



Zdrav paradoncijum – ključ dobre fiksne protetike

Healthy peridontium – the key of quality prosthetics

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Apstrakt

Današnja stomatološka praksa je sve više okrenuta ka estetici. Sve češće nam se pacijenti obraćaju usred nezadovoljstva svojim osmehom. Naravno savremena stomatološka protetika nudi širok dijapazon rešenja i materijala za postizanje vrhunske estetike. Na žalost od današnje stomatologije očekuju što brže rešenje, pa se neretko desi da se pristupi izradi estetskih nadoknada bez adekvatne pripreme.

Parodontopatija kao najčešće oralno oboljenje i predstavlja jedan od razloga javljanje pacijenata na pregled. Često čujemo da se pacijentima ne sviđa to „što su im se povukle desni”. Razlog tome je naravno parodontopatija i mukogingivalne anomalije. Svakodnevno se u praksi susrećemo sa radovima kojima je pokušano „maskiranje” ovakvih funkcionalno estetskih nedostataka.

Ovakvim pristupom i pravljenjem kompromisa sa pacijentima nailazimo na niz problema u toku samog rada i na veliki broj postoperativnih komplikacija. Usled neadekvatne terapije i odsustva preprotetske pripreme nailazimo na nemogućnost uzimanja dobrog otiska što dovodi do neadekvatne protetike i samim tim do jatrogeno izazvanih oboljenja mekih tkiva.

Samo zdrav paradoncijum i pravilno pripremljen gingivalni sulkus daju dobru osnovu za precizan otisak, dobre protetske radove i samo tako ćemo ispoštovati osnovni postulat „*Primum non nocere*”.

Abstract

Today's dental practice is increasingly oriented towards aesthetics. More and more often, patients ask for help in the middle of dissatisfaction with their smiles. Of course, modern dental prosthetics offer a wide range of solutions and materials to achieve superior aesthetics. Unfortunately, a solution is expected as soon as possible, so it often happens that aesthetic restorations are made without adequate preparation.

Periodontitis is the most common oral disease and it is one of the reasons why patients set up appointments. We often hear that our patients do not like that “their gums have receded”. The reason for this is of course periodontitis and mucogingival anomalies. Every day in practice we come across works that try to “cover” such functional and aesthetic shortcomings.

With this approach and making compromises with patients, we encounter a number of problems during the work itself and a large number of postoperative complications. Due to inadequate therapy and the absence of orthodontic preparation, we encounter the impossibility of taking a good impression, which leads to inadequate prosthetics and thus to iatrogenic soft tissue diseases.

Only a healthy periodontium and a properly prepared gingival sulcus provide a good basis for an accurate print, good prosthetic works, and only in this way will we respect the basic postulate “*Primum non nocere*”.