Dentures

Q. I have no choice but to get dentures. What can I do to get the best effect?

A. There are many factors which contribute to a satisfactory experience with dentures. The amount of remaining supporting bone, the quality of the tissue in the mouth and the amount of saliva are all important. Frequently, Sjögren’s syndrome patients have difficulty with dentures because they lack sufficient moisture for good retention of the prostheses, the tissues are thin or sore and there has been bone loss, leaving a minimal bony ridge for support. However, in spite of these potential obstacles, you can obtain the optimal result by working with your dentist and taking steps to avoid problems.

You should explore the possibility of getting an implant-supported denture, particularly for the lower jaw. Metal implants are placed into the jaw bone and then a denture can be fixed to them. There are a number of implant options available. While there have not been large, well-controlled clinical studies, small case series and clinical experience suggest that Sjögren’s syndrome patients do as well with implants as non-Sjögren’s individuals. This is an expensive option – and it may not be possible to do in certain persons depending on the clinical condition – but it is worth exploring. Most patients who have received implant-supported dentures have had good experiences and achieve a high level of function. You should find a practitioner who is experienced with implants and understands Sjögren’s syndrome.

If you will have a conventional, tissue-supported denture, you should first be certain that your mouth is in optimal health. (Of course, this is true for implant-supported dentures as well.) Candidiasis (a fungal infection of the mucosa) is common in Sjögren’s syndrome. If that is present, it should be treated first and the tissues allowed to heal fully before denture construction. Oral surgery may be necessary to create a more favorable bone and tissue condition. Working with your dentist and physician, attempt to maximize your salivary function and keep your mouth moist. If the tissues are thin or sore where the denture will rest, a soft lining material may be used in the denture to improve comfort. However, this is only a short-term solution, as the relining material will need to be replaced often. Care should be taken in initial placement and adjustments of the denture to avoid sore spots or other irritations. Good communication with your dentist is critical.

One other consideration is that dentures may be a source of fungal re-infection in the mouth. Dentures should be removed and cleaned well daily and soaked in an anti-microbial solution overnight to prevent infection. Any lining materials may be an additional site for fungal species to accumulate. Although there are potential problems for Sjögren’s syndrome patients receiving dentures, with careful preparation and attention to detail you will likely have a good outcome.

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