



Ensuring Maximum Patient Comfort in the Use of Fixed Bridge-Like Prostheses

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Abstract: One of the primary objectives of modern orthopedic dentistry is not only the functional restoration of teeth but also the improvement of patients' overall quality of life. In this regard, fixed (non-removable) bridge-like prostheses have gained wide application in recent years due to their aesthetic and functional advantages. Such prostheses provide mechanical durability, biocompatibility, and high aesthetic outcomes in the restoration of dental defects.

The concept of "patient comfort" refers to the optimal provision of factors such as mastication, speech, esthetic appearance, and psychological well-being during prosthesis use. Achieving this goal requires accurate diagnosis, individualized treatment planning, selection of biocompatible materials, and prosthesis design based on anatomical and functional principles.

➤ The essence and types of fixed bridge-like prostheses

Fixed bridge-like prostheses are stable orthopedic constructions used to restore one or several missing teeth by being attached to adjacent abutment teeth or implants.

Main types include:

➤ Tooth-supported bridge prostheses:

- ✓ Classic variant: Adjacent healthy teeth serve as abutments.
- ✓ Example: In the loss of one tooth, a bridge is constructed using two neighboring teeth as supports.

➤ Implant-supported fixed bridges:

- ✓ The most advanced and biocompatible option for tooth replacement.
- ✓ Since the implant is fixed within the bone, occlusal load is distributed more evenly across the periodontium.

➤ Micro-prostheses (inlays, onlays, veneers):

- ✓ Applied in cases where only part of the tooth structure is lost.
- ✓ Main advantage — minimal invasiveness combined with superior esthetics.

Advantages:

- ✓ High stability and durability
- ✓ Aesthetic harmony with natural teeth
- ✓ Psychological comfort — the patient perceives the prosthesis as their "own tooth"
- ✓ Natural restoration of chewing and speech functions
- ✓ Long-term use (up to 10–20 years)



➤ Factors Affecting Patient Comfort

Patient comfort during prosthesis use depends on several key factors:

a) Functional factors:

- ✓ Balanced occlusal contacts (equal distribution of masticatory pressure)
- ✓ Chewing forces adapted to the prosthesis' load-bearing capacity
- ✓ Natural restoration of speech, swallowing, and facial movements
- ✓ Preservation of physiological loading on the temporomandibular joint (TMJ)

Significance: Improper occlusion and masticatory imbalance may lead to prosthesis fracture, pain, and muscle spasms.

b) Esthetic factors:

- ✓ Harmony of tooth shape, size, and color with natural dentition
- ✓ Symmetry of the gingival contour
- ✓ Maintenance of translucency, luster, and optical depth, especially in the anterior region
- ✓ Proper support of lips and cheeks

Modern approach: Digital “smile design” technology allows for esthetic planning that aligns with the patient's facial features.

c) Biological factors:

- ✓ Preservation of abutment teeth and periodontal tissue health
- ✓ Even distribution of periodontal load
- ✓ Maintenance of oral microbial balance
- ✓ Use of biocompatible materials that do not irritate the oral mucosa

If this balance is disrupted, complications such as gingivitis, peri-implantitis, tooth root resorption, and biofilm accumulation may occur.

d) Psychological factors

- ✓ Ability of the patient to speak and smile freely in social settings
- ✓ Increased self-confidence and esthetic satisfaction
- ✓ Reduction in the “foreign body sensation”
- ✓ After a period of adaptation, the patient perceives themselves as “fully dentate”

According to research, more than 80% of patients who receive fixed prostheses report a significant improvement in their quality of life, as measured by the OHIP-14 and VAS indices.

➤ Clinical and technological principles for ensuring comfort

To ensure maximum patient comfort, the following stages are of critical importance:

1. Accurate diagnosis and planning

- Clinical examination, panoramic radiography, CBCT, and digital 3D modeling are employed.
- Occlusal analysis and articulator measurements help evaluate the natural trajectory of mandibular movements.

2. Material selection

- Zirconium oxide – biocompatible, mechanically durable, and highly esthetic.



- e.max (lithium disilicate ceramic) – ideal for anterior restorations due to its translucency and gloss.
- Metal-ceramic – suitable for posterior regions with high masticatory load.
- Titanium-based frameworks – biocompatible and lightweight options for implant-supported systems.
- 3. Ergonomic design
 - Prosthetic contours are harmonized with tongue, lip, and cheek movements.
 - Contact points and contour lines must not compromise periodontal health.
- 4. Use of digital technologies
 - CAD/CAM systems enable higher precision and esthetic quality, thereby shortening the patient's adaptation period.
- 5. Postoperative care and follow-up
 - Regular clinical examinations and professional hygiene procedures every six months ensure prosthesis longevity.

Indicator	Evaluation Method
Masticatory efficiency	Masticatory Function Index (MFI)
Speech and phonation	Acoustic analysis, speech therapy assessment
Esthetic satisfaction	VAS (Visual Analogue Scale), OHIP-14 (Oral Health Impact Profile)
Discomfort and pain	Subjective questionnaires and clinical examination

Clinical experience demonstrates that properly planned and technologically precise fixed prostheses significantly enhance patients' quality of life, ensuring both functional and psychological comfort. The success of fixed bridge-like prostheses is measured not only by esthetic outcomes but also by the degree of patient comfort achieved. Therefore, modern prosthodontics emphasizes the use of biocompatible materials, individualized treatment planning, maintenance of occlusal balance, and regular follow-up care.

When appropriately designed and executed, fixed prostheses restore natural masticatory function, facilitate speech, improve esthetics, and strengthen social self-confidence. Thus, the ultimate goal of orthopedic dentistry extends beyond tooth restoration — it aims to maximize the patient's overall quality of life.

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Summary

Ensuring maximum patient comfort in the use of fixed bridge-like prostheses Huseynova C.B., Babayev E.E., Akhundov Y.H.

The main goal of modern orthopedic dentistry is not only the functional restoration of teeth but also the improvement of the patient's overall quality of life. In this regard, fixed (non-removable) bridge-like prostheses have become widely used in recent years due to their aesthetic and functional advantages.

These prostheses are fixed orthopedic constructions attached to abutment teeth or implants in cases of one or several missing teeth. The main types include conventional bridges supported by natural teeth, implant-supported fixed bridges, and micro-prostheses (inlays, onlays, veneers).

The concept of "patient comfort" refers to ensuring optimal levels of chewing, speech, aesthetic appearance, and psychological well-being during prosthesis use. Factors influencing this comfort include functional (balanced occlusal contacts, mechanical stability), aesthetic (shape, color, translucency), biological (health of abutment teeth, maintenance of oral microflora balance), and psychological (self-confidence, social ease) aspects.

Ensuring maximum comfort requires accurate diagnosis, the selection of biocompatible materials (such as zirconium oxide, e.max ceramics, metal-ceramic, or titanium-based structures), ergonomic design, and the use of digital technologies (CAD/CAM). Regular follow-ups and professional oral hygiene every six months help extend the lifespan of the prosthesis.

Patient comfort is assessed through indicators such as chewing efficiency, absence of speech alterations, aesthetic satisfaction, and lack of pain or discomfort. In conclusion, properly planned and technologically precise fixed prostheses significantly enhance the patient's functional and psychological comfort, thereby improving overall quality of life.