

PRACTICAL CLINICAL COURSES
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Career Development Program*

S3157
Mastering Occlusal Equilibration

Gordon J. Christensen, DDS, MSD, PhD

Materials Included:

C.E. Instruction Sheet
Products List
Clinician Responsible
Goals & Objectives
Overview
Supplemental Materials
AGD Post-Test

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PRACTICAL CLINICAL COURSES

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PRACTICAL CLINICAL COURSES
Sources of Products Discussed in
S3157 Mastering Occlusal Equilibration
Presented by Gordon J. Christensen, DDS, MSD, PhD

1. **AccuFilm II**
Parkell, Inc.
300 Executive Drive
Edgewood, NY 11717
(800)243-7446
(631)249-1134
www.parkell.com
2. **All Ceramic Finishing and Polishing Kit**
SHOFU Dental Corporation
1225 Stone Drive
San Marcos, CA 92078-4059
(800)827-4638
www.shofu.com
3. **All Ceramic Polishers**
Cosmedent, Inc.
401 N. Michigan Avenue
Suite 2500
Chicago, IL 60611
(800)621-6729
www.cosmedent.com
4. **Dental Porcelain Polishing Kit**
Brasseler USA Dental
One Brasseler Blvd.
Savannah, GA 31419
(800)841-4522
www.brasselerusadental.com
5. **Dialite Intra-Oral Polishing Paste**
Brasseler USA Dental
One Brasseler Blvd.
Savannah, GA 31419
(800)841-4522
www.brasselerusadental.com
6. **DryTips**
Microbrush International
1376 Cheyenne Avenue
Grafton, WI 53024
(866)866-8698
<https://microbrush.younginnovations.com>
7. **DryTips**
Young Specialties
2260 Wendt Street
Algonquin, IL 60102
(800)558-6684
www.youngspecialties.com
8. **7406 Finishing and Trimming Bur by Midwest**
Dentsply Sirona
13320-B Ballantyne Corporate Pl
Charlotte, NC 28277
(800)877-0020
www.dentsplysirona.com
9. **Jiffy Universal Ceramic Adjuster and Polishing Kits**
Ultradent Products, Inc.
505 West Ultradent Drive
South Jordan, UT 84095
(888)230-1420
(801)572-4200
www.ultradent.com
10. **Madame Butterfly Silk**
Almore International
441 19th Street SE
Hickory, NC 28602
(800)547-1511
www.almore.com
11. **Moore Abrasive Discs (Emery & Garnet)**
E.C. Moore Company
13325 Leonard Street
Dearborn, MI 48126
(800)331-3548
(313)581-7878
www.ecmoore.com
12. **NeoDiamond**
Microcopy
P.O. Box 2017
Kennesaw, GA 30156-9017
(800)235-1863
www.microcopydental.com
13. **Occlusal Indicator Wax**
Kerr Corporation
200 S Kraemer Blvd
Building E2
Brea, CA 92821
(800)537-7123
www.kerrdental.com
14. **TrollFoil by TrollDental**
Directa Inc.
64 Barnabas Road
Unit 3
Newtown, CT 06470
(800)537-8765
(203)491-2273
www.directausa.com

Product names, the products themselves, and company names change rapidly. Please contact the companies shown to confirm current information.

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PROGRAM

S3157 Mastering Occlusal Equilibration

CLINICIAN RESPONSIBLE:

Gordon J. Christensen, DDS, MSD, PhD
Founder and CEO, Practical Clinical Courses
Senior Consultant and Previous CEO, CR Foundation
Practicing Prosthodontist, Provo, Utah

GOALS & OBJECTIVES

At the completion of this video presentation, viewers should be able to:

1. Discuss the importance of occlusion in dentistry.
2. Discuss the importance of occlusal equilibration in dentistry.
3. List recent changes in dental treatment that make occlusion more important than before.
4. Define maximum interdigitation.
5. Define centric relation.
6. Define non-working.
7. Define working.
8. Define protrusive.
9. List six characteristics of "normal" occlusion.
10. List three types of occlusion as defined orthodontically.
11. List five indications for occlusal equilibration.
12. List five supplies or equipment necessary for occlusal equilibration.
13. List the steps in sequential order for occlusal equilibration.
14. State why patient informed consent is especially important for occlusal equilibration.
15. Discuss the importance of patient education before occlusal equilibration.
16. State why each tooth must have a centric stop when finished with an occlusal equilibration.
17. Describe the non-working relationship in a natural dentition after occlusal equilibration.
18. Describe canine rise.
19. Describe group function.
20. Describe the importance of incisal guidance.

OVERVIEW

S3157 Mastering Occlusal Equilibration

Normal dental occlusion has been identified but only occurs in about 75% of patients. Abnormalities in occlusion, or malocclusion, can cause significant challenges, including headaches, temporomandibular dysfunction, breakage of teeth and restorations, implant failure, pulpal death, tooth movement, psychological concentration on teeth and joint pain causing mental problems, and numerous other adverse conditions. Occlusal equilibration can reduce or eliminate many of the described challenges. The following and other topics are included in this video:

- The importance of occlusion in dentistry
- The importance of occlusal equilibration in dentistry
- Recent changes in dental treatment that make occlusion more important than before
- Maximum interdigitation
- Centric relation
- Non-working
- Working
- Protrusive
- Characteristics of “normal” occlusion
- Types of occlusion as defined orthodontically
- Indications for occlusal equilibration
- Supplies or equipment necessary for occlusal equilibration
- Steps in sequential order for occlusal equilibration
- Why patient informed consent is especially important for occlusal equilibration
- Importance of patient education before occlusal equilibration
- Why each tooth must have a centric stop when finished with an occlusal equilibration
- The non-working relationship in a natural dentition after occlusal equilibration
- Canine rise
- Group function
- The importance of incisal guidance

SUPPLEMENTAL MATERIALS

S3157 Mastering Occlusal Equilibration

1. Lee SJ, Alamri O, Cao H, Wang Y, Gallucci GO, and Lee JD. Occlusion as a predisposing factor for peri-implant disease: A review article. *Clin Implant Dent Relat Res*. 2023 Aug;25(4):734-742. doi: 10.1111/cid.13152. Epub 2022 Nov 14.
2. Thomas DC, Singer SR, and Markman S. Temporomandibular Disorders and Dental Occlusion: What Do We Know so Far? *Dent Clin North Am*. 2023 Apr;67(2):299-308. doi: 10.1016/j.cden.2022.11.002. Epub 2023 Feb 1.
3. Christensen GJ. Ask Dr. Christensen: Occlusion and caries: Continuing zirconia challenges. *Dental Economics*. 2023 Feb;113(2):52-4.
4. Kalladka M, Young A, Thomas D, Heir GM, Quek SYP, and Khan J. The relation of temporomandibular disorders and dental occlusion: a narrative review. *Quintessence Int*. 2022 Apr 5;53(5):450-459. doi: 10.3290/j.qi.b2793201.
5. Christensen GJ. Ask Dr. Christensen: Occlusion in 2022: The forgotten area in dentistry. *Dental Economics*. 2022 Mar;112(3):68-70.
6. Sun J, Lin YC, Lee JD, and Lee SJ. Effect of increasing occlusal vertical dimension on lower facial form and perceived facial esthetics: A digital evaluation. *J Prosthet Dent*. 2021 Oct;126(4):546-552. doi: 10.1016/j.prosdent.2020.07.013. Epub 2020 Sep 25.
7. Goldstein G, Goodacre C, and MacGregor K. Occlusal Vertical Dimension: Best Evidence Consensus Statement. *J Prosthodont*. 2021 Apr;30(S1):12-19. doi: 10.1111/jopr.13315.
8. Kattadiyil MT, Alzaid AA, and Campbell SD. The Relationship Between Centric Occlusion and The Maximal Intercuspal Position and Their Use as Treatment Positions for Complete Mouth Rehabilitation: Best Evidence Consensus Statement. *J Prosthodont*. 2021 Apr;30(S1):26-33. doi: 10.1111/jopr.13316.
9. Goodacre CJ and Goodacre BJ. What Occlusal Scheme Should Be Used with Removable Partial Dentures? *J Prosthodont*. 2021 Apr;30(S1):78-83. doi: 10.1111/jopr.13313.
10. Christensen GJ. Ask Dr. Christensen: Let's save teeth. *Dental Economics*. 2020 Mar;110(3):71-4.
11. Christensen GJ. Ask Dr. Christensen: What is the best type of material for posterior crowns? *Dental Economics*. 2018 Oct;108(10):79-81.
12. Christensen GJ. Ask Dr. Christensen: Why do implants fail? *Dental Economics*. 2018 Sep;108(9):81-2, 99.

POST-TEST

S3157 Mastering Occlusal Equilibration

1. Dental occlusion is more important now than before because of:
 - a. Implants.
 - b. Zirconia.
 - c. Lithium disilicate.
 - d. All the above.

2. The most rearward unstrained position of the mandible is:
 - a. Maximum interdigitation.
 - b. Centric relation.
 - c. Centric occlusion.
 - d. None of the above.

3. The position where the teeth contact when chewing is:
 - a. Maximum interdigitation.
 - b. Centric relation.
 - c. Centric occlusion.
 - d. None of the above.

4. Centric occlusion is:
 - a. Maximum interdigitation.
 - b. Centric relation.
 - c. An outdated term.
 - d. None of the above.

5. When the patient is in protrusive in normal occlusion:
 - a. All posterior teeth contact.
 - b. Only the anterior teeth are in contact.
 - c. Only the canines contact.
 - d. None of the above.

6. Normal occlusion is present in about ____% of the adult population.
 - a. 55%
 - b. 60%
 - c. 75%
 - d. 90%

7. What rotary instrument was suggested for occlusal equilibration?
 - a. 330 carbide
 - b. 1171 diamond
 - c. 7406 carbide
 - d. 7901 carbide

POST-TEST (CONT'D)

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8. Start an occlusal equilibration by adjusting:
 - a. Maximum interdigitation.
 - b. Protrusive.
 - c. Centric occlusion.
 - d. Centric relation.

9. Start an occlusal equilibration with the patient:
 - a. In a supine position.
 - b. Sitting straight up.

10. An occlusal equilibration should be refined:
 - a. At the end of the initial occlusal equilibration appointment.
 - b. About two weeks later.
 - c. About four weeks after the first treatment appointment.
 - d. All the above.

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