

Flexitime[®] Prosthetic rehabilitation of the upper jaw

"I chose Flexitime because it shows extraordinary smoothness and a very high tear resistance. In addition, it is very versatile and offers flexible processing times – these characteristics are especially beneficial with impressions showing numerous preparations like in this case."

Dr Stefano Lombardo

Giving a hand to oral health.



Dr Stefano Lombardo is a dentist and dental technician who works in his private practice in Torino (Italy). His focus is restorative dentistry, fixed prosthodontics and implant prosthodontics with particular attention to aesthetics and new digital technologies.

Furthermore, he holds a professor position at the University of Genoa and at the Institute for Advanced Dental Studies (IADS).

Dr Lombardo is author of several publications in Italian as well as international journals, and lecturer in many courses and congresses.

Beyond this, he is the founder and scientific director of DentalTraining (Turin, Italy), where he conducts numerous practical-theoretical courses, and is founding member of the new Italian Society of Dental Prosthesis and Oral Rehabilitation (SIPRO).

Prosthetic rehabilitation of the upper jaw



Figure 01 – Initial situation: multiple carious lesions and severely damaged teeth 15 & 26; tooth 14 missing.



Figure 02 – Patient was treated with fixed implant as well as preparations for total crowns for prosthetic rehabilitation of the upper jaw.

Figure 04 – The master



Figure 03 – For the impression taking, an individual impression tray was created, and the one-step impression technique was performed by using Flexitime Heavy Tray and Light Flow.



model was developed with metal substructures of the crowns on the implants.



Figure 05 – Scanning of the prepared master model.



Figure 06 – Virtual design of Zirconia substructures on the digitized master model.



Figure 07 – Try-in and verification of the precision of the Zirconia substructures.



Figure 08 – Biscuit firing try-in of ceramic restorations.





Figure 10 & 11 – Finalization of the restoration in the laboratory.



Figure 09 – Repositioning impression with single-step, two-phase technique by using high viscous Flexitime Heavy Tray and Light Flow for the fine adjustment of the emergence profile's marginal adaptation.



Figure 12 – Final result.

Flexitime



The precision impression material Flexitime (A-silicone) has been developed especially for the high requirements of modern prosthetics – its benefits at a glance ...

Economical: Flexitime's time concept makes the material suitable for all impression techniques, covering single-tooth preparations, multiple unit prosthetics and full dentures – as a result, you can save on stocking separate "fast set" and "regular set" impression materials.

Versatile: 6 different viscosities give you the freedom to choose the suitable material for your preferred impression technique. And with only 3 viscosities you can already cover all indications, e.g., with Flexitime Putty, Monophase and Medium Flow.

Reliable: The setting process (polymerisation) is accelerated when the tray is inserted into your patient's mouth.*

Precision of fit: Low dimensional changes (–0.001 %)**. In addition, Flexitime reproduces details of surface roughness of up to under 20 µm***.

Intuitive: Working time (1:00 min. to 2:30 min.) and intraoral setting time (2:30 min.) are identical for all Flexitime precision impression materials.

Perfect addition to intraoral scanning, when a subgingival preparation is not possible digitally.

Satisfied patients thanks to the always short intraoral setting time.

* Source: Wöstmann, Bernd & Ngyuen, Ch.-Th.: Untersuchungen zum Abformmaterial Flexitime. Gießen, Germany, 10 June 2000. Documentation available.

** Source: Piwowarczyk A, et al., In Vitro Study on the Dimensional Accuracy of Selected Materials for Monophase Elastic Impression Making, Int J Prostodont 2002, 15: 168–74.

*** Source: Kanehira M, et al., Surface detail reproduction with new elastomeric dental impression materials. Quintessence Int 2007, 38: 479–488.

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