

# Denture Teeth as Esthetic as Porcelain Crowns

REF-LINE FROM PRIMOTEC USA FEATURES ANATOMY TO MEET THE HIGHEST STANDARDS

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## KEY TAKEAWAYS

- Natural morphology of tooth surface
- Incisal details and minor irregularities
- Transparent incisal area
- Visible mamelons in the dentin area
- Gingivally extended tooth designs for covering metal
- Highly detailed occlusal surface on posteriors

**OUR LABORATORY'S** philosophy is that nobody should be able to discern that a denture tooth is an artificial restoration. Approximately 10% of our work is dentures and 90% is implant cases using telescopic restorations in combination with denture teeth, so I am always looking for a tooth that is very esthetic in the shape and availability of moulds.

I first used REF-LINE from primotec USA a few months ago, and I have been extremely impressed. The surface texture is really key in its ability to refract light as a natural tooth does. Another important factor is the occlusal morphology of the posteriors; many denture tooth manufacturers struggle to make a posterior tooth that looks like natural dentition, but REF-LINE really nailed it.

REF-LINE teeth include incisal details and minor irregularities, similar to natural teeth. Even within a given set of anteriors, there are differences so that the patient's right and left sides will not be exact mirror images. When denture teeth already have a lot of character in terms of shading, surface characterization, mamelons, incisal edge translucency, etc, I do not need to edit much by hand.

The shaping of the basal surfaces of the teeth is designed to be ideal for implant restorations. We have the contour for bar work, but the extension on the cervical really helps in cases for which we need a bit more length. If we are trying to mask an underlying metal structure, we are



able to do that much better if the tooth extends to block out the underlying structure. The extended tooth designs also provide a helpful option if we want to show a little bit more gingival recession on a restoration for an older patient, to be age-appropriate.

My opinion is that we have seen many of the denture tooth companies catering to, for lack of a better term, a dumbed-down version of dentistry. Natural-looking posteriors have high cusp angles. Denture tooth manufacturers are providing more lingualized occlusal schemes and low posterior cusp angles, which, while appropriate for cases with mandibular atrophy and bone resorption, seem to be more of a response to the mass

market getting away from balancing edentulous and implant cases on the articulator. It is a trend of making teeth that are not very anatomic.

REF-LINE provides the anatomy that we prefer for our restorations, and our dentists have noticed. We have used these teeth for a significant number of both implant cases and traditional dentures, and many of our dentists say that these teeth look as esthetic as porcelain crowns. Patients love what they are seeing as well.

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