

ORIGINAL RESEARCH PAPER

Dental Science

OPINION PONTICS REVISITED: AN UPDATE OF TERMS AND CONCEPTS

KEY WORDS: Die, Diving, Ovate, Pontic, Twin

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ABSTRACT

It is interesting to use any term formulated in a good scientific shape and easy language which can help student to get better understand the subject of question. It is better to call the term -Die- as a twin, because the die must be identical to the prepared tooth in mouth. Gingival retraction has been suggested by author to be exchanged to attain the purpose of this work. The gingival retraction has become a technique for finish line exposure. In this article we insist on ovate pontic, that has a conical form, egg-shaped, because it does not represent the clinical truth. This type of pontics sinks to a distance of 3mm within the open extraction socket. Initially, the pontic dives and fills the socket and this is a reason, we suggest to express "diving pontic" instead of ovate pontic. Pontic in itself is derived from the latin "pons" meaning (bridge). Could be better expressed as toy. Toy is a model or miniature replica of a thing or intermediate of bridge.

INTRODUCTION

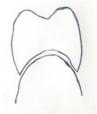
In fixed prosthodontics, ideal pontics must provide biological, mechanical and aesthetic requirements. The shape of the pontic should maintain healthy tissues, be cleansable, be rigid and strong enough to withstand functional forces, provides normal function, and finally looks like the tooth it replaces with tissue contacts appear as normal tooth.

The aim of this short article is to update the reader with the classification of different types of pontics with the focus on some newly introduced terms that has important clinical implications.

SADELL/RIDGE LAP

This type of pontics completely covers the ridge from both buccal and lingual sides as shown in Figure 1. Although this pontic meets the aesthetic requirements, it, however, doesn't provide access for cleaning.

Figure 1:Sadell/Ridge Lap.



Interestingly, this pontic is widely used in practice, as our patients prefer it over other types of pontics.

MODIFIED RIDGE LAP

Line contact along the buccal side of the ridge is long. The lingual surface is cut away, but, the impacted food is existed which causes hard cleaning shown in Figure 2.

Basically, this pontic has a minimal contact with the ridge from the point of contact on the buccal side up the crest and is indicated in the upper arch.

Figure 2: Impacted food in modified ridge-lap, arrow.

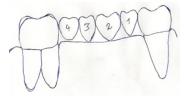


Although this type of pontics provides both aesthetical and cleaning advantages, patients sometimes find impacts food into the space on the lingual side which cannot be readily removed with the tongue

Conical

pontic takes different shapes such as: conical shaped (1), heart shaped (2), bullet shaped (3), or ovate shaped (4) (egg-shaped) shown in Figure 3..

Figure 3: Conical pontics included ovate pontic.



Clinically, the choice of the shape is based on the mesio-distal span of the pontic and the aesthetic requirements in the occlusal third.

These pontics adjoin the ridge with very minimal points of the surface. Although, these pontics do not provide good aesthetics, but are easy to clean and use. The conical pontics are indicated on the lower mandible.

DIVING

The researcher is suggesting the term "diving" instead of "ovate" shown in Figure 4 which is widely used in the literature.

Figure 4: Diving pontic - (1) Tooth 14 has been extracted and 13 & 15 have been prepaed for receiving a bridge with diving pontic, (2) The extraction cavity in which the pontic dives is clear, (3) The Bridge insertion way, and (4) The bridge in its place.



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RATIONALE

Some clinical cases require the fabrication of an immediate bridge following extractions of anterior teeth.

This will immediately bridge the gap and allow the socket to be healed with adequately restored aesthetics and function.

WHYTHETERM DIVING?

- Because this type of pontics sink to a distance of 3mm within the open extraction socket. Initially, the pontic dives, fills the socket, and appears as a natural tooth emerging from it.
- 2 The term diving represents an actual clinical situation and avoids confusion between this type and other types of pontics.
- As mentioned above, the term ovate is one shape of the conical pontics which has a completely different indication

INDICATIONS

- $1. \quad Post\, extraction\, of\, upper\, anterior\, teeth.$
- 2. Aesthetic.

HYGENIC BRIDGE ORWASHTHROUGH

A metal or porcelain bar replaces the occlusal features and the occlusal third of the extracted tooth. This pontic makes no contact with soft tissue (3-4mm distance).

The easiest way to clean used when the pontic is required for functional purposes rather than the appearance shown in Figure 5.





Figure 5: Hygienic pontic -(A) Modified: Perel and (B) Conventional (fish belly).

SUMMARY

Patients should be provided a pontic easy to clean and must be given a cleansable fixed partial denture [1-3]. Besides, the continuity of the area non-prepared of abutment and filling should also be provided.

The shape, extension and contact point with soft tissues play a major and an essential role in restoring function and the figure out of the patient.

Adopting a curved shape of pontics, therefore, is inevitable and the contact point of the pontic with the soft tissues should always be minimal.

If the pontic has to be extended within the soft tissues, it should never be extended beyond the keratinized gingiva to avoid any contact with the oral mucosa.

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REFERENCES

- Alshaarani F, Imad B, Joury E, et al. Itch gingiva: an early sign of preinflammatory pulp necrosis or unsuccessful endodontic a case series. Int J Dent Oral Health 2018;4(2):63 DOI: 10.23937/2469-5734/1510063.
- Alshaarani F. Is it time to reconsider some terminology change in dentistry? IOHDS 2018:2(4):402
- JOHDS 2018;2(4):402.

 3. Alshaarani F. "The forty-five rules of fixed prosthodontics". ECDE 2019;18(3):454-5.