INSTRUCTIONS FOR PROPER IMMEDIATE DENTURE
POST OP INSTRUCTIONS

• Leave denture in until next morning after surgery.

• Beginning the next day, remove it after meals for cleaning.

• Rinse your dentures after eating to remove food particles.

• Brush dentures at least once daily with a denture brush and toothpaste. After removing the denture, brush both sides (inside and outside). Brush your denture over a folded towel or in a sink full of water to prevent damage if you drop it.

• After about 4 days, gently brush the gums with the same brush

• A denture soaking solution can be used periodically to remove stains and odor. Soak in denture cleaner per manufacturer’s instructions. Do not use products containing bleach.

• If you remove your dentures, always store them in a container with a little water.

• A denture adhesive may be used, per manufacturer’s instructions, after complete healing as confirmed by surgeon. Do not use adhesives for at least 2 weeks after extractions

• Schedule a dental maintenance appointment at least once a year for professional cleaning of dentures and doctor evaluation of gum tissue.

• Please refer to our ‘Frequently Asked Questions’ for more information on denture wear and maintenance

If you have further questions or concerns, please call the office at 843-342-8890.
DENTURES – Frequently Asked Questions

Will chewing and speaking be different?
Initially they may. At first you might find it hard to chew and speak since you have something in your mouth that you are not accustomed to. This is normal. You may also have a tendency to salivate more. As time passes, your tongue will get used to the appliance and the spaces that have been filled.

When you first receive your new denture, you may start with a soft or liquid diet, also cutting food in smaller bites might help. Be sure to avoid sticky or hard foods. Your dentures might need adjustments, especially if you develop sore spots. Call our office for an appointment if you develop any sore spots.

How long will it take to get used to replacement teeth?
Every patient is different. Some patients adapt immediately. For others, it may take a little longer. It is normal for there to be an accommodation process. Be patient. Please call the office if you need further instruction during this process.

Patients who choose to undergo full extractions and have immediate dentures placed should leave the dentures in until the postoperative appointment, which is usually 24 hours after delivering the immediate dentures. During healing, the dentures should be left in most of the time because the immediate denture acts as a 'bandage', giving support to the oral tissues as they heal.

Immediate dentures require relining within four to six months. This is to accommodate the space created by shrinkage of the supporting bone and gums during healing.

You may prefer to remove the dentures at bedtime. Remember however, if the denture is removed, it must not be allowed to dry out as this causes shrinking or distortion of the material causing ill fitting. Place the removable denture in a small amount of water until ready to return the denture to your mouth.

Should denture adhesive be used?
Denture adhesive may be required if your gum ridge is very compromised or flat. A well-fitting upper denture will adhere to the oral tissues with the natural aid of saliva and suction.

- Rinse your dentures after eating to remove food particles.
- Using a soft denture brush and mild liquid soap or denture toothpaste, brush your denture over a folded towel or a sink full of water. That way, it won't be damaged if you drop it.
- Soak your denture in denture cleaner per manufacturer’s instructions to help prevent staining and odor. Do not use products containing bleach.
Guidelines for the care and maintenance of dentures

1. Careful daily removal of the bacterial biofilm present in the oral cavity and on complete dentures is of paramount importance to minimize inflammation and to help contribute to good oral and general health.

2. To reduce levels of biofilm and potentially harmful bacteria and fungi, patients who wear dentures should do the following:
   (a) Dentures should be cleaned daily by soaking and brushing with an effective, nonabrasive denture cleanser.
   (b) Denture cleansers should ONLY be used to clean dentures outside of the mouth.
   (c) Dentures should always be thoroughly rinsed after soaking and brushing with denture-cleansing solutions prior to reinsertion into the oral cavity. Always follow the product usage instructions.

3. Dentures should be cleaned annually by a dentist or dental professional using ultrasonic cleansers to minimize biofilm accumulation over time.

4. Dentures should never be placed in boiling water.

5. Dentures should not be soaked in bleach, or in products containing bleach, for periods that exceed ten minutes. Placement of dentures in bleach containing solutions for periods longer than 10 minutes may damage dentures.

6. Dentures should be stored in a small amount of water after cleaning, when not replaced in the oral cavity, to avoid warping.

7. Denture adhesives, when properly used, can improve the retention and stability of dentures and help seal out the accumulation of food particles beneath the dentures, even in well-fitting dentures.

8. Improper use of zinc-containing denture adhesives may have adverse systemic effects. Therefore, as a precautionary measure, zinc-containing denture adhesives should be avoided.

9. Denture adhesive should only be used in sufficient quantities (three or four pea-sized dollops) on each denture to provide sufficient added retention and stability to the prostheses.

10. Denture adhesives should be completely removed from the denture and the mouth on a daily basis.

11. If increasing amounts of adhesives are required to achieve the same level of denture retention, the patient should see a dentist or dental professional to evaluate the fit and stability of the dentures.

12. Patients who wear dentures should be checked annually by the dentist, prosthodontist, or dental professional for maintenance of optimum denture fit and function, for evaluation for oral lesions and bone loss, and for assessment of oral health status.

Excerpts of an article from Journal of Prosthodontics, Volume 20, Issue Supplement s1, pages S1–S12, February 2011.