
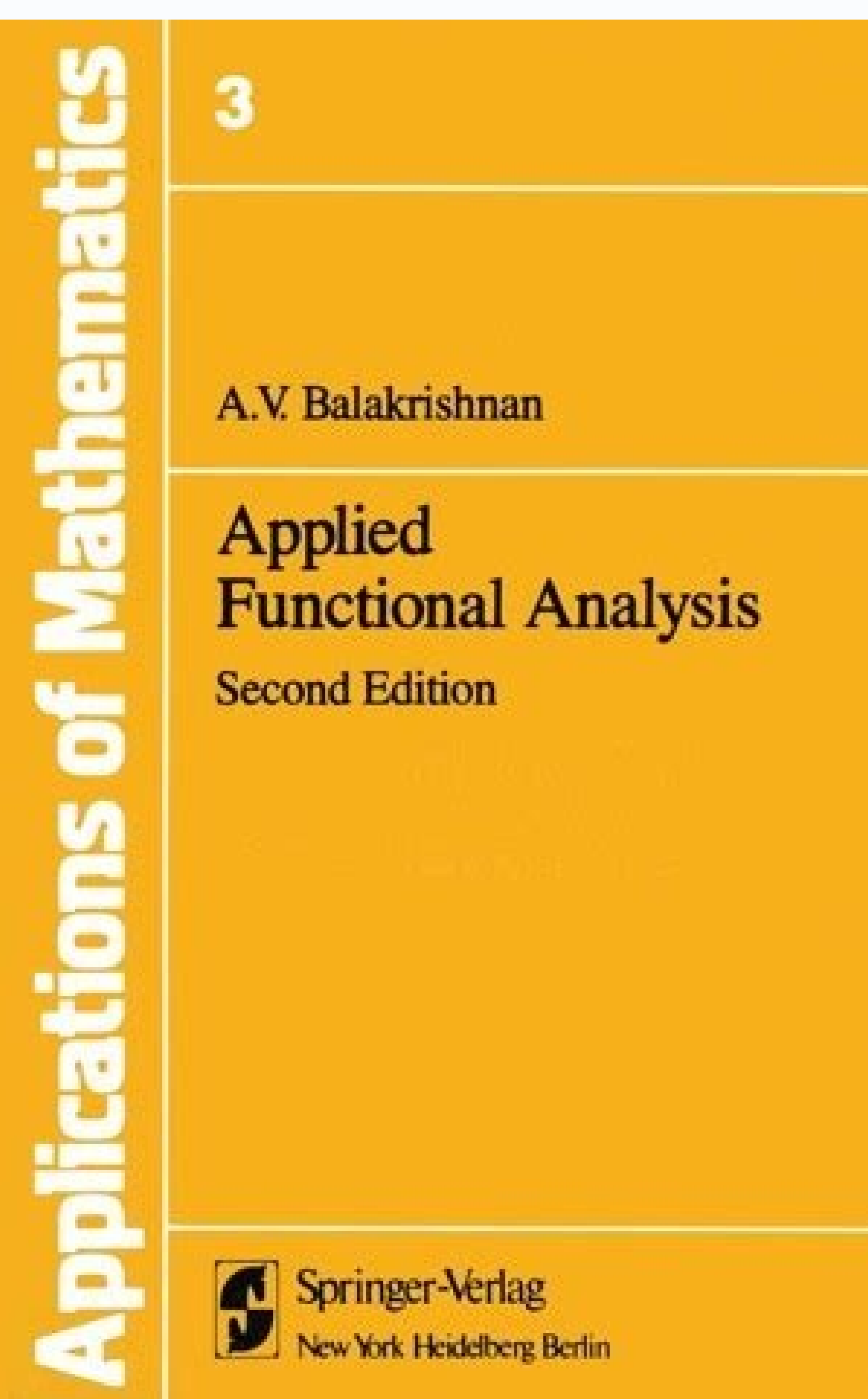
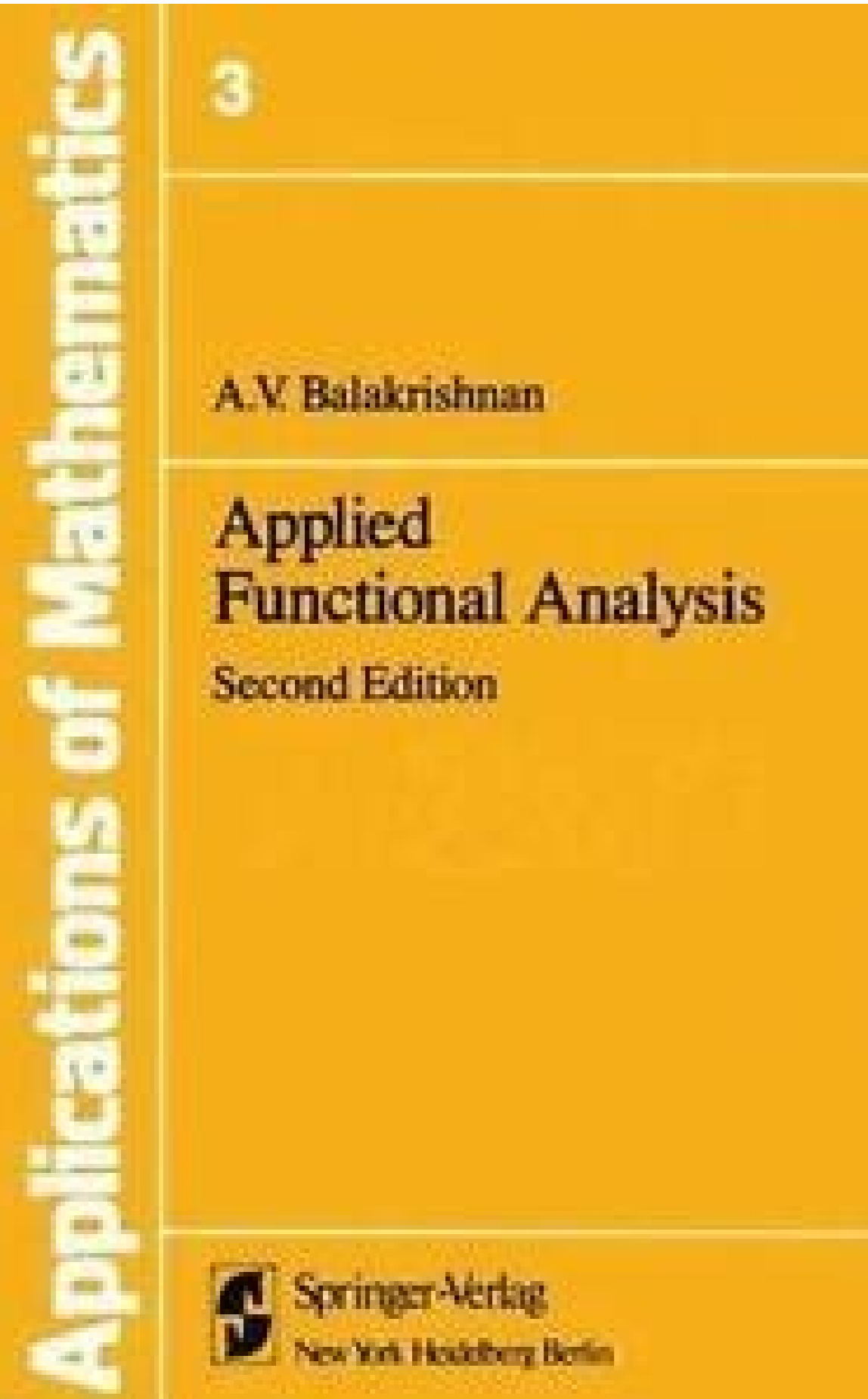
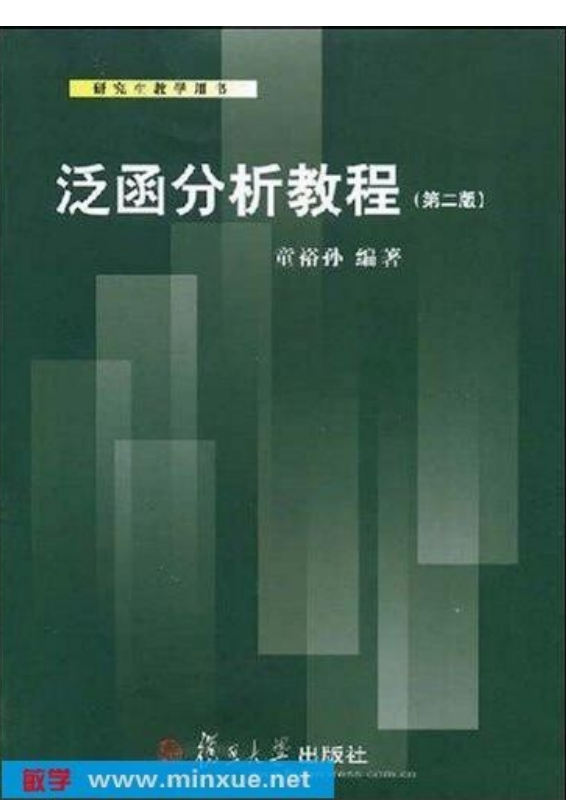


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MODIFICATION OF IMPRESSION PROCEDURES WITH THE USE OF CUSTOM SECTIONAL TRAYS FOR A MICROSTOMIA PATIENT – A CASE REPORT

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Abstract:

Impression making is considered to be an important step in the fabrication of any fixed or removable prosthesis. However certain pathologic conditions such as Oral submucous fibrosis associated with reduced mouth opening critically hamper the impression making procedure. Proper orientation of impression tray in such patients becomes extremely difficult due to reduced resiliency of tissues and obliteration of vestibular spaces. The problems encountered in fabrication of complete denture for these patients especially during impression making are overcome by the use of sectional trays. This article focuses on use of sectional trays during preliminary and final impression making procedure for an edentulous patient with oral submucous fibrosis.

Introduction

Restricted mouth opening impose a great challenge to the dentist in performing any intraoral procedure. This is commonly associated with conditions like orofacial cancer surgeries, scleroderma, traumatic injuries, temporomandibular joint disorders, oral submucous fibrosis etc... Oral submucous fibrosis is one of most common pathology associated

with reduced mouth opening. Oral submucous fibrosis (OSMF) is defined as a chronic disease of the oral mucosa characterized by inflammation and progressive fibrosis of the lamina propria and deeper connective tissue layers. A number of factors trigger the disease process by causing juxta epithelial inflammatory reaction in the oral mucosa. Suggested contributory factors include areca nut chewing, ingestion of chillies, nutritional deficiencies, genetic and immunologic processes and other factors. OSMF is a potential premalignant condition with an incidence of oral cancer in 3-7.6% cases.¹ The presenting symptoms of OSMF are burning pain, progressive inability to open the mouth with difficulty in mastication and swallowing. It is most common between 20 and 40 years of age with a female:male ratio of 3:1¹. This condition is prevalent among geriatric patients with partial or complete edentulism. Restoring function becomes a challenge to the prosthodontist due to patient's clinical presentation.

Several methods have been described for use when a standard impression tray becomes difficult to be inserted or removed from the mouth. During impression making, modification of standard impression procedure is required to accomplish

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