how to cope with ill fitting prostheses. Changes in the bone and gum support are inevitable. As these changes occur, the dentures will develop an imperceptible rock that will act like a hammer against the tissue – accelerating further tissue changes. Bone loss can proceed to the point that the patient becomes unable to wear any denture comfortably. A yearly check-up will allow Dr. Paparian to determine the extent of bone loss and the resulting fit of the dentures. Dr. Paparian will also examine the entire oral cavity for changes in the tongue, cheeks and floor of the mouth.

Remember, even with proper care most complete dentures will provide adequate service for only 5-7 years.

USE OF NEW DENTURES:

Learning to eat and speak with your new dentures, even for veteran denture wearers, is a difficult situation.

Increased saliva is obvious from the start. In three to four weeks your salivary flow will return to normal.

Speech is also affected. Your tongue may feel restricted at first. It needs time to adjust to the shape of the new denture and learn how to clearly say such letters as “s”, “sh” and “b”. Practice when you are alone. Read the newspaper out loud or “talk back” to the television. In the beginning, the effort seems great, but it will soon become a natural part of your daily life.

The day you get your new dentures you may be tempted to go out and eat something special to celebrate. Dentures that are well fitting can bite and chew with less than 1/3 the efficiency of natural teeth. Go slowly! Start with softer
foods such as noodles, stews and casseroles. Every day try something new. With natural teeth you tend to chew on only one side of your mouth at a time – with dentures you need to balance the load by chewing on both sides at the same time. This is a difficult task to learn and will take great concentration at meal time.

Biting into food, such as a sandwich, is often possible only at the corners of the mouth – not in the front. Many people find it easier to eat open face sandwiches which can be cut with a knife and fork.

Most denture wearers will NEVER be able to eat:
Corn on the cob
Spare ribs
Tough meats
Bulky rolls/submarine sandwiches
Lettuce
Apples

Hard food such as nuts should be avoided since they can cause tissue damage when small pieces get under the dentures.

Chewing foods, such as gum and caramels, will dislodge the dentures.

As you learn to use your new dentures, you will discover what foods you can include in your diet and which you cannot.

**CARE AND CLEANING:**

As with your natural teeth, plaque forms on the dentures. This must be removed by BRUSHING the inside and outside of the dentures at least once daily. A special denture toothpaste is helpful but regular toothpaste is also acceptable. All nooks and crannies of the denture must be cleaned. Denture cleanser tablets will remove only large food debris and provide a mild bleaching effect. Tablets may be used in addition to brushing, but not as a replacement.

Always clean your denture over a basin filled with water or a large folded towel. Dentures will break if they drop on a hard surface such as the bathroom floor or basin. Prevention of damage is important.

If unsightly white chalky deposits develop on the sides of the dentures, soak your dentures over night at room temperature in white vinegar. This should soften the deposits and allow you to brush them off.

The denture must be kept (out of the mouth) in water for at least eight (8) hours each day. This allows your gums time to recover from the pressure of wearing
the dentures. Remember: You don’t wear shoes to bed and you shouldn’t wear your dentures to bed either.

Brushing your gums, tongue and roof of the mouth is also important. This will remove plaque, stimulate circulation and reduce the incidence of severe bad breath.

Many patients use medications which dry the mouth. Drugs for high blood pressure, antidepressives, lithium and sedatives are some which decrease saliva flow. If there is too little fluid in the mouth, the dentures can become uncomfortable to wear. You may feel as if your lips stick to the teeth. There are artificial salivas available which will make wearing the dentures a bit more comfortable.

Some people have a mouth which is poorly shaped for wearing dentures. Perhaps the tongue is enlarged or the bone and gums have shrunk. Many of these patients need to use a denture adhesive to aid retention. Powder adhesives are often best suited to a well-adapted denture, while paste style adhesives work better in ill-fitting dentures. Use as little as possible and try many different brands – each person’s saliva reacts differently with each brand of adhesive. Adhesives are difficult to remove from the denture and off your skin. You may find that warm water and a wash cloth will often speed cleaning time.

If you have any questions, remember to ask Dr. Paparian at your next appointment.