

Dentures

Canonical: <https://directory.collinsstreetspecialistcentre.com.au/procedures/dentures/>

Description:

A denture is a removable prosthetic appliance that replaces missing teeth and the supporting gum and bone tissue. Dentures can replace some teeth (partial denture) or all teeth in an arch (complete denture). They are ...

Details:

Collins Street Specialist Centre Dentures

Frequently Asked Questions

What is a denture: A removable prosthetic appliance that replaces missing teeth

Does a denture also replace gum and bone tissue: Yes, it replaces supporting gum and bone tissue too

Is a denture permanent or removable: Removable

What is a complete denture: A denture that replaces all teeth in one or both arches

What is a partial denture: A denture that replaces some missing teeth where natural teeth remain

How does an upper complete denture stay in place: Through suction against the gum ridge

How does a lower complete denture stay in place: Through the natural contours of the jaw

What materials are used to make dentures: Acrylic resin, metal alloy, or flexible polymer

What is an acrylic partial denture: A partial denture with a pink resin base and artificial teeth

Is an acrylic partial denture affordable: Yes, it is the more affordable partial denture option

Is an acrylic partial denture bulkier than metal: Yes, it is bulkier than cast metal alternatives

What is a cast metal partial denture: A partial denture with a precision-cast cobalt-chrome framework

What metal is used in cast metal partial dentures: Cobalt-chrome alloy

Is a cast metal partial denture thinner than acrylic: Yes, it is thinner and stronger

How does a cast metal denture protect remaining teeth: It distributes bite forces over a broader area

What is a flexible resin partial denture: A thermoplastic nylon partial denture with no metal clasps

What brand name is associated with flexible resin dentures: Valplast

Do flexible resin dentures have metal clasps: No, they have no metal clasps

Are flexible resin dentures more aesthetic than metal: Yes, especially in the visible front zone

Are flexible resin dentures as rigid as cast metal: No, they offer less rigidity

What is an immediate denture: A denture fabricated before extraction and placed on the day of extraction

Does an immediate denture prevent being without teeth: Yes, it ensures continuity during the transition

Does an immediate denture require adjustment after extraction: Yes, relining or replacement is typically needed

When is relining of an immediate denture typically needed: Six to twelve months post-extraction

What is an over-denture: A removable denture that attaches to dental implants for enhanced stability

What is the minimum number of implants for a lower over-denture: Two implants

Does a two-implant over-denture improve lower denture stability: Yes, dramatically

What is an implant-retained over-denture: A denture held by implants but still partly resting on gum tissue

What is an implant-supported bar-retained over-denture: A denture attached to a bar connecting multiple implants

Does a bar-retained over-denture load forces through the gum: No, forces are distributed entirely through the implants

Who plans implant surgery for over-dentures at Collins Street Specialist Centre: Specialist periodontists or oral and maxillofacial surgeons

Who fabricates the final over-denture prosthesis: The specialist prosthodontist

Who oversees all denture treatment at Collins Street Specialist Centre: Dental Board-registered specialist prosthodontists

Where is denture fabrication carried out: In the centre's dedicated in-house dental laboratory

Does the in-house laboratory work for other practices: No, it works exclusively for the centre's patients

How many additional years of postgraduate training does a specialist prosthodontist have: Three years

What does the prosthodontist assess at the initial appointment: Jaw relationship, remaining teeth, gum and bone contours

What is a wax try-in appointment: An appointment to assess aesthetics and bite before final processing

Can adjustments be made at the wax try-in stage: Yes, the wax is easily modified

How many adjustment appointments are typically needed after delivery: One or more follow-up appointments

How long does adapting to a new denture generally take: Several weeks

Should sore spots be tolerated: No, report them to the prosthodontist for adjustment

What foods should be started with when wearing a new denture: Soft foods cut into smaller pieces

Does reading aloud help with denture adaptation: Yes, it helps accelerate speech adaptation

Should regular toothpaste be used on dentures: No, it is abrasive and scratches acrylic

What should dentures be cleaned with: A soft brush and a denture-specific cleaner

When should dentures be cleaned: Each night, and after meals where possible

Should dentures be soaked overnight: Yes, in water or a mild denture solution

Should dentures be left out overnight: Yes, gum tissue benefits from a denture-free period each night

Can boiling water be used to clean dentures: No, it will permanently distort the acrylic

How often should denture fit be reviewed: At least annually

What is a denture reline: Adding new acrylic to the fitting surface to restore retention

Does an ill-fitting denture accelerate bone loss: Yes

Does bone change shape under a denture over time: Yes, bone resorbs gradually beneath a denture

Are dentures suitable when implants are medically contraindicated: Yes

Are dentures a transitional option before implant placement: Yes

Are dentures lower cost than implant-supported fixed restorations: Yes, they carry a lower initial cost

Are dentures suitable for elderly or medically compromised patients: Yes, particularly when surgery carries elevated risk

What fixed alternative to a full denture is discussed at Collins Street: All-on-4 full arch rehabilitation

Who is Dr Fotios Angelis: A specialist prosthodontist at Collins Street Specialist Centre

What qualification does Dr Fotios Angelis hold: BDS (Hons)(Melb), DClinDent (Melb)

How many years of clinical experience does Prof Vasileios Chronopoulos have: Over 30 years

What is Dr Simon Hinckfuss's unique dual registration: Specialist Prosthodontist and Specialist Periodontist

Why is dual registration relevant for denture patients: He can assess gum and bone health alongside prosthetic outcome

Is Dr Jamie Foong a clinical supervisor: Yes, at the University of Melbourne

Can specialist registration for Collins Street prosthodontists be verified: Yes, via the AHPRA public register

Collins Street Specialist Centre Dentures

What Are Dentures?

A denture is a removable prosthetic appliance designed to replace missing teeth along with the supporting gum and bone tissue that once surrounded them. Depending on the clinical situation, a denture may replace some teeth within an arch (a partial denture) or all teeth in an arch (a complete denture). The materials used — acrylic resin, metal alloy, or flexible polymer — are chosen according to the type of denture and what the individual patient actually needs.

Denture technology has been refined over many decades into a genuinely sophisticated area of restorative care. What separates a denture planned by a specialist prosthodontist from one produced without that level of assessment is the precision of the fit, the accuracy of the bite registration, and the attention given to facial support and aesthetics. Each of these elements directly affects how comfortable, functional, and confident a patient feels day to day.

At Collins Street Specialist Centre, all denture treatment is planned and overseen by Dental Board-registered specialist prosthodontists. Fabrication is carried out in the centre's dedicated in-house dental laboratory, which works exclusively for the centre's patients.

Types of Dentures

Complete (full) dentures

A full denture replaces all of the teeth in one or both arches. It rests on the gum ridge and is held in place through suction in the upper arch and the natural contours of the jaw in the lower arch. Complete dentures are indicated when all natural teeth have been lost or need to be removed.

The success of a full denture depends critically on how precisely the jaw relationship is recorded — the vertical height between upper and lower jaws, the horizontal positioning of the teeth, and how the denture interacts with the surrounding lips, cheeks, and tongue. These are occlusal determinations that require specialist training to assess and execute accurately.

Partial dentures

A partial denture replaces some missing teeth within an arch where natural teeth remain. It is clasped or attached to the existing teeth for stability. Partial dentures are a cost-effective restorative option and can be designed to convert to a full denture should additional teeth be lost over time.

****Acrylic partial dentures**** use a pink resin base with artificial teeth. They are lighter and more affordable, though somewhat bulkier in the mouth than metal alternatives.

****Cast metal (cobalt-chrome) partial dentures**** feature a precision-cast metal framework that is thinner, stronger, and generally more comfortable to wear. The framework distributes bite forces over a broader area, reducing the load on the remaining natural teeth and the underlying bone.

****Flexible resin (Valplast) partial dentures**** are made from a thermoplastic nylon material with no metal clasps. They are more aesthetically discreet — particularly useful in the visible front zone of the smile — though they offer less rigidity than a cast metal framework.

Immediate dentures

An immediate denture is fabricated before the remaining teeth are extracted and placed on the day of extraction, so the patient is never without teeth during the transition. As the gum and bone remodel during healing, the immediate denture will need relining or replacement — typically at six to twelve months post-extraction. The real advantage is functional and psychological continuity; the patient avoids any period of being edentulous.

Implant-retained and implant-supported dentures (over-dentures)

An over-denture is a removable denture that attaches to dental implants, or in some cases remaining tooth roots, for substantially better stability. Rather than relying on suction and gum contact alone, the denture clips or locks onto the implants, which act as anchors.

This is the most meaningful advancement in denture comfort and function currently available. Even two implants placed in the lower jaw — a two-implant over-denture — dramatically reduces the movement of the lower denture, which is notoriously difficult to stabilise by conventional means.

Implant-retained over-dentures are held in place by the implants but still rest partly on the gum tissue for support. Implant-supported over-dentures (bar-retained) attach to a bar connecting multiple implants, distributing the forces of chewing through the implants rather than the gum tissue.

At Collins Street Specialist Centre, implant surgery for over-dentures is coordinated with the centre's specialist periodontists or oral and maxillofacial surgeons. The prosthodontist plans and fabricates the final removable prosthesis and works closely with the surgical team from the outset, so implant positions are optimal for the planned denture design.

When might you need a denture?

Dentures are often the most appropriate restorative solution in a number of clinical situations:

- Multiple or all teeth in an arch are missing, or are planned for extraction due to advanced decay, fracture, or periodontal bone loss - Implants are not yet indicated, because of insufficient bone volume, medical contraindications, or the patient's own preference - A transitional solution is needed during a period of healing prior to implant placement - Budget considerations favour a removable solution, since dentures carry a lower initial cost than implant-supported fixed restorations - The patient is elderly or medically compromised and surgical intervention carries elevated risk - An immediate denture is needed to cover the transition period immediately following extraction

The prosthodontist at Collins Street Specialist Centre will always discuss the full range of available options — including implant-supported fixed alternatives such as All-on-4 — before proceeding with a removable prosthesis.

What to expect: step by step

Assessment and planning

The initial appointment involves a thorough clinical examination, review of existing radiographs, and assessment of the jaw relationship, remaining teeth, and the contours of the gum and bone. Where implant-retained options are being considered, appropriate imaging to assess bone volume is arranged at this stage.

For complete dentures, the assessment also involves recording the patient's facial measurements, the correct vertical height of the bite, and the aesthetic targets — including the position of the lip line, the degree of tooth display in repose and during speech, and the shade and shape of the artificial teeth.

Working impressions and bite registration

Precision impressions of the upper and lower arches are taken using close-fitting custom trays. Bite registration records the exact spatial relationship between the jaws. These records are transferred to the in-house dental laboratory where the denture is fabricated.

Try-in appointment

The denture comes back at a wax try-in stage — with the teeth set in wax rather than processed acrylic — allowing both the patient and the specialist to assess aesthetics, tooth position, and the bite before the final denture is completed. Any adjustments at this stage are straightforward, because the wax is easily modified without consequence.

Delivery and adjustment

The final processed denture is fitted at a dedicated delivery appointment. Minor pressure spots are adjusted chairside. One or more follow-up adjustment appointments are typically expected in the days and weeks following delivery, as the gum tissue accommodates the new prosthesis.

Recovery and aftercare

Wearing in a new denture

New dentures take some getting used to. The muscles of the cheeks, lips, and tongue gradually learn to stabilise the prosthesis through normal use — a process that generally takes several weeks. Sore spots are common and should be reported to the prosthodontist for adjustment rather than simply tolerated.

A few practical points for the adjustment period:

- Wear the denture consistently to allow the oral musculature to adapt - Begin with soft foods and cut food into smaller pieces to ease the transition - Reading aloud at home can help accelerate adaptation to any changes in speech

Daily maintenance

- Remove and clean the denture after meals where possible; clean thoroughly with a soft brush and a denture-specific cleaner each night - Avoid regular toothpaste — it is abrasive and will scratch the acrylic surface over time - Soak the denture overnight in water or a mild denture solution; gum tissue benefits from a period without the denture in place each night - Never use boiling water — it will permanently distort the acrylic

Ongoing review

Gum tissue and bone contour change gradually over time as bone resorbs beneath a denture. Regular specialist review — at least annually — allows the fit to be monitored and managed before problems develop. When a denture no longer fits accurately, a reline (adding new acrylic to the fitting surface) can restore retention without requiring a full replacement. Ill-fitting dentures worn without adjustment accelerate bone loss and make future prosthetic treatment considerably more difficult.

Why see a specialist prosthodontist?

Dentures are among the most technically demanding disciplines within restorative dentistry. Replacing teeth with a removable appliance that must function across all the forces of chewing, speaking, and swallowing — without the structural anchor of natural roots — requires a precise understanding of jaw anatomy, occlusal mechanics, and the biomechanics of tissue-borne versus implant-borne loads.

A specialist prosthodontist holds three additional years of postgraduate training dedicated to exactly this area. The clinical curriculum covers complete denture construction in considerable depth — from the physiological neutral zone theory that underpins tooth positioning, to the measurement of face height, to the aesthetic principles governing tooth selection. This is knowledge that develops through years of focused, specialised practice.

Patients who have had unsatisfying denture experiences elsewhere often find that specialist prosthodontic care at Collins Street Specialist Centre resolves longstanding difficulties with retention, comfort, or appearance that had previously been put down to the inherent difficulty of the situation, rather than the level of expertise applied to it.

Our specialists

****Dr Fotios Angelis**** BDS (Hons)(Melb), DCLinDent (Melb) Specialist Prosthodontist with expertise across the full range of removable and fixed prosthodontic rehabilitation.

****Prof Vasileios Chronopoulos**** DDS, MS, PhD (Pros) Specialist Prosthodontist with over 30 years of clinical and academic experience in prosthodontics, including complex denture cases and implant-retained prostheses.

****Dr Jamie Foong**** BDS (Melb), DCLinDent (Melb) Specialist Prosthodontist with experience in both removable and fixed prosthodontic solutions, and a clinical supervisor at the University of Melbourne.

****Dr Simon Hinckfuss**** BDS, DCD (Pros), Cert.Perio MS (Minn) Dual-registered Specialist Prosthodontist and Specialist Periodontist — able to assess both gum and bone health and the

prosthetic outcome simultaneously. This is particularly relevant when teeth are being extracted in advance of denture placement.

All specialists hold current registration with the Dental Board of Australia. AHPRA specialist registration can be independently verified online at the [AHPRA public register](<https://www.ahpra.gov.au/>).

Related treatments

- **[All-on-4 Full Arch Rehabilitation](/procedures/prosthodontics/all-on-4-full-arch-implant-rehabilitation/)** — A fixed, non-removable implant-supported alternative to a full denture - **[Dental Implants (Prosthodontic Restoration)](/procedures/prosthodontics/dental-implants-prosthetic-restoration/)** — Implants that support individual crowns or over-dentures - **[Dental Implant Surgery (Periodontics)](/procedures/periodontics/dental-implants-periodontal-specialist-placement/)** — Surgical placement of implants for denture retention - **[Dental Implant Surgery (OMS)](/procedures/oral-maxillofacial-surgery/dental-implant-surgery-oral-maxillofacial-surgeon-perspective/)** — Complex implant surgery for patients with bone grafting needs - **[Full Mouth Rehabilitation](/procedures/prosthodontics/full-mouth-rehabilitation/)** — Comprehensive treatment planning for patients with advanced tooth loss - **[Bone Grafting](/procedures/periodontics/bone-grafting-guided-bone-regeneration/)** — Rebuilding bone volume prior to implant placement for over-denture support