

**MEET THE DOCTOR:  
KEVIN C LIN, DDS, FACP  
PROSTHODONTIST**

**RECONSTRUCTIVE DENTAL SPECIALIST**

Dr. Kevin Lin is a board-certified specialist in prosthetic dentistry. He has extensive clinical training and experience rehabilitating patients with complex dental problems using composite resin, dental implants, veneers, crowns, bridges, and dentures. He is an expert in creating and maintaining partials and dentures for older adults. Moreover, he has restored thousands of dental implants and related fixed and removable dental appliances.

Dr. Lin has published numerous papers in peer-reviewed journals, written book chapters, and presented in international and national professional conferences and regional study club meetings on issues concerning prosthetic dentistry.

He actively participates in local study clubs to learn and share new clinical knowledge and techniques; he works tirelessly with specialists, general dentists, and lab technicians to provide the best quality patient care possible. He currently serves as an ad-hoc journal reviewer for the Journal of Prosthetic Dentistry and the Journal of Prosthodontics.

*Kevin C. Lin, DDS*



**EDUCATION**

Board Certification, American Board of Prosthodontics Certificate in Prosthodontics, UCSF Postgraduate Prosthodontics  
Doctor of Dental Surgery, UCLA School of Dentistry  
B.S. Biological Sciences in Medical Microbiology & B.A. Psychology, UC Davis

**POST-GRADUATE CREDENTIALS**

Diplomate, American Board of Prosthodontics  
Fellow, American College of Prosthodontists  
Fellow, International Congress of Oral Implantologists  
Ad-hoc Journal Reviewer, Journal of Prosthetic Dentistry and Journal of Prosthodontics  
Former Assistant Professor, University of the Pacific, Arthur A. Dugoni School of Dentistry  
Volunteer Faculty, Pre-doctoral Prosthodontic Clinic, University of California, San Francisco

# RECONSTRUCTIVE DENTISTRY UPDATES

OCT/NOV 2022

*Evidence Based Clinical Practices in Prosthodontics*

## DO YOU HAVE A PATIENT SUFFERING FROM LOOSE TEETH AND GENERALIZED SEVERE PERIODONTAL DISEASE?



The patient may present with **poor at-home hygiene maintenance, long-term dental neglect, chronic generalized severe periodontitis, and loose teeth with poor prognosis.** You are not sure if you could take care of his/her treatment expectation and manage your clinical time effectively...

### This is a patient who was referred to me for full mouth evaluation and rehabilitation

**Here is the story of my patient L.H.** She has suffered from long-term dental neglect throughout her adult working life. It wasn't until she was able to take a brief pause to take care of herself that she realized her dental health was in desperate need for help!

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## DO YOU WANT TO CHAT ABOUT A COMPLEX PATIENT CASE? OR WOULD YOU LIKE TO MEET AND SHARE IDEAS?

With your reputation for quality dental service and my experience with complex treatments, we can work together and benefit as a team. We simply want to do what is best for the patients.

I would like to work with you on challenging patient cases and share knowledge and experience. I would love to meet you for lunch, over a coffee break, or at your office to discuss a difficult patient case or to share ideas.

Please don't hesitate to reach out to me. I'm looking forward to talking with you on the phone or meeting in person.

### Inside This Issue

#### CASE REPORT

Do you have a patient suffering from loose teeth and generalized severe periodontal disease?  
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#### CLINICAL DENTAL RESEARCH

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#### RECONSTRUCTIVE DENTAL SPECIALIST

About Dr. Lin  
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initial presentation



completed upper and lower conventional fixed implant hybrid prostheses



**Treatment sequence:**

- Comprehensive assessment and diagnostic treatment planning
- Patient discussion and review of the proposed surgical/prosthetic treatment options and limitations
- Implant planning and collaboration with the surgeon and denture technician
- All-on-x immediate loading and fixed denture conversions
- Fabrication and insertion of the definitive PMMA-titanium substructure conventional hybrid fixed prostheses
- Post-insertion and re-care maintenance

**The case was challenging because:**

- Challenging initial impressions to capture the tentative denture border and the position of the mobile teeth
- Controlled HTN / borderline diabetic
- Suspected mouth breathing and low tongue posture; potential difficulties in adapting to prosthetic contour and speech adjustment
- Collapsed vertical dimension and uneven occlusal plane
- Facial asymmetry and its relation to the smile dental esthetics



conventional alginate impressions to fabricate conversion dentures



conversion dentures + immediate loading the day of the surgery



final patient front & profile views

**MY TREATMENT SUMMARY FOR L.H. :**

- ❖ Comprehensive evaluation and diagnostic denture set up
- ❖ Team collaboration with the surgeon and denture technician on implant treatment planning and conversion denture procedures
- ❖ Completion and insertion of the interim fixed conversion dentures as well as the final prostheses
- ❖ Regular maintenance re-care visits

**PATIENT SATISFACTION AND ORAL HEALTH-RELATED QUALITY OF LIFE (OHRQoL) OF CONVENTIONAL DENTURE, FIXED PROSTHESIS AND MILLED BAR OVERDENTURE FOR ALL-ON-4 IMPLANT REHABILITATION. A CROSSOVER STUDY.**

ELSYAD, MOUSTAFA ABDOU, ET AL. CLINICAL ORAL IMPLANTS RESEARCH 30.11 (2019): 1107-1117.

**Objective:**

This study aimed to evaluate patient satisfaction and oral health related quality of life (OHRQoL) of conventional denture, fixed prosthesis and milled bar overdenture for All-on-4 implant rehabilitation.

**Materials and Methods:**

Sixteen completely edentulous patients with ill-fitted mandibular dentures received new mandibular dentures (CD). After 3 months, 4 implants were installed according to the "All-on-4 concept" and immediately loaded with mandibular dentures. Three months after osseointegration, patients received either fixed prosthesis (FP) or milled bar overdenture (MB) in a cross-over design. Patient satisfaction was evaluated using a visual analogue scale (VAS). OHRQoL was evaluated using the OHIP-14. Questionnaires of VAS and OHIP-14 were measured 3 months after wearing each of the following prostheses: CD, FP, and MB.

**Results:**

For all questions of VAS and OHIP-14, CD showed significant lower satisfaction compared to FP and MB (p<.00025). FP recorded significant higher VAS scores than MB regarding retention and stability (p<.00007). MB recorded significant higher scores than FP regarding general satisfaction, comfort, ease of cleaning and handling (p<.00008). Regarding OHIP-14, no significant differences in OHIP scores between FP and MB were observed for all domains of OHIP.

**Conclusions:**

"All-on-4" implant rehabilitation of edentulous mandible with FP and MB achieves high patient satisfaction and OHRQoL compared to CD. No significant difference in OHRQoL between FP and MB was observed. Regarding VAS, FP rated greater satisfaction with retention, stability and chewing compared to MB. However, MB rated greater satisfaction with ease of cleaning and handling compared to FP.

**Clinical Relevance**

Milled bar overdentures are not less efficient than fixed prosthesis for All-on-4 rehabilitations regarding patient satisfaction and OHRQoL. While patients who gave priority to stability and chewing ability may prefer the fixed prostheses over removable prosthesis, more patients prefer the long bar-retained overdentures (on four to six implants) than fixed prosthesis in terms of general satisfaction and ease of cleaning.

**WOULD YOU LIKE TO STAY UP TO DATE WITH THE MOST CURRENT CLINICAL DENTAL RESEARCH?**

You are not alone for continuing education! You have the opportunity to join like-minded clinicians in the community and challenge yourself to learn in a friendly non-judgmental atmosphere. We would love to have you for study club events, lecture presentations, and treatment planning seminars. For more detail on future events, please contact us!