

Appropriate Attachment Types



سایش فیکسچر به
خاطر ضعیف
بودن مادگی

دکتر فواد شهابیان
متخصص پروتز
[T.me/dentcast](https://t.me/dentcast)



Appropriate Attachment Types



سایش Stud ها به
خاطر ضعیف بودن
مادگی

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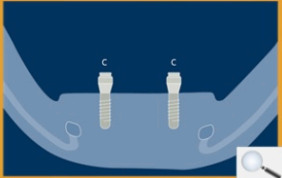



Appropriate Attachment Types



Appropriate Attachment Types

Individual attachments *(Andreiotelli et al. 2010)*

Generic type	Indications	Advantages	Disadvantages
<ul style="list-style-type: none">• Stud attachments 	<ul style="list-style-type: none">• Two- and four-implant overdentures	<ul style="list-style-type: none">• Low initial cost• Convenient dimensions in cases of space constraints• Easy hygiene access• Easy to fabricate including chairside fitting• Female components available in different designs and retentive strengths• Some designs can accommodate angular discrepancies up to 60 degrees	<ul style="list-style-type: none">• General:<ul style="list-style-type: none">▶ Long-term maintenance and repair costs due to hardware complications▶ Angular discrepancy restrictions• Design-specific:<ul style="list-style-type: none">▶ Food and biofilm accumulation▶ Variability of retentive forces and early loss of retention <i>(Kobayashi et al. 2014 )</i>

Appropriate Attachment Types

Splinted attachments *(Andreiotelli et al. 2010)*

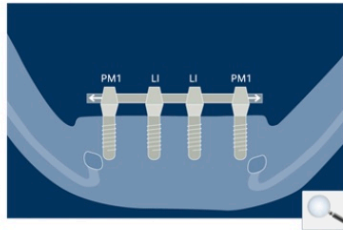
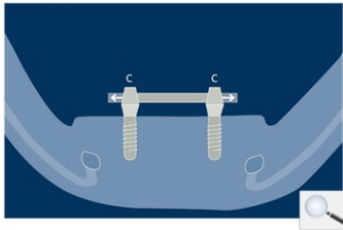
Generic type

- Bars:
 - ▶ Standard
 - ▶ Milled
 - ▶ CAD/CAM

Indications





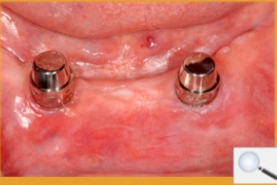

- Two- and four-implant overdentures

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Appropriate Attachment Types

Individual attachments *(Andreiotelli et al. 2010)*

Generic type	Indications	Advantages	Disadvantages
<ul style="list-style-type: none">• Telescopic crowns  	<ul style="list-style-type: none">• Two- and four-implant overdentures	<ul style="list-style-type: none">• Little maintenance• Good patient satisfaction <i>(Heckmann et al. 2004 , Visser et al. 2009 )</i>	<ul style="list-style-type: none">• Limited studies• Requires parallel implants• Requires laboratory expertise• High cost
<ul style="list-style-type: none">• Magnets  	<ul style="list-style-type: none">• Two- and four-implant overdentures• Geriatric population	<ul style="list-style-type: none">• Easier to handle for patient with reduced dexterity	<ul style="list-style-type: none">• Least retentive force <div data-bbox="1387 800 1787 985"><p>دکتر فواد شهابیان متخصص پروتز T.me/dentcast</p></div>

Complete Removable Overdentures: Implant Configuration and Retention

Module Summary

Mandible

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2 to 4 implants placed in interforaminal region

Attachment selection: Based on type of overdenture support desired and planned

Tissue/implant-supported

Implant-supported

Individual attachments

Splinted attachments

Individual attachments

Splinted attachments

Stud attachments, magnets, telescopic attachments without complete distal support

Bar on 2 implants without complete distal support

Telescopic attachments on ≥ 4 implants, affording complete distal support

Bar with complete distal support

Complete Removable Overdentures: Implant Configuration and Retention

Module Summary

Maxilla

4 or more implants placed in canine and first molar region

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Attachment selection: based on desired/planned type of overdenture support

Tissue/implant-supported

Implant-supported

Individual attachments

Splinted attachments

Individual attachments

Splinted attachments

Stud attachments, magnets, telescopic attachments without complete distal support

Bar without complete distal support

Telescopic attachments on >4 implants, affording complete distal support

Bar with complete distal support