**The Safe and Simple way to Treat Worn Teeth and Bruxist Patients:**

from the diagnosis to the restoration

The percentage of patients with eroded teeth (bruxist patients, clenching patients, bulimic patients etc.) has dramatically increased during last decades. Before the beginning of any therapy aimed at restoring a presumably altered occlusal balance, a **careful diagnosis** and a **proper treatment plan** definition appear of paramount importance. This process requires a first step, for the new mandibular position setting, and a second step, for the final prosthetic rehabilitation.

Within the lecture, appropriate procedures for the occlusal diagnosis, condyle position evaluation and jaw repositioning will be shown step by step directly on patients.

In the second part of lecture so defined “additive” prosthodontics will be shown. This approach allows to restore dental structures which have been lost without further sacrifice of the remaining sound tissues. On the other hand, the traditional prosthetic procedures should be defined “resective”, as they require an extensive sacrifice of sound tissues in order to properly restore even one single tooth.

“Additive” techniques show several advantages compared to “resective” ones, specially for the rehabilitation of Eroded Teeth patients. They allow the maximum preservation of sound tissues with many advantages in terms of physical properties of the single tooth and occlusal balance, generally preventing unnecessary endodontic treatments; they avoid detrimental periodontal interferences, as tooth-restoration margins are safely kept supra-gingival; they are easier and quicker; they have better long term predictability; they are cheaper.

**Bezbedan i jednostavan način sanacije abradiranih zuba i pacijenata sa bruksizmom:**

od dijagnoze do izrade nadoknade

Procenat pacijenata sa erodiranim zubima (pacijenti sa bruksizmom, pacijenti koji stiskaju zubima, pacijenti sa bulimijom itd.) dramatično je povećan poslednjih decenija. Pre početka bilo kakve terapije koja ima za cilj uspostavljanje verovatno izmenjene okluzalne ravnoteže, pažljiva dijagnoza i definisanje adekvatnog plana terapije su od najvećeg značaja. Ovaj proces zahteva dva koraka, postavljanje mandibule u novu poziciju i konačnu protetsku rehabilitaciju.

U okviru predavanja korak po korak biti prikazane odgovarajuće procedure za dijagnozu okluzije, procenu položaja kondila i repoziciju donje vilice. U drugom delu predavanja biće prikazani principi „aditivne“ stomatološke protetike. Ovaj pristup omogućava nadoknadu izgubljenih zubnih tkiva bez daljeg žrtvovanja preostalih tkiva. S druge strane, tradicionalne protetske procedure treba definisati kao „resektivne“ jer zahtevaju izrazito žrtvovanje zdravih tkiva kako bi se pravilno nadoknadio čak i samo jedan zub.

„Aditivne“ tehnike pokazuju nekoliko prednosti u odnosu na „resektivne“, posebno kod rehabilitacije pacijenata sa erodiranim zubima. One omogućavaju maksimalno očuvanje zdravih tkiva kao i brojne prednosti u pogledu fizičkih karakteristika pojedinačnog zuba i okluzalne ravnoteže, sprečavajući nepotreban endodontski tretman; izbegavaju oštećenja parodontalnih tkiva pošto se ivice zubne nadoknade bezbedno formiraju supragingivalno; lakše su i brže; imaju bolju dugoročnu predvidljivost; jeftinije su.