

Are flippers obsolete?

By Dr. Louis Kaufman

One of the most frequent dental laboratory procedures is replacing a missing tooth with a temporary partial denture, long ago nicknamed a “flipper.” These have been used and abused by dentists for years. Flippers are easy to make by simply sending an alginate impression to the dental laboratory with a tooth shade. The lab usually gets it back to the dentist in less than a day so that he or she can quickly replace the patient’s missing tooth.

I can remember a patient who was referred to me by another general dentist. The patient was his wife, and she had lost a central incisor due to a fractured root. Before she came to me, the tooth was extracted by a periodontist, who



placed an implant the same day with a temporary. So far, so good. About three months later, the implant failed and had to be removed. The dentist made a flipper to replace the tooth with the bone filled in the implant site, but the patient could not eat with the flipper.

The dentist and his wife were friends with whom I frequently dined. Suddenly, they began to decline our invitations to dinner. I thought maybe I had developed bad breath or offended them in some other way. When I spoke to her husband, my dentist friend, he told me about her problems, and that she didn't want to be seen in public without her front tooth. I asked if she could come to my office.

Upon examination, I found that the flipper was not well fitted (I see this a lot), and that it was severely impinging on the tissue. The flipper had destroyed the papilla on the adjacent lateral incisor and damaged the papilla on the adjacent central incisor. I told her that, in my opinion, it would be impossible to use an implant to replace her missing tooth because it would be impossible to restore the implant, given the destruction of the surrounding tissues.

I suggested that we use a fixed bridge to accomplish the replacement. She accepted and we replaced the missing

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tooth with a Snap-It® that would allow the tissue to heal, and would get some regeneration of the gingival tissues.

After several months of wearing the new tooth replacement, the gingival tissue healed and there was some regrowth of the papilla. I was then able to prepare the teeth for a fixed bridge, place a temporary, and cement the permanent tooth replacement in a couple of weeks. She was a very happy patient! She told me how distressing it was



to lose a tooth, and how much she worried about how the replacement would look. Many times, we dentists are very cavalier about extracting teeth since it is such a routine procedure for us. This experience taught me an important lesson.

The Snap-It® requires no tooth preparation and the esthetics of the teeth adjacent to the missing tooth can be improved. It will maintain vertical dimension. The replacement tooth can be contoured to fit the tissue and maintain tissue health without pressure. There is no palatal coverage, so it is much more comfortable. The teeth are easier to clean since the replacement can be removed and replaced easily. This is a simple procedure that can be performed in any dental office. **DE**

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