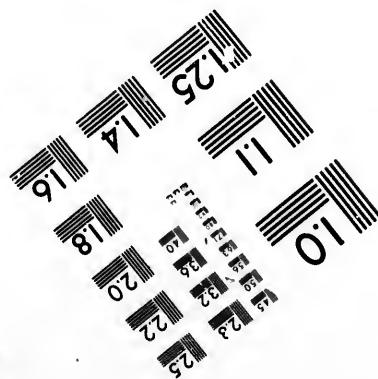
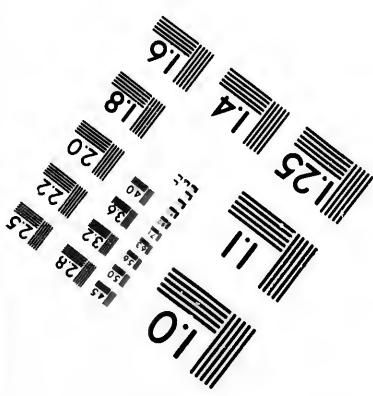
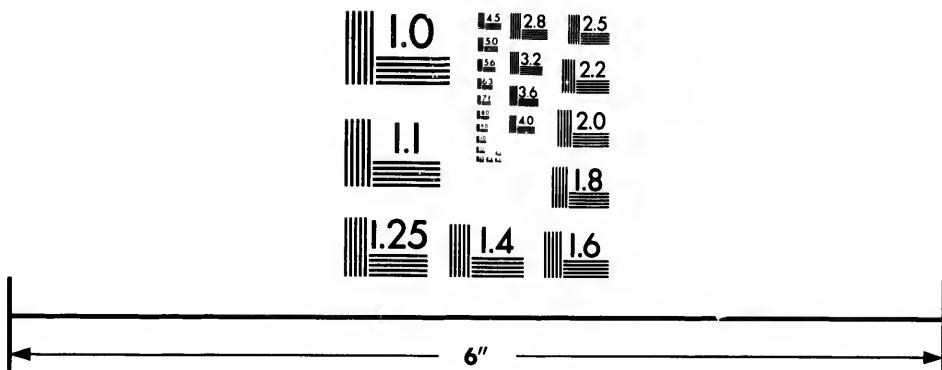


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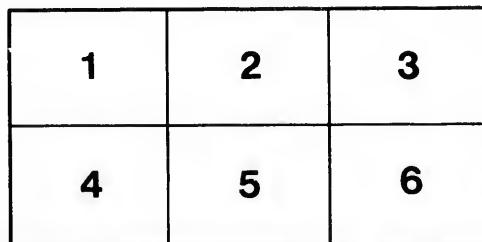
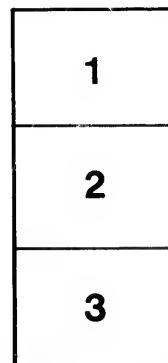
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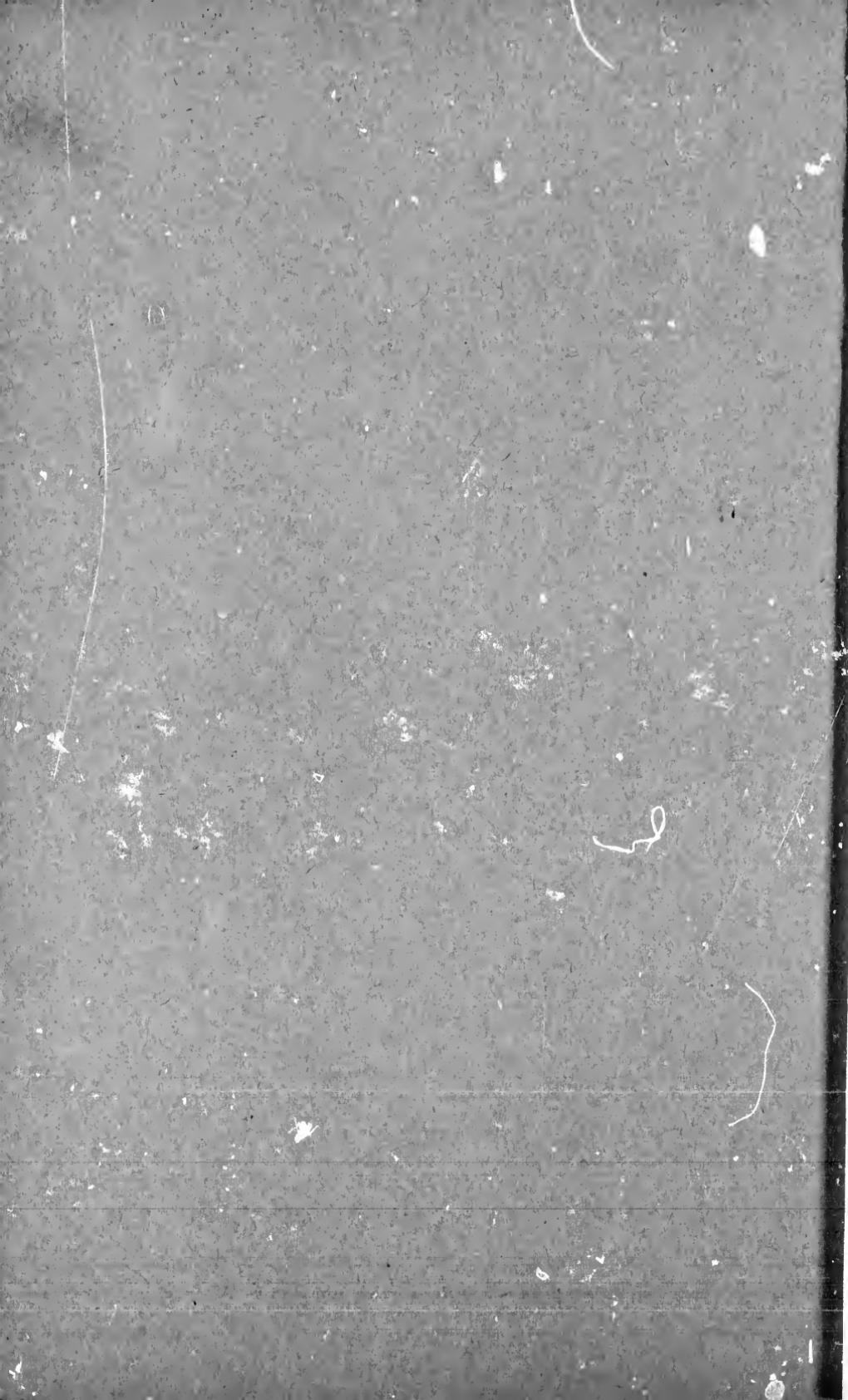
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COMPLIMENTS OF
PETER BROWN, L. D. S.

A TREATISE
ON
CROWNS AND BRIDGES,
OR THE ADJUSTMENT OF TEETH WITHOUT PLATES,
WORK

1892.

Entered according to Act of Parliament of the Dominion of Canada, in the year
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PREFACE.

Knowing that the crowning and bridging of teeth is but imperfectly understood by the public, and feeling that it is the duty of Dental Surgeons to keep their patients posted in all that is new, I have prepared this illustrated pamphlet to show what can be accomplished in this department.

PETER BROWN, SURGEON DENTIST,
56 Beaver Hall,
Montreal.

CROWN AND BRIDGE WORK.

Great progress has been made in conservative dentistry in the last ten years, and in no department has greater advancement been made than in the crowning and bridging of teeth.

A dentist who understands this important branch of Prosthetic Dentistry is enabled to save teeth and roots that a few years ago were extracted by thousands; he is also able by adjusting teeth to natural roots to save patients the annoyance and discomfort of wearing a plate, to say nothing of the irritation to which the sensitive tissues of the palate are subjected by the contact of nonconducting material like vulcanite. The successful practice of crown and bridge work demands the greatest skill, finest manipulation and best judgment; it also requires some originality in methods of construction and application, for many of the cases presented for treatment are most complicated. The adjustment of crowns or bridges to diseased roots cannot be too severely condemned, as also the construction of crowns or bridges without due consideration of the force and direction of mastication.

Many persons have an idea that the removal of a pulp (nerve) in the preparation of a tooth for a crown or bridge is attended with great pain. This is erroneous, for a pulp (nerve) can now be removed without any pain by the use of cocaine or ether spray. It may also be added that a pulpless (without nerve) tooth or root will remain as firmly attached to the alveolar wall as it would if the pulp (nerve) were intact, and a properly constructed crown or bridge, carefully adjusted, will give as good service as the natural teeth.

Fig. 1 shows a vertical section of a lower incisor and jawbone (15 diameters); 1, enamel; 2, dentine; C. is placed in space occupied by nerve (pulp); that is the canal that receives the pin of an artificial crown; 3, cementum; 4, periosteum which supplies the root with nutrition and serves as a cushion to relieve force of mastication; 5, bone of lower jaw.

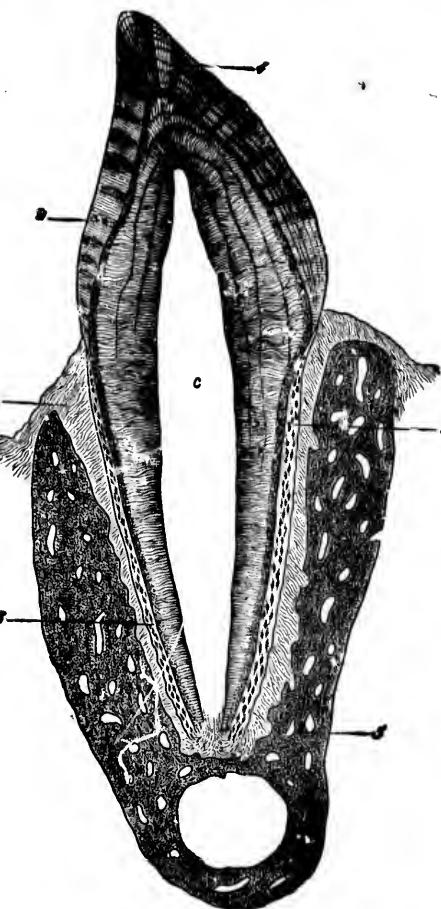


Fig. 1.

TEETH WITHOUT PLATES.

3

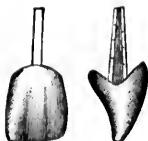


Fig. 2. Front and side view of crown with pin in place.

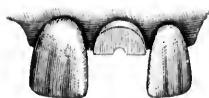


Fig. 3. Central root on left side of mouth prepared to receive the crown.



Fig. 4. Shows artificial crown in position.



Fig. 5 shows sections of root and artificial crown.



Fig. 6 shows section of lower molar and artificial crown.



Fig. 7. Lower molar with crown in place.

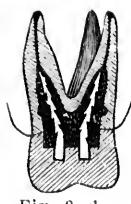


Fig. 8 shows section of a molar tooth of the upper jaw and artificial crown.

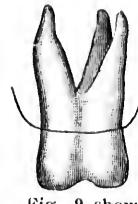


Fig. 9 shows same tooth and crown in place.



Fig. 11 shows artificial tooth ready to be adjusted to model, Fig. 10.

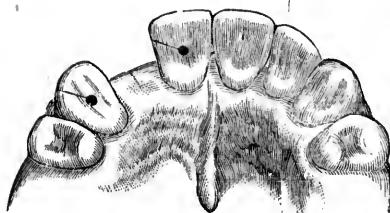


Fig. 10. Model showing the lateral tooth on right side of mouth missing.



Fig. 12. Model showing the tooth in place.

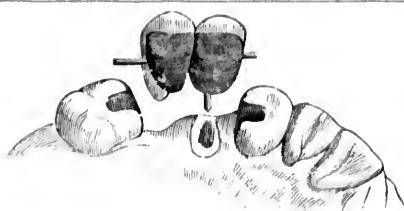


Fig. 13.

Fig. 13. Model showing two teeth on right side of mouth missing, but one root in place, and artificial bridge tooth ready to be adjusted.

Fig. 14. Model showing teeth in position.

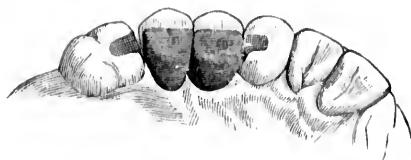


Fig. 14.

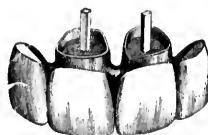


Fig. 16.

Fig. 16. Artificial bridge of four front teeth ready to be adjusted to model, Fig. 15.

Fig. 15. Model showing both lateral teeth missing but the two central roots in place.

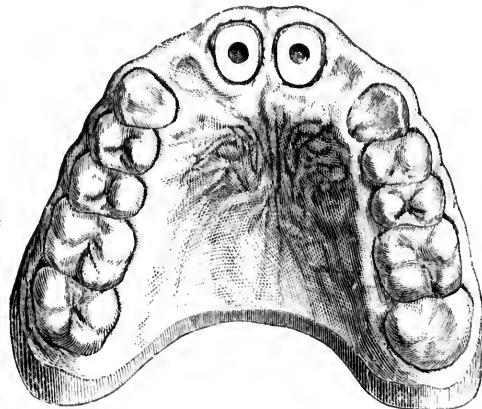


Fig. 15.

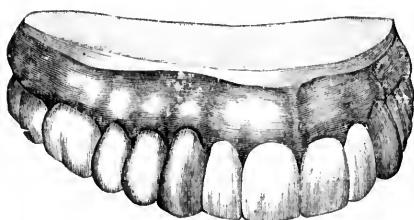


Fig. 17.

Fig. 17, showing model, Fig. 15, complete with four artificial teeth in position and held in place by being cemented to the two central roots.



Fig. 19.

Fig. 19 shows bridge piece of six teeth ready to be adjusted, to model, Fig. 18, the pins to be cemented into eye teeth roots.

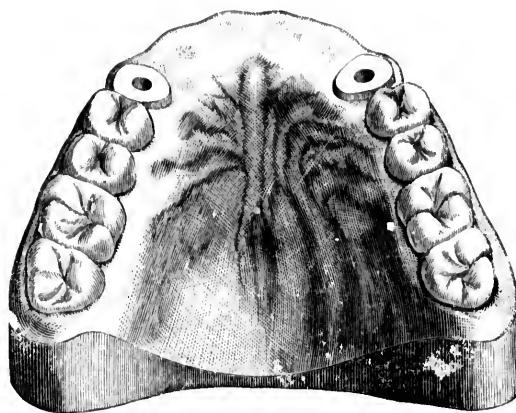


Fig. 18.

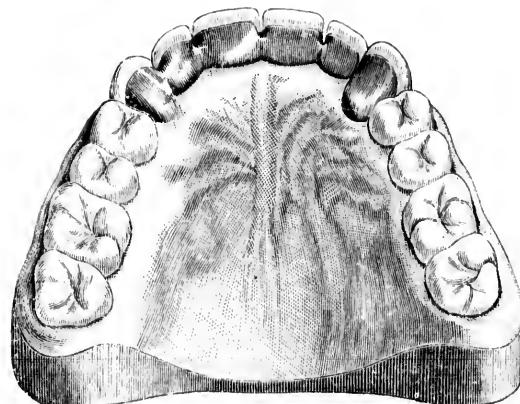


Fig. 20.

Fig. 20. Model showing inside view of model, Fig. 18, complete with artificial teeth in place and joined together with gold bar.

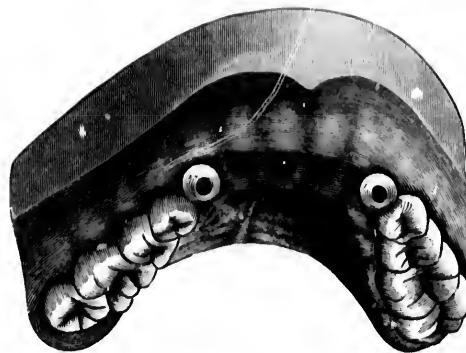


Fig. 21. Model showing four front teeth missing and eye teeth roots in place.



Fig. 22. Bridge piece of six front teeth to be cemented to eye teeth roots.

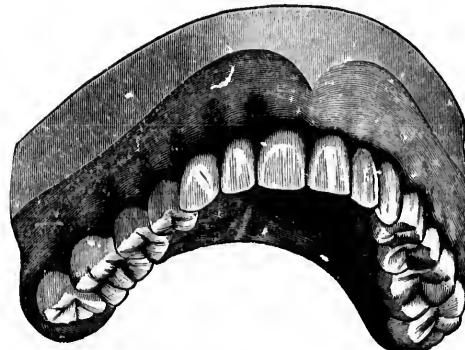


Fig. 23. Model showing case complete with bridge in place.



Fig. 24.

Fig. 24. Model of case that is very common, where the four front teeth are missing.



Fig. 25 shows bridge piece of four teeth and bands that encircle eye teeth.

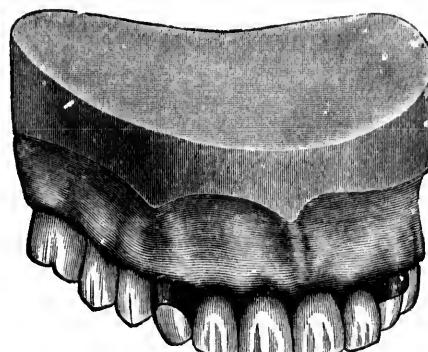


Fig. 26.

Fig. 26 shows case complete with bridge in place.

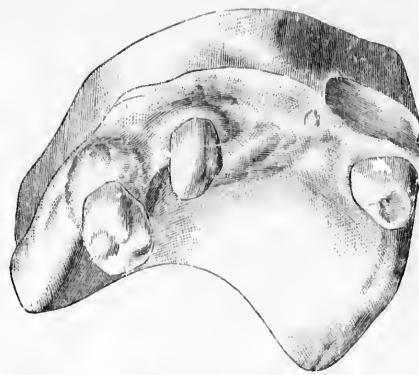


Fig. 27. Model showing both canine (eye) teeth and molar in jaw.



Fig. 29. Model showing Fig. 27 after the adjustment of the bridge.

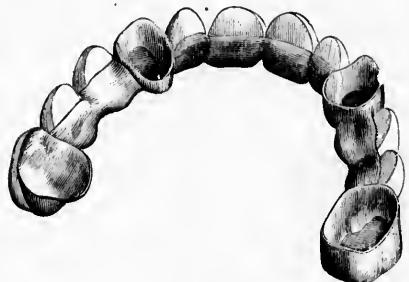


Fig. 28.

Fig. 28. A bridge of twelve teeth to be adjusted to model 27.

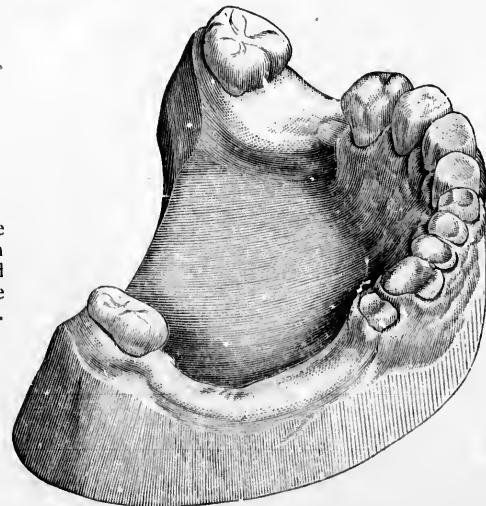


Fig. 30. Model showing case for a lower jaw with front teeth badly worn and two molars and a bicuspid absent on one side and a molar missing on left side.

Fig. 30.

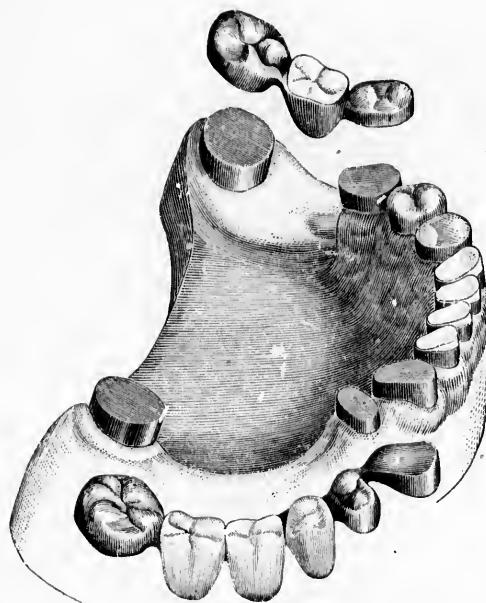


Fig. 31.

Fig. 31 shows model, Fig. 30, with front teeth capped and the bridge pieces ready to be adjusted.

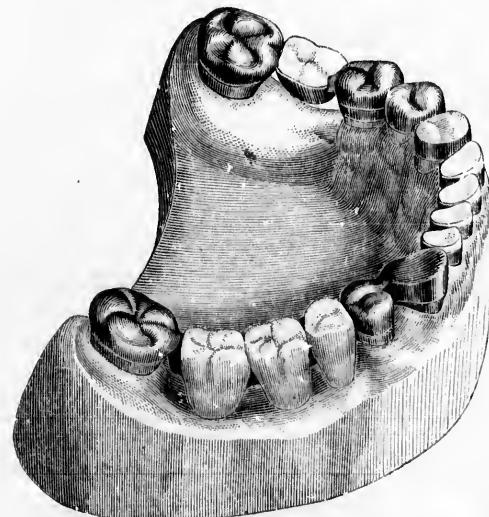


Fig. 32 shows case with bridges in place.

Fig. 32.

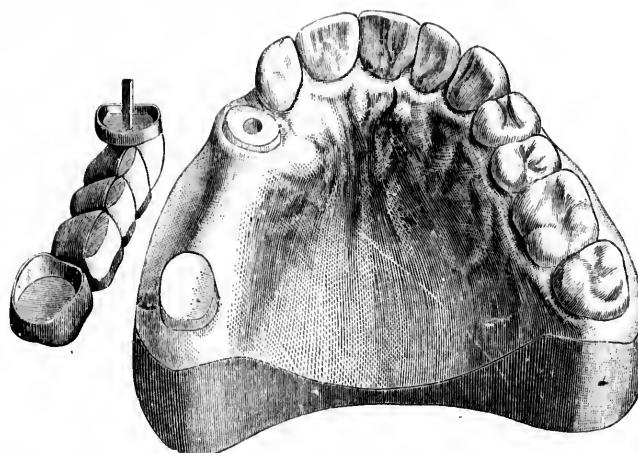


Fig. 33. Model showing two molar and one bicuspid missing and the root of first bicuspid in place, also the crown of last molar in position, bridge piece ready to be adjusted.

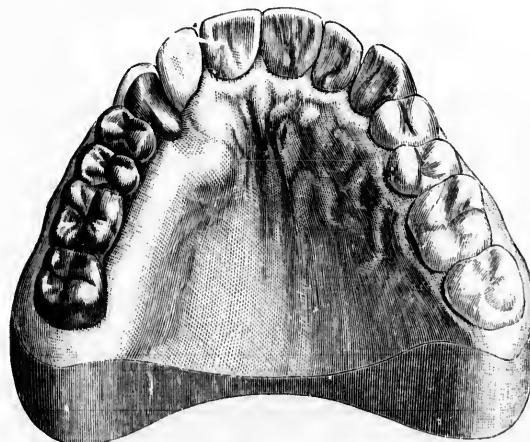


Fig. 34 shows case complete with bridge cemented in place.

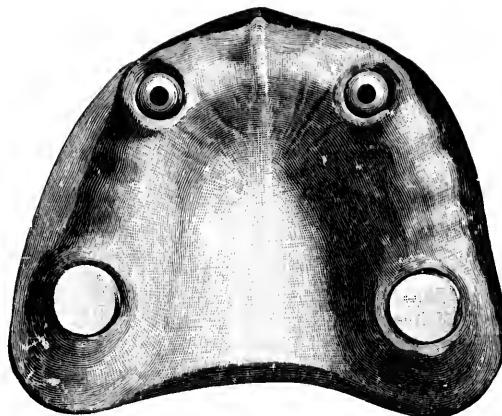


Fig. 35.

Fig. 35 shows model of upper jaw with both canine (eye) teeth roots in place as also the two last molars.

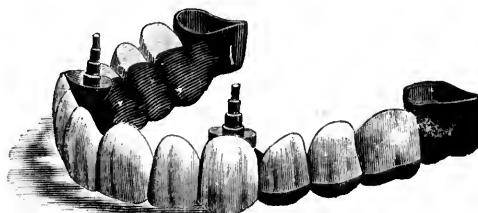


Fig. 36.

Fig. 36 shows a bridge piece including all of the teeth (a complete denture) ready to be adjusted.

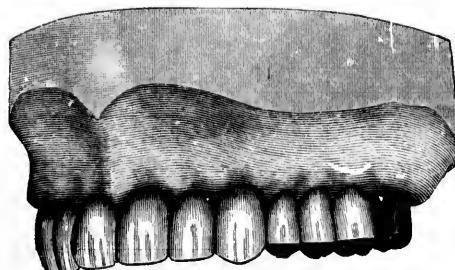


Fig. 37.

Fig. 37 shows case complete with bridge in position.

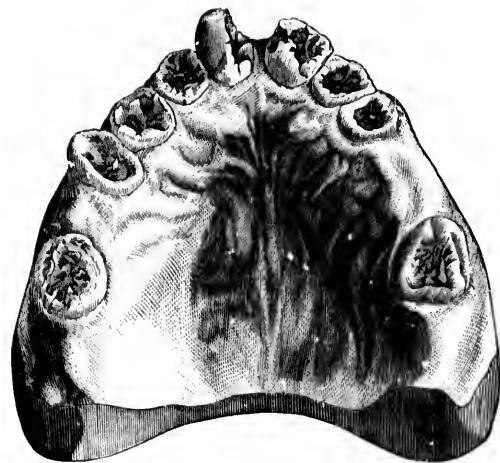


Fig. 38 shows a case with nine teeth so badly decayed as to be impossible to save by filling.

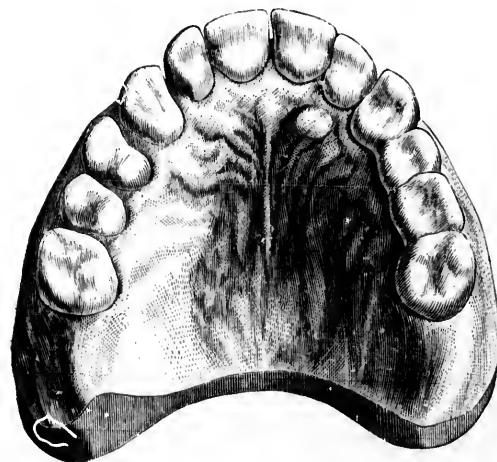


Fig. 39 shows case complete with crowns and bridges adjusted to the nine roots.

