

## Fitting check for implant prosthesis

이성복 경희대학교 치과대학 치과보철학교실



### 연자 약력

1984년  
1984-1987년  
1991-1992년  
1997-1999년  
1993년-현재

경희치대 졸업  
경희치대 부속치과병원 보철과 수련  
일본 오우대학 치학부 보철과 박사과정 학점교류 유학  
미국 하버드 치대 보철과 및 임프란트과 교환교수  
경희치대 보철과 부교수

The entire literature on implant dentistry insists that a passively fitting prosthesis is mandatory for long-term preservation of osseointegration. The actual definition of passivity is more obscure.

Texts devoted to implant failure and bone loss complications have speculated on possible causes. Typically, mechanical overload, undetected framework fitting inaccuracies, incorrectly designed bridges and inadequate stress distribution have each been intuitively identified.

Studies of complete-arch prostheses supported by implants have shown that often there exists misfit between prosthesis and implant. This factor alone does not seem to lead to complications, because there are usually more than enough implants to support the prosthesis. For short-span prostheses in the posterior region, however, where each implant has a strategic value, the lack of prosthetic fit or proper screw tension may become the origin of a complication. Therefore, if precision and screw tightening in the posterior region are not controlled, this should be considered as a risk factor.

On a model, a satisfactory fit may be confirmed by the following test. It can be shown that the edge of a 13mm wide strip of sheet wax at a room temperature of approximately 20°C can exert a force of about 200gm before buckling.

The finished framework is delivered for trial in the mouth with one slave gold screw or guide pin in place. By this presentation the dentist is more able to assess the quality of work, before trial in the mouth.

The same fitting test is repeated in the mouth, except that a new gold screw is used. The clinician may also wish to place a complete set of new screws for a final verification that all is satisfactory.