

Aftercare Instructions after placement of an immediate denture

After extractions do not spit, rinse, smoke, or suck through a straw. Avoid hot or carbonated beverages. These things can impair healing of the surgical site.

For the first 24 hours do not remove the immediate denture from your mouth. If removed, swelling may occur and make it difficult or impossible to replace the denture. Oozing of blood around the denture is normal. Your immediate denture will act to protect the surgical site and control swelling and bleeding.

Do not rinse your mouth for 24 hours. After 48 hours, you can begin gently rinsing your mouth with lukewarm salt-water. (1/2 teaspoon of table salt in an 8 oz. glass of warm water) Rinse 3-4 times each day for 5 days after meals and during your routine oral hygiene regimen. Do not strain your mouth or spit with force.

Take all medications as prescribed. Pain level and intensity vary depending on several factors. Some pain and discomfort are expected following oral surgery procedures.

Swelling is common after oral surgery for up to one week with the maximum amount of swelling usually present 2-3 days after surgery. The swelling will slowly resolve over 4 to 7 days. Apply an ice pack to the outside of the face for 15-20 minutes and then leave off for 15-20 minutes. Repeat for 24 hours then discontinue using the ice. This will reduce discomfort, bleeding, and swelling.

Soft foods that don't require chewing for the first few days are recommended. Avoid hard or crunchy foods. Drink plenty of water, but do not go on a liquid diet. It is recommended to substitute some meals for protein shakes such (ex. Ensure, Boost, Muscle Milk) which can help promote healing. Avoid strenuous activity for the first 24-48 hours. You may resume normal physical activity, as tolerated, 2-3 days after your surgery.

You can visit our website for copies of these forms at www.shanesmithdds.com

If you have any questions, please feel free to call us at 870-932-2644, text us at 888-936-9193 or email us at office@shanesmithdds.com

What to expect from your new immediate denture

- **UPPER DENTURE FIT** – Your new denture may feel awkward or bulky. This is normal, and you will eventually become accustomed to wearing it. Initially, you may be asked to wear your dentures all the time. Although this may be uncomfortable at first, it's the quickest way to identify areas that may need adjustments. Speech may sound slurred or lisped which is also to be expected as the roof of your mouth is now occupied with more material from the denture. This creates the seal (similar to a suction cup) needed to keep the dentures in place when speaking, eating and functioning in the denture. The use of speech phonics work well. We recommend practicing speaking out loud things that you would normally read quietly. This could be news articles, books or magazines, or even food packaging or instruction manuals. Saying your "S" sounds, particularly the numbers 60-70 in a sequential order several times over the next few weeks will really help re-train your tongue. It is a muscle like many parts of the body and can and will get used to its new "neighbor".
- **LOWER DENTURE FIT** – Unlike upper dentures that has the entire roof of the mouth to provide surface area for retention, your lower denture relies solely on your jaw to keep it in place. This is due to tongue space limiting the surface area to which the denture can rest. This means lower dentures are less retentive and stationary, without natural teeth or implants to use as support. Therefore, if restoring natural teeth as anchors is not an option, implant-supported lower denture is recommended. However, if this is not a viable option for you, you may need denture adhesives to keep the lower in place to minimize rocking, shifting, and/or dislodging during function. Your tongue will also need some retraining with a lower denture. Your "L" and "R" sounds are good sounds to practice getting used to them. Here are some examples of tongue twisters to try and practice with (Red lorry, yellow lorry) (Rory's lawn rake rarely rakes really right) (Lessening levels of lead really lures lily pads)
- **DENTURE TEETH** – Since full dentures rely on soft tissue (not teeth or bone) for support, the denture teeth are limited in what they're capable of in terms of function. Front teeth are for esthetics and speech more so than for chewing. If you have both upper and lower complete dentures, it is recommended that you rely on back denture teeth only for chewing (see Diet section for details). Attempting to use the front denture teeth to bite a sandwich, for example, may lead to dislodging the dentures out of your mouth as they are not anchored to anything but soft tissue and so it can move when too much pressure is applied to the front rather than back. Properly cutting up your food can help overcome these changes to your eating habits.
- **SORE SPOTS** – If the denture puts too much pressure on a particular area, that spot will become sore. Dr. Smith and his team will adjust the denture to fit more comfortably. After each adjustment we make, we may recommend that you take denture out of the mouth before going to bed and replace it in the morning to allow for the sore areas to heal. The use of warm salt water (1/2 tsp of salt in 8oz glass of warm water) can also alleviate these areas with use for a few days after adjustments.

- **DIET** – Denture teeth are different from natural teeth in that they rest on your gums (soft tissue) rather than anchored to your jaw (hard tissue). It is estimated that natural teeth can withstand 6x or more chewing force compared to denture teeth. As a result, chewing function is significantly diminished compared to that of nature teeth. Eat soft foods and cut foods into small pieces before placing them on the back denture teeth for chewing. Attempting to use front denture teeth may result in dislodging it from the mouth. Avoid sticky and hard foods. Always thoroughly rinse the denture before placing it in your mouth after each meal. You will be provided with a denture cleaning kit you can use the denture brush and warm water, and liquid hand soap to clean as well after meals if food is still present after rinsing.

- **SPEECH** – If you find it difficult to pronounce certain words, practice reading out loud. Repeat the words that give you trouble. With time, you will become accustomed to speaking properly with your denture. This will be something that again, over time will become more natural and you just need to spend time using speech phonics to retrain your tongue. We recommend practicing speaking out loud things that you would normally read quietly. This could be news articles, books or magazines, or even food packaging or instruction manuals.

For upper dentures, saying your “S” sounds, particularly the numbers 60-70 in a sequential order several times over the next few weeks will really help re-train your tongue. It is a muscle like many parts of the body and can and will get used to its new “neighbor”.

For lower dentures, your “L” and “R” sounds are good sounds to practice getting used to them. Here are some examples of tongue twisters to try and practice with (Red lorry, yellow lorry) (Rory's lawn rake rarely rakes really right) (Lessening levels of lead really lures lily pads)

- **HOME CARE** – Remove dentures when going to sleep, always. Massage your gums nightly to improve blood circulation after wearing your denture during the day. The use of a soft toothbrush on the gums will accomplish this and can be done with or without toothpaste or your favorite mouthwash. Clean your dentures daily to avoid permanent stain formation and plaque buildup. A denture could lose its proper shape if it is not kept moist so do not allow it to become bone dry. Store them in a case with some water to keep it moist. Clean it with dishwashing or hand soap and fingers or soft bristled denture toothbrush. Do not use toothpaste, it is too abrasive for the acrylic material and can cause micro holes to form which can trap bacteria and stain. Look for denture cleansers with the American Dental Association Seal of Acceptance at your local store or online. A denture toothbrush has two brush heads, one long, traditional shape, and one that is pointed to get into the nooks and crannies of the teeth and inside of the denture mold. Again, soap and water are the only thing that should be used on a denture. Our motto is “If it stays IN the mouth, toothpaste is allowed; if it comes OUT of the mouth, soap is to be used”

ADJUSTMENTS, RELINE, AND REPLACEMENT:

Over time, adjusting the denture may be necessary. As you age, your mouth naturally changes, which can affect the fit of the denture. Your bone and gum ridges can recede or shrink, resulting in a poorly fitting denture. For newer dentures, adjustments and relines typically help. Please note that, like most appliances, dentures too may need to be replaced periodically as your body changes.

Dentures that do not fit properly should be adjusted by your dentist. Poorly fitting dentures can cause various problems, including sores or infections or improper digestion which, can lead to other health issues. See your dentist promptly if your denture becomes loose, and maintain your regular visits, too. Even if you no longer have natural teeth, or if you have implants, or some teeth remain, having them cleaned and examined at least once per year is recommended as prevention for decay or infection and to evaluate for any signs of oral cancer which can occur in about 1 in 60 people. If you have insurance, they may also cover for those exams and cleanings in addition to any follow up x-rays we may take.

Remember: You can do serious harm to your denture and to your health by trying to adjust or repair your denture. Using a do-it-yourself kit can damage the appliance beyond repair. If your denture breaks, cracks or chips, or if one of the teeth becomes loose, call your dentist immediately. In many cases, dentists can make necessary adjustments or repairs, often on the same day. Complicated repairs may require that the denture be sent to a special dental laboratory or require a replacement.

Scaling and Root Planing (SRP)/Deep Cleaning/Gum Therapy

Scaling and Root Planing (SRP) therapy is necessary to stop the progression of periodontitis. After the procedure, it is normal to experience mild discomfort and/or sensitivity. The most common complaints are slight tenderness of the gums and tooth sensitivity to cold temperatures. It is also common to have some discomfort where the injections were given. Discomfort from the injection sites and tenderness in the gums usually resolves within a day or so. Sensitivity may persist for a few days to a few weeks. Some helpful reminders to resolve these issues are:

1. Be careful eating while you are still numb. Try to avoid chewing or biting on the area you are numb in to avoid biting your tongue, lip, or other tissues. Also be careful when eating or drinking hot beverages so that you do not burn yourself.
2. Take Tylenol or acetaminophen after procedure for 24 hours following treatment to prevent discomfort. An anti-inflammatory such as Advil or ibuprofen should suffice also.
3. Use warm saltwater rinses (1 tsp. Salt per 8 oz. of water) several times per day for up to one week can help to soothe and promote healing.
4. It is important to develop a daily regimen and to be diligent to keep your mouth healthy and to prevent the progression of periodontal disease. You should floss daily as well as brush at least two times per day to remove plaque and bacteria.
5. Refrain from smoking for 24-48 hours after the procedure to ensure healthy healing of gum tissues.
6. After the procedure, swelling, redness, and inflammation will resolve, and the gums will ideally shrink and tighten. After removal of calculus and bacteria along with the healing

process, more tooth structure may be noticeable, which is normal, but may not be what you are accustomed to seeing.

7. Follow up at your next appointment to finish any outstanding treatment to continue your journey to a healthy mouth.
8. It is recommended to follow up with your routine cleaning appointments every 3–4 months to maintain and prevent periodontal disease.

Sensitivity

Tooth sensitivity is common after treatment and usually resolves within 1–2 weeks.

- Avoid extreme temperatures when eating and drinking while teeth are sensitive.
- An over-the-counter sensitive toothpaste such as Crest Densify ®, Sensodyne ®, and Colgate Sensitive ® can help alleviate sensitivity when used 2–3 times per day. You may also leave a small amount of toothpaste without rinsing for desensitizing.
- A prescription toothpaste such as Clinpro ® may also be recommended by your dental professional.

If sensitivity or discomfort persists, please call Shane Smith DDS at 870–932–2644. Dr. Smith and our team are committed to providing quality dental care for all of our patients.