

Longevity of a Maxillary 2-Unit Cantilever Fixed Partial Denture: Clinical Report

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SOMMAIRE

Dans ce rapport clinique, nous discutons de la durée de vie et du remplacement d'une prothèse partielle fixe antérieure supérieure à 2 unités, de type cantilever. Le patient a porté sa prothèse partielle fixe pendant 53 ans avant de la remplacer par une prothèse céramo-métallique à 2 unités. Dans la prothèse initiale, l'incisive latérale supérieure manquante avait été remplacée en utilisant une couronne métallique partiellement recouverte. La nouvelle prothèse céramo-métallique a été conçue avec une couronne complètement recouverte.

Mots clés MeSH : biomechanics; dental abutments; dental restoration failure; denture, partial, fixed

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Cet article a été révisé par des pairs.

Cantilever fixed partial dentures (FPDs) are considered a viable choice in restorative dentistry when treatment is planned carefully and the prosthesis is designed appropriately under favourable intraoral conditions. Several publications have discussed the designs, indications, success factors, advantages and disadvantages of the various types of cantilever FPDs.¹⁻⁶ Stelzel and others⁷ investigated the influence of cantilever FPDs on periodontal health and concluded that they are not different from conventional FPDs when oral hygiene is maintained and closely monitored.

The use of a 2-unit cantilever FPD to replace the maxillary lateral incisors using the canine as a single abutment is recommended.^{2,3} The design considerations of this specific FPD are described by Goldfogel and Lambert.⁸

The longevity of anterior 2-unit cantilever prostheses is not widely covered in the dental literature. In investigating the failure of fixed prosthodontics, a few studies have briefly mentioned the lifespan or years of service of cantilever FPDs⁹ without describing their design

or location in the oral cavity.¹⁰⁻¹² Roberts¹³ elaborates on the failure of cantilever retainers in a study of 2,000 retainers. One review paper¹⁴ discusses cantilever FPDs thoroughly and a second¹⁵ discusses FPDs as part of a review of failure in fixed prosthodontics. The purpose of this clinical report is to present the years of service and replacement of a maxillary anterior cantilever FPD.

Clinical Report

A 75-year-old patient had a cantilever FPD that had replaced a left maxillary lateral incisor using the left canine as a partly covered abutment. The FPD, which had been in service for an amazing period of 53 years, required replacement due to formation of mesial marginal caries (Fig. 1). The patient was examined and treated in the department of dentistry at the University of Alberta. Clinical examination was carried out and resulted in treatment plan options that included the replacement of the existing cantilever prosthesis with a 2-unit or 3-unit complete coverage prosthesis.



Figure 1: Recurrent caries in the mesial abutment area of the 2-unit cantilever restoration.

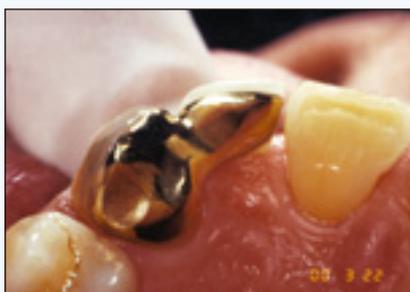


Figure 2: Palatal view of the 53-year-old fixed partial denture.



Figure 3: The new 2-unit complete-coverage porcelain-fused-to-metal fixed partial denture.

Figure 2 shows a palatal view of the original FPD. The design had 2 classical features of the era: enlarged connector size and decreased labio-palatal dimension of the gold-resin pontic.

A 2-unit porcelain-fused-to-metal (PFM) FPD using a complete-coverage retainer was made as a replacement (**Fig. 3**) with a retentive groove placed along the mesial surface of the canine.

Discussion

Years of Service of the Original Prosthesis

The interesting part of this clinical report is the lifespan of the original cantilever prosthesis. A prosthesis that has become unserviceable after 53 years cannot truly be considered a failure.^{10,15}

There are no longitudinal data in the dental literature that deal specifically with the longevity of 2-unit maxillary anterior cantilever restorations. However, as part of studies of restorative failure or years of service, a few report the longevity of 2-unit cantilever FPDs without information on their location or design. In a study that involved 406 patients with unserviceable FPDs during a 3-year period, Schwartz and others¹⁰ report that 20 2-unit cantilever prostheses had a mean service period of 14.9 years, which was longer than the mean of all FPDs (11.2 years) and 32 2-unit splint cantilever prostheses (13 years). This indicates that splinting retainers in cantilever prostheses may not necessarily increase their longevity. Antonoff² suggests adding the premolar as a splinted retainer to replace a missing incisor, even though the canine can be used as a single retainer in ideal situations.

In a study similar to that of Schwartz and others, in 1986 Walton and others¹¹ reported that 9 2-unit FPDs had a mean length of service of only 3.7 years — the shortest period among all restorations examined. It was pointed out, however, that the small sample size prevented further extrapolation of these figures. The mean length of service for all FPDs in that study was 7.7 years. In another study, Cheung and others⁹ recalled and examined 143 patients with 169

FPDs of which 15 were the cantilever type. Of these 15, 11 were anterior prostheses and 3 replaced the canine. Two out of the 3 cantilever FPDs that replaced maxillary canines failed technically (fractured porcelain and fractured abutment tooth). The authors, therefore, concluded that replacement of canines, particularly in the upper arch, with a cantilever bridge was contraindicated. Finally, Roberts¹³ indicated an acceptable failure rate where anterior three-quarter crowns (retainers) were used in fixed removable and cantilever bridges. The failure rate of 1.63% a year was lower than the failure rate of all types of anterior retainers at 3.49% a year.

Reasons for Failure

Recurrent caries that formed at the mesial margin of the retainer was the reason for failure of the FPD reported here. The caries was not extensive, but large enough to justify removal of the prosthesis rather than repair. This is particularly interesting as loss of retention or gingival irritation beneath the pontic was not the cause of failure as one would expect in such restorations, especially when a partial coverage retainer was used.

Caries and loss of retention have been among the major causes of failure in fixed prosthodontic treatment. Although marginal caries account for failure rates ranging from 14.9% to 36.8%, loss of retention (or loose retainer) account for 12.1% to 27% of the failures studied.^{10–12,16}

The original FPD was solid despite the recent caries. The patient was happy to have it replaced with a similar prosthesis; however, the patient chose complete coverage this time to enhance the esthetics. Additional design features included subgingival labial margins and a mesial retentive groove.

The Role of Occlusion and Periodontal Health

Because the success of the cantilever FPD depends largely on proper occlusion and the health of the supporting periodontium and abutment teeth,^{2,5,6,14} the clinical assessment was consistent with these recommendations. The vital abutment tooth had healthy periodontal and alveolar supporting tissues, favourable root length and morphology,

favourable crown-to-root ratio and sufficient clinical crown length.

The occlusion of the new cantilever prosthesis excluded any contacts on the pontics in protrusion and lateral excursion.^{3,14}

Conclusion

The longevity and replacement of a maxillary 2-unit cantilever FPD is presented in this clinical report. The length of service of the prosthesis was 53 years. The original retainer consisted of partial palatal coverage, whereas the replacement prosthesis was designed with complete coverage PFM material. ♦

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