

Dentures

Canonical: <https://directory.collinsstreetspecialistcentre.com.au/procedures/prosthodontics/dentures/>

Description:

--- title: "Dentures" slug: /prosthodontics/dentures/ type: procedure specialty: prosthodontics specialists: ["Dr Fotios Angelis", "Prof Vasileios Chronopoulos", "Dr Jamie Foong", "Dr Simon Hinckfuss"...

Details:

--- title: "Dentures" slug: /prosthodontics/dentures/ type: procedure specialty: prosthodontics specialists: ["Dr Fotios Angelis", "Prof Vasileios Chronopoulos", "Dr Jamie Foong", "Dr Simon Hinckfuss"] related: - /prosthodontics/all-on-4/ - /prosthodontics/dental-implants-protho/ - /prosthodontics/full-mouth-rehabilitation/ - /periodontics/dental-implants-perio/ - /oral-maxillofacial-surgery/dental-implants-oms/ seo_target: "specialist dentures Melbourne CBD prosthodontist" ---

Dentures

What Are Dentures?

A denture is a removable prosthetic appliance that replaces missing teeth and the supporting gum and bone tissue. Dentures can replace some teeth (partial denture) or all teeth in an arch (complete denture). They are fabricated from a combination of acrylic resin, metal alloy, or flexible polymer materials depending on the type and clinical requirements.

Dentures have been refined over many decades into highly functional prostheses. The difference between a denture made by a specialist prosthodontist and one produced without specialist-level assessment lies in the precision of the fitting, the accuracy of the bite registration, and the attention to facial support and aesthetics — all of which directly affect the patient's comfort, function, and quality of life.

At Collins Street Specialist Centre, all denture work is planned and overseen by Dental Board-registered specialist prosthodontists, with fabrication carried out in the in-house dental laboratory that serves exclusively the centre's patients.

Types of Dentures

Complete (Full) Dentures

A full denture replaces all teeth in one or both arches. It rests on the gum ridge and is held in place by suction (upper arch) and the natural contours of the jaw (lower arch). Complete dentures are indicated when all natural teeth have been lost or require removal.

The success of a full denture depends critically on the precision with which the jaw relationship is recorded — the vertical height between upper and lower jaws, the horizontal position of the teeth, and the way the denture interacts with the surrounding lips, cheeks, and tongue. These are occlusal determinations that require specialist training to assess and execute accurately.

Partial Dentures

A partial denture replaces some missing teeth within an arch where other natural teeth remain. It is clasped or attached to existing teeth to achieve stability. Partial dentures are a cost-effective option and can be designed to be readily converted to a full denture if additional teeth are lost over time.

****Acrylic partial dentures**** use a pink resin base with artificial teeth. They are lighter and less expensive, but bulkier in the mouth.

****Cast metal (cobalt-chrome) partial dentures**** have a precision-cast metal framework that is thinner, stronger, and more comfortable. The metal framework is designed to distribute bite forces over a wider area, reducing stress on the remaining teeth and underlying bone.

****Flexible resin (Valplast) partial dentures**** use a thermoplastic nylon material without metal clasps. They are more aesthetically discreet — particularly useful in the visible front zone — and comfortable in the mouth, though they offer less rigidity than metal frameworks.

Immediate Dentures

An immediate denture is fabricated before the remaining teeth are extracted and is inserted on the day of extraction, ensuring the patient is never without teeth. As the gum and bone remodel during healing, the immediate denture will require relining or replacement — typically at six to twelve months post-extraction. The advantage is functional and psychological continuity; the patient does not experience a period of being edentulous.

Implant-Retained and Implant-Supported Dentures (Over-Dentures)

An over-denture is a removable denture that attaches to dental implants or remaining tooth roots for significantly enhanced stability. The implants act as anchors — the denture clips or locks onto them rather than relying on suction and gum contact alone.

This category represents the most significant improvement in denture comfort and function available. Even two implants in the lower jaw (a two-implant over-denture) dramatically reduce movement of the lower denture, which is notoriously difficult to stabilise with conventional suction techniques.

****Implant-retained over-dentures**** are held in by implants but still rest partly on the gum tissue for support.

****Implant-supported over-dentures (bar-retained)**** attach to a bar connecting multiple implants, distributing forces entirely through the implants rather than the gum tissue.

At Collins Street Specialist Centre, implant surgery for over-dentures is coordinated with the specialist periodontists or oral and maxillofacial surgeons. The prosthodontist plans and fabricates the final removable prosthesis and works closely with the surgical team from the outset to ensure implant positions are optimal for the planned denture design.

When Might You Need a Denture?

Dentures may be the appropriate restorative solution when:

- ****Multiple or all teeth in an arch are missing**** — or are planned for extraction due to advanced decay, fracture, or periodontal bone loss
- ****Implants are not yet indicated**** — due to insufficient bone volume, medical contraindications, or the patient's preference
- ****A transitional solution is needed**** — during a period of healing prior to implant placement
- ****Budget considerations favour a removable solution**** — dentures have a lower initial cost than implant-supported fixed restorations
- ****The patient is elderly or medically compromised**** — and surgical intervention carries elevated risk
- ****An immediate denture is needed**** — to cover the transition period immediately following extraction

The prosthodontist will always discuss the full range of options, including implant-supported fixed alternatives such as All-on-4, before proceeding with a removable prosthesis.

What to Expect: Step-by-Step

Assessment and Planning

The initial appointment involves a clinical examination, review of existing radiographs, and assessment of the jaw relationship, remaining teeth, and gum and bone contours. Where implant-retained options are being considered, imaging to assess bone volume is arranged.

For complete dentures, this stage involves recording the patient's facial measurements, the correct vertical height of the bite, and aesthetic targets — the position of the lip line, the degree of tooth display in repose and during speech, and the shade and mould of the artificial teeth.

Working Impressions and Bite Registration

Precision impressions of the upper and lower arches are taken using close-fitting custom trays. Bite registration records the exact relationship between the jaws. These records are transferred to the in-house dental laboratory where the denture is fabricated.

Try-In Appointment

The denture is returned at a wax try-in stage — with the teeth set in wax — allowing the patient and specialist to assess aesthetics, tooth position, and bite before the final acrylic is processed. Adjustments are made at this stage without consequence, as the wax is easily modified.

Delivery and Adjustment

The final processed denture is fitted. Minor pressure spots are adjusted chairside. One or more adjustment appointments are typically expected in the days and weeks following delivery as the gum tissue accommodates the prosthesis.

Recovery and Aftercare

Wearing In a New Denture

New dentures require an adjustment period. The muscles of the cheeks, lips, and tongue learn to stabilise the prosthesis through normal use — a process that takes several weeks. Sore spots are common and should be reported to the prosthodontist for adjustment rather than tolerated.

****Immediate guidance:**** - Wear the denture consistently during the initial adjustment period to allow adaptation - Eat soft foods initially and cut food into smaller pieces - Read aloud at home to accelerate adjustment to speech changes

Daily Maintenance

- Remove and clean the denture after each meal where possible; thoroughly clean with a soft brush and denture-specific cleaner at night - Do not use regular toothpaste — it is abrasive and will scratch the acrylic - Soak the denture overnight in water or a mild denture solution; the gum tissue benefits from a period without the denture in place - Never use boiling water — it distorts acrylic permanently

Ongoing Review

Gum tissue and bone contour change over time as bone resorbs beneath a denture. Regular specialist review — at least annually — allows the fit to be monitored. When the denture no longer fits accurately,

a reline (adding new acrylic to the fitting surface) restores retention rather than requiring a full replacement. Ill-fitting dentures that are worn without adjustment accelerate bone loss and make future prosthetic treatment more difficult.

Why See a Specialist Prosthodontist?

Dentures are among the most technically demanding prosthetic disciplines. Replacing teeth with a removable appliance that must function across all the forces of chewing, speaking, and swallowing — without the structural anchor of natural roots — requires a precise understanding of jaw anatomy, occlusal mechanics, and the biomechanics of tissue-borne versus implant-borne loads.

A specialist prosthodontist has three additional years of postgraduate training dedicated to exactly this. The clinical curriculum covers complete denture construction in detail — from the physiological neutral zone theory that underpins tooth positioning, to the measurement of face height, to the aesthetic principles governing tooth selection. This is knowledge and technique that takes years of specialised practice to develop.

Patients who have had unsatisfying denture experiences with non-specialist providers often find that specialist prosthodontic care resolves longstanding problems with retention, comfort, or appearance that had been attributed simply to the difficulty of the situation.

Our Specialists

Dr Fotios Angelis BDS (Hons)(Melb), DClinDent (Melb) Specialist Prosthodontist with expertise in the full range of removable and fixed prosthodontic rehabilitation.

Prof Vasileios Chronopoulos DDS, MS, PhD (Pros) Specialist Prosthodontist with over 30 years of clinical and academic experience in prosthodontics, including complex denture cases and implant-retained prostheses.

Dr Jamie Foong BDS (Melb), DClinDent (Melb) Specialist Prosthodontist with experience in both removable and fixed prosthodontic solutions, and a clinical supervisor at the University of Melbourne.

Dr Simon Hinckfuss BDS (Melb), DCD (Pros), Cert.Perio MS (Minn) Dual-registered Specialist Prosthodontist and Specialist Periodontist — uniquely positioned to assess both gum and bone health and the prosthetic outcome simultaneously, which is particularly relevant when teeth are being extracted prior to denture placement.

All specialists hold current registration with the Dental Board of Australia. AHPRA specialist registration can be independently verified online.

Related Treatments

- **All-on-4 Full Arch Rehabilitation** — A fixed, non-removable implant-supported alternative to a full denture - **Dental Implants (Prosthodontic Restoration)** — Implants that support individual crowns or over-dentures - **Dental Implant Surgery (Periodontics)** — Surgical placement of implants for denture retention - **Dental Implant Surgery (OMS)** — Complex implant surgery for patients with bone grafting needs - **Full Mouth Rehabilitation** — Comprehensive treatment planning for patients with advanced tooth loss - **Bone Grafting** — Rebuilding bone volume prior to implant placement for over-denture support

