

# GINGIVAMOLL®

Flexible Gingival Epithesis, elastic, heat curing and clinically tested silicone material



Temporary replacement for receded gingiva – after the completion of periodontal treatment



After implantations for the correction of aesthetic and phonetic insufficiencies



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# GINGIVAMOLL®

Flexible Gingival Epithesis, elastic, heat curing and clinically tested silicone material.



Gingival retraction and root exposure are often the unavoidable consequences following treatment of periodontal pockets with curettage or flap-surgery. Aesthetics, especially in the anterior region, but also phonetics are frequently impaired for years, hard plastic prostheses were recommended to cover these defects. When the narrow indications were strictly followed, the prostheses proved themselves to be of value.

A major disadvantage was, especially with longer masks, the fragility of the prosthesis material. This weakness is overcome with the new material GINGIVAMOLL®. The GINGIVAMOLL®-gingival-prostheses are temporary replacements for receded gingiva. They should be used only after the completion of periodontal treatment.

GINGIVAMOLL® gingival-masks can be used in the maxilla and the mandible to cover gingival retraction and open interdental spaces.

Due to its flexibility the GINGIVAMOLL®-mask can fill even large undercut interdental spaces. Additionally, there is a slight splinting action on the teeth covered by the mask, and phonetic insufficiencies can be corrected.

GINGIVAMOLL® is a material developed and clinically tested especially for flexible gingival-masks. As opposed to hard prostheses, the soft plastic mask is suited for long sections of the dental arch e.g. from molar to molar. Stability and durability of the mask form, as well as mucosa compatibility are the special advantages of GINGIVAMOLL®.

Economy of material, technical simplicity and pleasing aesthetics fulfill all expectations for a soft mask.

Because the special nature of the elastic material certain restrictions must be observed. The GINGIVAMOLL®-mask serves primarily as a temporary treatment. The mask may become stained with time, though this varies greatly among individuals.

It is therefore recommended that two masks be made from each impression, which can be easily accomplished. Two masks are sufficient for at least one year of cosmetically problemfree treatment, depending on mask care. The production of a duplicate in the same procedure makes the mask more economical.

The gingival mask should be removed before applying plaque disclosing solutions containing malachite or fuchsin, and should only be reinserted after all traces of the disclosing solution have been completely removed.

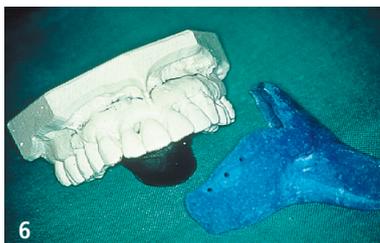
The mask can also be stained by tar containing (smoking) products. Recommendations for cleaning the mask should be followed carefully. The GINGIVAMOLL®-ASSORTMENT contains two transparent base colours and one opaque. Two colours for characterization and a protective lacquer are planned. A tube of material for correction and repair is included to complete the set.

# Technique and Instructions



## 1. Impression Tray

- Prepare custom impression tray (vestibular). Draw the outline of the tray on the study model **(1)**.
- As a spacer adapt wax or paper (2 mm thick) or a similar material over the outlined area **(2)**. Insulate the area as usual.
- Form a tray out of cold-curing acrylic with a doughy consistency, or adjust a prefinished plastic tray to the model **(3)**. Place perforations along the entire border of the tray **(4/5/6)**.



## 2. Impression Taking by Dentist or Dental Hygienist

- a) Insert the tray for control (7).
- b) To aid in impression taking, prepare a palatal Silaplast block (8) in the mouth the same length as the mask is to be. The Silaplast block should reach close to the incisal border (palatal) (9). Advantage: good reposition on the impression.
- c) After the block is hard remove it from the mouth, reduce the interdental projections to  $\frac{1}{4}$  of the buccolingual length, then reposition the block (10/11). On longer impressions e.g. from molar to molar, it is recommended that the interdental surfaces be painted with a separating medium (Vaseline).





### 3. Impression Taking with Elastic Precision Impression Material

- a) Coat the tray lightly with adhesive and allow it to dry slightly.
- b) Mix impression material according to directions. Fill syringe and tray with material from the same mixture.
- c) With the syringe material fill the interdental spaces and coat tooth necks (12), immediately thereafter insert the tray in place.
- d) Apply light pressure and where indicated use the lip to model the apical border of the impression. Avoid pressure points, the finished mask will be pushed away at these positions (13).

### 4. Removing the Impression

- a) First remove palatal Silaplast block, then the tray and impression. Avoid of possible tearing the impression. Unsuccessful impressions should be repeated. Do not make interdental corrections on the working model – it will affect precision.
- b) Check the impression. Remove excess material, or unnecessary retention and sulcus borders with a fine pair of scissors. Adhere Silaplast block exactly to the impression, with Cyanoloid-adhesive (14).



### 5. Making the Work-model

- a) Bubble-free hard stone white (15).
- b) With a soft pencil draw the definitive outline of the mask.
- c) Enamel-cement border to one side and the mucogingival junction to the other.



## 6. Modelling the Mask

- a) With pink wax fill and cover interdental spaces and tooth necks to their natural contours; staying within the pencilled outline of the mask. The mucogingival margin should be given its final thin and tapering outline (16).
- b) The surface of the mask must also be given its final appearance and characterization (17). The papillae, gingival margin etc. must be so modelled that any differences to the neighbouring natural gingiva are not noticeable. (Based on cleaning requirements stippling must be omitted).

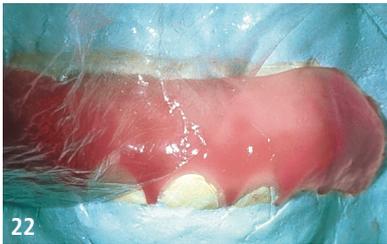
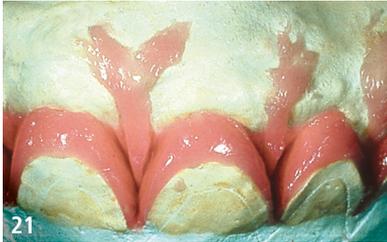
Attention: After the material has set, contouring and polishing are no longer possible. For this reason special attention must be paid to modelling at this stage.



## 7. Embedding the Model in the Flask

- a) Trim the model to the wax-tooth neck border or use a plaster knife to trim close to this border (18). Don't leave any undercut positions (Exactness of fit on tooth neck).
- b) Embed as usual with white plaster but the counter must be stone (because of 40 bar/70 PSI pressure) (19).





## 8. Pressform

- a) Remove the wax and apply separating medium as usual (20). Let both parts cool for 3 min. Then apply two coats of separator.
- b) After the first application allow 4 hours to bench-dry, or only ½ hour bench-drying and then drying in circulating hot air at 40 °C/104 °F for approx. 20 minutes. This facilitates the packing of the silicone material.

## 9. Packing Procedure

- a) Place GINGIVAMOLL®-Opaque in the interdental spaces and on the tooth-necks. With a piece of polyethylene foil press it in place (21). To increase lifelike naturalness, light-pink pieces can be laid interdentally at this point.
- b) Cut to shape GINGIVAMOLL® pink in the selected tone. Lay the prepared cover layer over the area of the gingival mask, place a piece of prepared foil (tension reduces by crumpling). Close flask.

## 10. Pre-pressing

- a) With short intervals apply pressure to the flask in order to give the slowly flowing material time to adapt (22). Finally apply max. 40 bar (70 PSI) pressure to the flask for about 10 minutes.
- b) Carefully open the flask and remove any excess. Lay a fresh piece of stress-relieved foil over the material and reapply pressure for approximately 5 minutes longer.
- c) Strictly apply flask clamp

## 11. Polymerization

Polymerization is done in a drying oven or in a circulatory dryer at 130 °C/266 °F ( $\pm 5$  °C/41 °F). Place the flask into the pre-heated oven/dryer at 130 °C/266 °F (control the temperature inside the oven/dryer with a thermometer). Polymerize for approx. 2 hours **(23)**. Allow the flask to cool in the air (never in water!).

For an easier removing of the PE-foil, after 30-45 minutes take the flask, remove the foil, close the flask, screw clamp tightly and continue polymerizing.



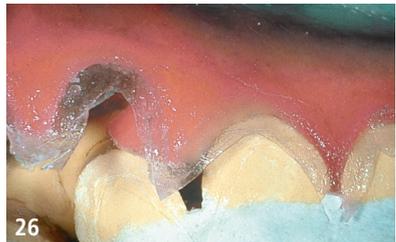
## 12. Removing the Mask from the Model

- Carefully open the flask.
- Use a sharp scalpel to trim the flash to within 1 mm of the mask border **(24/25)**.
- With a blunt spatula and warm water sprays the mask can be loosened from the model (Allow pauses when removing the mask from retention areas) **(26)**.



## 13. Re-using the Press Model for Reserve-Mask

- The intact form, repaired if necessary, should be cleaned with compressed air, briefly rinsed with hot water (80 °C/176 °F), allowed to dry, and receive a coat of separator (only to model part). Only after at least 1½ hours can the packing procedure, as described previously, be begun again.





## 14. Finishing

- a) The thin flash margin along the necks of the teeth should now be removed with a new and sharp scalpel when possible in one cut (**27**). (The more tabs from cutting the greater the danger of tears developing!)

The apical margin of the mask in the region of the frenulum can best be trimmed with fine scissors or a scalpel (**28**).

- b) Exactness of the mask can now be tried in the mouth, never on the model (loss of retentions!).

## 15. Colouring

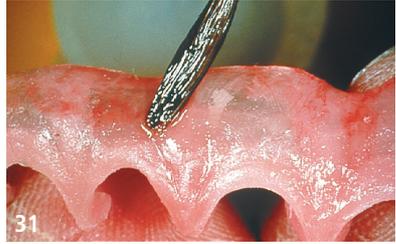
The mask can be colour shaded (pigment deposits) where necessary – mask must be clean and dry. Colour shades and liquids are provided for this purpose (**29/30**).

## 16. Protective Lacquer

- a) After the pigments have air dried the protective finish (lacquer) can be applied with rapid strokes with a fine brush (No. 2, use dappen dish) **(31/32)**. Do not allow any pools of liquid to form, these could adversely affect the fit.
- b) Important: However, this lacquer causes stresses to build up in the epithesis, particularly along the thin flashes. To compensate for this stress, first paint the lacquer on the buccal or outer surface of the epithesis and then immediately on the inner surface.

Bottle with protective lacquer has to be closed immediately after each use! Air and warm temperatures thicken the protective lacquer. A chemical bond on the mask surface becomes thus impossible.

- c) After applying the lacquer, place the epithesis at room temperature on a dust-free plate in the oven (air circulation), increasing the temperature to a maximum of 130 °C/266 °F for 10 to 15 minutes.



Please follow the instructions of the safety data sheets!

Security advice: Unpolymerized epithesis material contains dibenzoyl peroxide (benzoyl peroxide).  
May produce an allergic reaction.

# Use and maintenance care of the GINGIVAMOLL® epithesis

## Dear Patient,

Your new flexible gingival epithesis has many advantages. It resembles natural gingiva, is comfortable to wear and is resistant to mechanical pressure. Please read this handout carefully and follow the guidelines, particularly the maintenance care, to maximize the use of your new gingival epithesis.

## 1. General

Always moisten the gingival epithesis with tap water before inserting it. This helps to slide the interdental tags between the teeth. Firstly, insert the correct interdental tag into the interdental space between your two front teeth. The adjacent tags can then be fitted into place sequentially. Take the epithesis out of the mouth slowly and with care. Prior to inserting the epithesis, it is important to brush your teeth properly with tooth paste to prevent root caries from forming under your epithesis. The gingival epithesis will discolour quicker when plaque and other dental deposits accumulate on your teeth. Please note that heavy smoking and the frequent consumption of tea, coffee and wine can cause discoloration and staining of the epithesis.

The gingival epithesis is not be used in conjunction with a woundpack, e.g. with Fluoride-Gel.

## 2. Cleaning

Remove the gingival epithesis after each meal and rinse it well using tap water. Rinse the gingival epitheses with water after each meal, especially

after drinking fruit or vegetable juices (colouring!). Rinse also your mouth carefully with water to flush out the colouring. At least once daily the epithesis must be thoroughly cleaned. This is best done using a liquid soap and a soft tooth-brush.

At night epithesis should possibly not be kept in the mouth. After thorough cleansing one can keep the epithesis over night in a mouth rinsing solution, e.g. ACT Anti-plaque (red coloured). Before inserting again rinse well.

The "reserve" epithesis that has not been worn in the mouth should be stored in a dry and light-protected place.

Attention: Most commercial denture cleaners cause bleaching of the epithesis after a short period of time and therefore cannot be recommended. After using Fluoride-Gel wait for approx. ½ hour before re-inserting.

## 3. Periodic Renewal

Two to three flexible gingival epithesis can be fabricated from each impression taken by the clinician. This is normally sufficient for at least one year if the maintenance care is properly carried out. Make an appointment for a new impression when you insert your last epithesis for the first time. This can be conveniently combined with your scheduled recall appointment. New impressions are necessary to compensate for minimal changes occurring to gingiva and tooth positions which may affect the subsequent snug fit of a new epithesis.

# Hygienic care and cleaning recommendation for flexible gingival epithesis

- The gingival epithesis must be cleaned (plaque-free) once a day on both sides. Liquid soap (dish washing lotion) and a soft tooth brush are recommended.
  - Remove the epithesis after each meal and rinse thoroughly with water (aroma!).
  - Rinse especially the mouth with water after drinking fruit- or vegetable juices (colouring!).
  - After thorough cleaning the epithesis can be left overnight in an Antiplaque solution, e.g. „ACT“ or „Piax“ (red coloured) as a protective measure.
  - Rinse with water prior to re-insertion into the mouth.
  - A new (reserve) epithesis should be stored in a dry and light-protected place.
  - Special note to smokers: Tar-containing products may cause irreversible discoloration of the epithesis.
  - „Correga“ and „Kukident“ (or other similar available) denture cleaners may cause bleaching after a short time and cannot be recommended.
  - The gingival epithesis is not to be used in conjunction with a woundpack, e.g. with Fluoride-Gel.
  - Plaque-colouring with e.g. Malachite (green) or Fuchsin (red) must be completely rinsed out of the mouth prior to re-insertion.
  - Replacements of epithesis can be made from the same model at a later time, e.g. one year, if the mouth situation and the working model are still unchanged. Fabrication costs are then respectively less.
- In conclusion we advise you to clean your teeth plaque-free according to your dentist's instructions – it is for your own benefit.
- PS: Please hand out to your patients a copy of this instruction.**

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## Ordering Information

<b>Complete set</b>	<b>03020</b>
base material, pink	5 x 5 g
base material, light pink	5 g
base material, opaque	20 g
paint liquid, bottle of	15 ml
protective lacquer, bottle of	15 ml
paint colours blue/red, paint brush, Dappen glas, each	1 pc.

<b>Starterkit</b>	<b>03053</b>
base material	
pink/light pink, each	2,5 g
base material, opaque	4 g
protective lacquer	5 ml
paint colours blue/red, each	1 pc.
paint liquid	5 ml
paint brush	1 pc.

## DETAX

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Caution: Federal U.S. law restricts this device to sale by or  
on the order of a dentist (or trained specialist personell).



Made in  
Germany

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