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*The National Society of Dental Practitioners and the Dentist's Advantage Insurance Program for Dentists*

## **RISK MANAGEMENT ARTICLE**

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### **Preventing liability from ill-fitting dentures**

Ms. Alexander, your 78-year-old patient whom you fitted with a partial denture several weeks ago, comes to your office saying, "I'm tired of these sores in my mouth hurting." On examination, you find two sores, one with a radius of 2 cm, the other with a radius of 1 cm. Ms. Alexander is upset and wants to sue you for the injuries caused by her ill-fitting prosthetic. Does she have a case?

The answer is "It depends." If you have properly prepared Ms. Alexander, fitted the prosthetic with care, provided education, and now act promptly to document and manage her problem, you will likely have protected yourself from a successful lawsuit.

#### **The problem of "ill fit"**

About 26 percent of people in the United States between the ages of 65 and 74 are edentulous, and many more have issues that require partial dental prostheses. Although the incidence of edentulism has been declining, a rapidly aging population means that the number of people needing complete or partial dentures is likely to stay stable or even increase.

One of the most common complaints that patients with dentures have is a poor fit. A Google search of "ill-fitting dentures" turns up 809,000 results, including patient complaints, information from dental practices, videos, and, significantly, information from attorneys about legal cases.

A poor fit can cause pain for the patient, as well as more serious complications such as denture stomatitis (often associated with the presence of *Candidia* species) and malnutrition because of a reduced ability to chew. Furthermore, some patients who used excessive amounts of denture cream in an ill-advised attempt to fix their fitting problem have developed neuropathy because zinc in the creams caused copper depletion.

#### **Preparing the patient**

When preparing a patient who needs dentures, you first need to manage his or her expectations. Explain the difference between partial and complete dentures and whether the prosthetic will be able to be removed. Explain that it will take time to become comfortable wearing the prosthetic and it will take practice to learn how to eat and speak comfortably.

#### **Fitting**

Obtaining a proper impression and assessing the patient closely at each step in the process is key to ensure the dental prosthesis fits well. In addition to assessing occlusion and other aspects of fit, it's important to evaluate the phonetics and aesthetics of the dentures as well.

Tell the patient up front that adjustments in fit will need to be made once the oral tissue has healed. Keep in mind that the most bone/residual ridge resorption occurs over the first 3 to 12 months, with resorption continuing at a slower rate after that. Patients with asthma who use corticosteroid inhalants and those who take hormone replacement therapy, have poor oral hygiene, or wear dentures continually are more

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susceptible to bone loss, resulting in the need for more frequent adjustments in fit. Other factors affecting fit include reduced bite strength and the quality of saliva; age and certain medications may reduce saliva production.

### **Education, education, education**

Real estate agents quote the adage "location, location, location." When it comes to dentures, the mantra might well be "education, education, education." Only through education can you ensure your patient will know how to properly care for dentures and when to seek help for a poor fit, a vital first step to avoiding complications—and possible legal action.

Provide education resources written at the sixth-grade level and in the patient's primary language. Remember to document receipt and patient understanding of the information. For patients with a higher reading level, consider "Restoring your smile with dentures," a patient education article from the American Dental Association that is available online at [jada.ada.org/content/143/5/528.full.pdf+html](http://jada.ada.org/content/143/5/528.full.pdf+html).

Important educational tips related to fit include telling patients to immerse dentures in water after cleaning to avoid warping. Also tell patients to remove their dentures before going to sleep. During sleep patients may grind their teeth, which can cause gum shrinkage. In addition, not removing dentures can cause oral lesions or denture stomatitis. Finally, patients need to know that weight loss and gain can also affect denture fit.

### **All about adhesives**

Many patients automatically add more adhesive to improve fit when they have difficulties, so it's important to review proper use of adhesives. The American College of Prosthodontists notes that when properly used, dental adhesives can improve retention and stability of dentures and help avoid food accumulation beneath the dentures. In addition, studies have shown that adhesives may improve the perception a person with dentures has about stability of the dentures and even quality of life.

However, the effect of denture adhesives on oral tissue when used for longer than 6 months hasn't been well studied, so if a patient will be using adhesives for a long time, be sure to assess his or her oral tissue on a regular basis. Use adhesives with caution in patients who are immunocompromised because of the heightened danger of damage to oral tissue. See *Do's and don'ts of dental adhesives* for adhesive-related topics to cover with patients

### **Solving the problem of an ill fit**

To address a poor fit, you will likely need to pursue one of four options: adjust, reline, remake, or implant. *Adjusting* is most appropriate when the irritation is minor. *Relining* can be used when the denture is still in good condition. *Remaking*, of course, means making a set of dentures. This may be necessary in patients who have had dentures for a number of years. Implants can be used to secure the dentures in place.

### **Documentation and follow up**

Document the type of prosthesis, material, condition of mouth, any interventions to correct fit, and patient education and responses. Include that you specifically told the patient when to return for adjustments of fit.

Check your patients with dentures at least once a year (some experts recommend 6 months) for proper fit and

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function. At this time, check (and document) fit, bone loss, oral lesions, and assessment of overall oral health. Be especially alert for denture stomatitis, which tends to be asymptomatic. Patients with poor oral hygiene, age-related chronic diseases such as diabetes, or who are immunocompromised are more susceptible to this condition, which usually occurs in those who wear a complete maxillary denture or partial denture. One systematic review of eight studies found this occurs in anywhere from 1.1 percent to 36.7 percent of patients with partial removable dental prostheses.

### **Ensuring a proper fit**

By managing patient expectations, following up promptly when problems occur, and documenting thoroughly, you can help reduce the chances of finding yourself on the witness stand for a case of ill-fitting dentures.

### **Do's and don'ts about dental adhesives**

Dental adhesives may be helpful in securing dentures. Advise your patients to follow these tips for the best results:

- **Don't** use adhesives that contain zinc. They may harm your body.
- **Don't** use too much adhesive. Three or four pea-sized drops of cream on each denture are usually enough. If you are using a powder, wet it with water, put a thin layer on the surface of the denture, and then shake off any extra. In the case of pads, be sure to cut off any extra padding.
- **Do** hold the dentures in place for about 5 to 10 seconds.
- **Do** bite firmly to spread the adhesive.
- **Do** remove any extra adhesive that goes onto your cheek or tongue.
- **Do** remove all adhesive from dentures and from your mouth every day.
- **Do** contact your dentist if you feel your dentures aren't fitting right. **Don't** simply apply more adhesive.

Adapted from: Felton D, Cooper L, Duqum I, et al. Evidence-based guidelines for the care and maintenance of complete dentures: A publication of the American College of Prosthodontists. *J Am Dental Assoc.* 2011;142(2 suppl).

### **RESOURCES**

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