The Equipoise™ “Hidden Clasp” System

Interproximal Preparation

An interproximal access at least 1 mm is necessary to give the mesial connector strength to support the equispacing clasp. This preparation is made by removing 2 mm from the interproximal burs, slightly off the buccal or lingual surfaces, enhancing the abutment tooth’s stability during mastication and directing all forces down the arm. The clasp arm always moves in the same direction as the clasp (resistance arm) and opposite of the retentive tip of the retentive arm. The occlusal rest is prepared to be spoon-shaped and use wax-resin stone. The rests should be chairside cut surfaces.

Widmann 2000 Plus Partial Dentures
Each DAL partial denture is cast in premium Vitallium 2000 Plus alloy. Widmann 2000 Plus guarantees you the strength and biocompatibility, as it is one of the best forms of chrome-cobalt alloy prosthetics. A lingual partial denture becomes a logical solution.

Equipoise Clasp Preparation Guidelines

A lingual back-action clasp that is fully equipoise prepared with the unique Equipoise form. The clasp preserves and strengthens abutment tooth. It provides the desired “hidden clasp” effect without the added mesiodistal width and 2/3 of the buccolingual width of the tooth and at least 2/3 of the buccolingual width. We take great pride in ensuring that each of our partial denture managers is compliant with our recommended guidelines.

Duralux - The New Premium Flexible Partial Denture

Replacing missing teeth for the partially edentulous patient is still a common need for many dental professionals. If the patient is not a candidate for implants or for a fixed prosthetic bridge, a removable partial denture becomes a logical solution.

Interproximal Preparation

In order to assist our customers with design alternatives, and use the Maxillary and mandibular partial dentures, single tooth flippers, unilateral flippers, and combined with Vitallium 2000 Plus metal substructure.

Flexible partial material has changed over the years from a vinyl-based material to more modern polyethylene thermoplastic polymers. Polyethylene materials have been used in the medical field due to their inert nature and durability. This evolution, incorporated into DuraFlex partial dentures, offers significant advantages. These advantages include near zero (0.05%) water absorption, and significantly decreased stress and slides. The low absorption rate also makes the material more stable color change over time.

The esthetic results that are achievable with a flexible partial can be excellent. The polyethylene material in DuraFlex offers a high esthetic demand. "Patient does not want metal clasps to show." Continuous tooth replacement (implant or extractions site healing) "Prosthesis with metal retention." "Cost concerns (flexible partials are much less expensive to fabricate)." "Comprised on abutment teeth." "Patients demanding a more comfortable and lighter fit.

Clinical Case #1

Nothing is more disheartening when a patient spends money on partial dentures and then puts them in a drawer, never wearing them. I have found these partials often complicated restorations and are very resistant to fracture. The patient is not a candidate for implants or prosthesis that will not function and achieved a full natural looking smile once again (Figure 2).
Clinical Case #2
This patient presented after a horseback riding accident which resulted in a loss of lower anterior teeth and the supporting interdental bone. The patient desired that implant restorations would not be better for the long term. However, this treatment plan required bone grafts and significant healing time until the implants could be placed or restored. A transitional appliance would be necessary, and esthetics were paramount to the patient.

A DuraFlex partial was fabricated which allowed a natural looking replacement of the missing teeth (Figure 3). In addition to the master model and opposing model, the case was mounted on a War 320 articulator utilizing a facebow registration. This allowed for the creation of the occlusal side of the implant. It was important to restore proper anterior contact initially and functional guidance. With the application of the DuraFlex partial denture, the patient continued to have an esthetic and functional result while transitioning to the final implant reconstructions (Figures 4 and 5).

DuraFlex is used to provide the addition of a flexible alternative to traditional partials. DuraFlex Flexible Partial Dentures provide excellent esthetic and functional transfers to both you and your patients, making it an excellent flexible alternative.

DuraFlex is the most distinguishing benefit derived from its use in making it as the first choice, not only in the field of aesthetic restorations but also in the fabrication of aesthetic restorations. Because of its durable, resilient and color-stable properties, DuraFlex provides an excellent solution in situations where esthetics is a major concern, as well as being easy to adjust and polish, and will not gum up when adjusting, making DuraFlex our most convenient and durable flexible solution to deliver to your patients.

Additional benefits:
• Patient Comfort - lightweight and thin for minimal airway and "snap fit" obstruction and "snap fit"
• Natural Esthetics - translucent shades allow for natural tissue blend
• Stable Flexible - durable and resistant quality to many chemical solvents, bases and acids. With a water resorption rate that is ten times slower than conventional acrylic, DuraFlex provides several new and unique benefits to both you and your patients, making it our easier flexible alternative. DuraFlex Flexible Partials. DuraFlex comes in three shades - tissue tone pink, tissue blend, and opaque white.

DuraFlex provides an excellent soft tissue alternative to cemented implant restorations. This restoration combines the benefits of aesthetic restorations with the implant-supported framework. DuraFlex Flexible Partials are a flexible alternative to cemented implant restorations when precision is required for implant retention and esthetic restorations are required for the anterior maxilla.

Additionally, DuraFlex can be used as an alternative to immediate implant restorations. It is suitable for patients who require immediate restoration of the anterior maxilla. DuraFlex Flexible Partials are a flexible alternative to immediate implant restorations. It is suitable for patients who require immediate restoration of the anterior maxilla. DuraFlex Flexible Partials are a flexible alternative to immediate implant restorations. It is suitable for patients who require immediate restoration of the anterior maxilla.
Clinical Case #2
This patient presented after a hordeolum rising infection which resulted in erosion of lower anterior teeth and the supporting alveolar ridge. The patient decided that implant restoration would not be the best long-term treatment. This treatment plan required bone grafts and significant healing time until the implants could be placed or restored. A transitional appliance would be necessary, and esthetics were paramount to the patient.
A DuraFlex partial was fabricated which allowed a natural-looking replacement of the extracted teeth (Figure 3). In addition, the master model and opposing model, the case was a DuraFlex Super Clear Splint, utilizing a hybrid registration. This allowed avoiding the risk of shifting at rotation. It was important to restore proper anterior contact registration. This allowed recording of the condylar axis of occlusion which resulted in avulsion of lower anterior teeth and the need for extractions.

During the course of the treatment, the patient had lost additional posterior teeth. This resulted in the patient being unable to provide an adequate chewing function. The patient was willing to make the necessary changes but desired a premium result. DuraFlex partial denture, the patient was able to achieve the desired esthetic and functional result.

DuraFlex flexible partial denture features Premium Portrait™ IPN® Teeth which are paramount to the patient.

DuraFlex provides an excellent alternative to restore the patient's unique occlusion (Figures 4 and 5).

Conclusion
Patients have many needs and circumstances related to their partial dentures. It is important that a restaurative dentist have the options necessary to meet these needs. Flexible partials can be an excellent alternative for both the dentist and the patient.

About the author:
David Hess was recognized by his peers for his creative and innovative treatment planning which saved lives and teeth. He was a world-renowned speaker, educator, and researcher who was the first to present complete maxillary and mandibular dentures with flexible acrylic bases. Hess has helped over a thousand of his peers to incorporate functional esthetic care into their practices. In the past five years, Dr. Hess has taught hundreds of hours of hands-on continuing education courses. In the past five years, Dr. Hess has taught hundreds of hours of hands-on continuing education courses. His passion for learning and teaching from the very start of his career has helped him fulfill his dreams and live a life that was true. Dr. Hess was educated at the University of Illinois College of Dentistry, graduated from Northwestern University Dental School in Chicago, and completed his Advanced Education in General Dentistry at the University of Illinois. Dr. Hess has helped over a thousand of his peers to incorporate functional esthetic care into their practices.

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Clinical Case #3
This patient was in the midst of serious medical treatment. While undergoing chemotherapy, the patient lost some of her teeth. This resulted in the patient having difficulty with chewing. The patient’s pre-existing teeth and her ability to chew were greatly affected due to the chemotherapy. During this treatment, the patient had lost additional posterior teeth. This resulted in the patient having difficulty with chewing. The patient’s pre-existing teeth and her ability to chew were greatly affected due to the chemotherapy.

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Clinical Case #2
This patient presented after a horseback riding accident which resulted in avulsion of lower anterior teeth and the patient lacked additional posterior teeth. This resulted in the patient having very posterior teeth, and her ability to chew was greatly affected. Due to the patient’s validated facial and positional medical treatments, the patient wanted a high quality result, but could not afford to spend the amount needed for metal-based partials. A DuraFlex partial provided an excellent alternative to revise the patient’s unique circumstances (Figures 4 & 5).

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This patient was in the midst of serious medical treatment. During the course of the treatment, the patient lost additional posterior teeth. This resulted in the patient losing key posterior teeth, and her ability to chew was greatly affected. Due to the patient’s validated facial and positional medical treatments, the patient wanted a high quality result, but could not afford to spend the amount needed for metal-based partials. A DuraFlex partial provided an excellent alternative to revise the patient’s unique circumstances (Figures 6 & 7).

DuraFlex® Flexible

DuraFlex is a premium flexible partial tooth replacement system. It was designed to provide the patient and your patients, making it our easier flexible alternative.

DuraFlex's most distinguishing benefit derives from its material makeup, as it is not a nylon base but rather a polyolefin thermoplastic polymer. This material has been used in the medical field for years because of its inert, durable and resistant quality to many chemical solvents, bacteria and fungi. With its unique design, DuraFlex offers advantages such as being less bulky, thinner, lighter and easier to adjust, making DuraFlex our most convenient and dependable flexible solution. In addition, polyolefins are much more stable and predictable in their behavior than nylon. The most important advantage of polyolefin, however, is that it is not as stiff as nylon and this makes it much easier to adjust, making DuraFlex our most convenient and dependable flexible solution.

Features

• Featuring Premium Portrait™ IPN® Teeth
• Patient Comfort - lightweight and thin for minimal irritation
• Strong & Durable - virtually unbreakable
• Easy Delivery - simple to adjust and polish if necessary

Benefits of DuraFlex

• Easy Delivery - simple to adjust and polish if necessary
• Self-adjusting - readily adaptable
• Natural fit - readily adaptable
• Patient Comfort - lightweight and thin for minimal irritation
• Hybrid - low wear, absorption, non-alloy stones or silver
• Featuring Premium Portrait™ IPN® Teeth

DuraFlex is provided a natural, soft-fit for retention. No tooth or tissue preparation is required. Simply add a cast master post and polished crown to ensure a careful impression along with opposing stone registration.

Shade Selection

DuraFlex comes in three shades - tissue tone pink (standard), tissue tone pink (standard) and a medium blend. DuraFlex’s most distinguishing benefit derives from its material makeup, as it is not a nylon base but rather a polyolefin thermoplastic polymer. This material has been used in the medical field for years because of its inert, durable and resistant quality to many chemical solvents, bacteria and fungi. With its unique design, DuraFlex offers advantages such as being less bulky, lighter and easier to adjust, making DuraFlex our most convenient and dependable alternative to meet this patient’s unique circumstances (Figures 4 & 5).

Adjustments/Polishing

DuraFlex adjusts more cleanly than nylon thermoplastics so there is no gumming of your instruments. DuraFlex requires a wax-up alternative to the metal partials. Polishing can be accomplished with a 500 grit/5000 grit fine paper/pumice on a rag wheel and then sing a high grit, sharpened saw ring and light buffing (see a slow speed paper using Triopuff buffing component).

Add To Roble Procedures

All tooth, clasp, or saddle additions/repairs must be completed in the laboratory using DuraFlex thermoplastic. DuraFlex can replace previously repaired and added tooth and/or clasp retention (on a slow lathe speed) using Tripol buffing compound.

Conclusion

Patients have many needs and circumstances related to their oral health. It is important that a restorative dentist have the options necessary to meet these needs. Flexible partials continue to be a feature that is highly sought after by both the dentist and the patient.

About the Author

Dr. Robert W. Hess received his dental degree from Northwestern University Dental School in Chicago, IL. As an associate faculty member of the Dawson Academy, Dr. Hess has had a passion for learning and teaching from the very start of his career. In the past five years, he has attended workshops and seminars throughout the country. With Dr. Hess, you have a committed and dedicated team to ensure the highest level of care for your patients.

DAL Hard/Soft Splints

• Resin cement for short or over-tapered preparations
• Resin reinforced glass ionomer cement

Cementation Recommendations:

• Hand finish using Triopuff polishing paper
• Ultra-fine grit diamonds (Triopuff)
• Fine grit diamonds (Triopuff)
• Pumice
• Polishing pastes

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Interproximal Preparation

An interproximal access wedge or 1 at least 1 mm is necessary to give the mirror connector strength to support the framework in this area. Interproximal preparations are made to remove 1 mm of the interproximal area. The preparation is made to remove 1 mm of the interproximal area. The preparation is made to ensure that the margin is not placed close to the gingival margin, which can cause irritation and inflammation.

Retention Preparation

Retention preparations are made to ensure that the partial denture is held securely in place. The retention preparation is made to create a retentive feature that will hold the partial denture in place. The retention preparation is made to ensure that the partial denture is not displaced when the patient is wearing it. The retention preparation is made to ensure that the partial denture is not displaced when the patient is wearing it.

Full Contour Monolithic Zirconia

Our Fastest Growing Full Contour Alternative

Equipoise™ “Hidden Clasp” Partial Dentures

The Ultimate Partial Solution

Clinical Case #1

- Patients demanding a more comfortable and lighter fit
- Compromised abutment teeth
- Cost concerns (flexible partials are much less expensive to fabricate)

Design Indications

DuraFlex partials can be fabricated as bilateral partial dentures, single tooth flippers, unilateral flippers, and combined with Vitallium 2000 Plus metal substructure.

Flexible partial material has changed over the years from a nylon based material to modern polyetherimide thermoplastic polymers. Polyetherimide materials have been used in the medical field due to their inert nature and durability. This new material, incorporated into DuraFlex, offers significant advantages. These advantages include near zero (.05%) water absorption and significantly decreased staining and odors. This low absorption rate also makes the material more color stable over time.

Indications for a Non-Metal Flexible Partial

- Patients complaining of tightness of conventional partials
- Patients unwilling to spend money on partial dentures and then puts them in a drawer, never wearing them
- I have found these patients often complain of the brightness of conventional partials, and never get past the aesthetics of their own dentures. The task is even more challenging when the teeth involved are in the esthetic zone. Not feeling confident can interfere a patient’s social confidence and activities.

IN VITRO

Mandibular and maxillary DuraFlex partials were prescribed to replace the anterior teeth (Figure 6). The patient was ready to adjust to the new denture and accomplishment with the flexible partial. The patient was able to achieve a higher level of function and achieved a natural looking smile once again (Figure 6).