

Seniors

Seniors is a range of only posterior teeth including LOP (Long-centric occlusal pattern) Posterior which is the improved lingualized posterior, 0° and 10° posterior.

Delivery forms

- 16 A-D shades
- Posterior moulds:
 - LOP (Long-centric occlusal pattern) posterior: 28MU, 28ML, 30MU, 30ML, 32U, 32L
 - 0 degree posterior: 029U, 029L, 031U, 031L, 033U, 033L
 - 10 degree posterior: 130U, 130L, 132U, 132L, 134U, 134L
- Standard packaging specification: 1*8/card for posterior, 12 cards/box



1*8/card for posterior
12 cards/box



Long-Centric Occlusal Pattern (LOP)

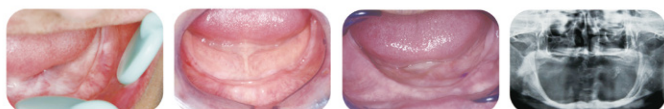
In 2005, Prof. Jun Xu from Peking University School of Stomatology, the Chinese national key stomatology college and medical institution, which is the largest international medical institution that is providing oral specialty services, designed the LOP (Long-centric occlusal pattern) posterior, which can be applied to patients with severe resorption of alveolar bone and very flat alveolar ridge. It can significantly improve the retention of complete denture and realization of masticatory efficiency.

The Design Of LOP (Long-Centric Occlusal Pattern) Posterior Provides

- Simple to finalize the occlusion
- Easy to adjust the occlusion
- Comfortable wearing & low revisiting rate
- Protect the alveolar ridge effectively; improve patients' life quality

Application Range

- Residual ridge is flat; alveolar bone resorption is severe and even to the maxillary bone body.
- There is a wide mismatch in the mandibular arch relationship; the unilateral anti-jaw is over 10mm.
- Maxillo-Mandibular Relationship is not stable and even cannot be identified.
- All lining mucosa transforming appears in the stress-bearing area.
- All patients who are suitable for anatomical occlusion.
- Complete implant covers complete denture repairing.



Case From LOP (Long-centric occlusal pattern) Posterior



Seniors

Occlusal Contact Of Lop (Long-Centric Occlusal Pattern)

- Occlusal contact of Centric Occlusion. Contact of lingual cusps of $\overline{54|45}$, mesial lingual cusps of $\overline{76|67}$ and mandibular fossae.



Centric occlusion (Maxillary)



Centric occlusion (Mandibular)



Centric occlusion (lingual view)

- Occlusal contact of Protrusive Occlusion. When anteriors contacts, the mesial slopes of distal marginal ridges on $\overline{76|67}$ will contact the distal slopes of mesial lingual cusps on $\overline{76|67}$.



Occlusal contact of Protrusive Occlusion (Maxillary)



Occlusal contact of Protrusive Occlusion (Mandibular)

- Occlusal contact of Lateral Occlusion. Working side: contact of upper lingual cusp and lingual wall of lower fossae. Balancing side: contact of upper lingual cusp and buccal wall of lower fossae.



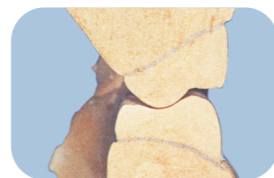
Occlusal contact of Lateral Occlusion (yellow arrow: working side, green arrow: balancing side)

Occlusal Adjustment Methods

- For centric occlusion, adjust the cusp not fossa. Three contact points on one side is ok, but with four points is best.
- For protrusive occlusion, adjust fossa incline not the tooth cusp. It can be only one contact point on both sides of the posterior.
- For lateral occlusion, adjust fossa wall not cusp. It is ok when two contact points of both working side and balancing side respectively make contact.



Centric occlusion (left side)



Centric occlusion (right side)



One cusp & one slope on the working side of Lateral Occlusion



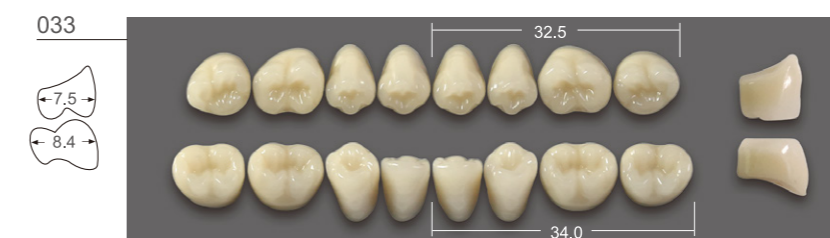
One cusp & one slope on the balancing side of Lateral Occlusion

Seniors

POSTERIOR LOP

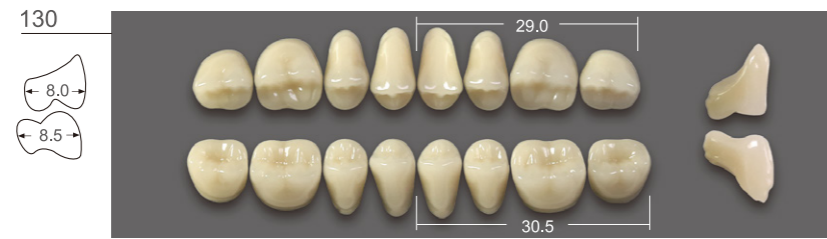


POSTERIOR 0°



Seniors

POSTERIOR 10°



Seniors Combined Articulations

Maist anteriors		Seniors posteriors	
Upper	Lower	10°	LOP
S1	L1	130	28M
S2	L2	130	28M
S3	L2	132	30M
S4	L3	134	/
S5	L7	134	32
S6	L8	134	32
T1	L1	132	28M
T2	L2	132	28M
T3	L5	130	30M
T4	L6	130	32
T5	L8	134	32
T6	L7/L11	134	32
T7	L3	130	30M
T8	L11	130	30M
T9	L11/L12	130	30M
O1	L1	130	28M
O2	L1	130	28M
O3	L2	132	/
O4	L4	132	/
O5	L7/L11	134	32

KAIJING anteriors		Seniors posteriors		
Upper	Lower	0°	10°	LOP
SS1	SS1	029	130	28M
SS2	SS2	029	130	30M
SS3	SS3	031	132	32
SS4	SS4	031	132	/
C1	C1	029	130	28M
C2	C2	029	130	30M
C3	C3	031	132	32
C4	C4	031	132	/
T2	T2	029	130	/
T3	T3	031	132	/

Seniors Combinated Articulations

Sonning anteriors		Seniors posteriors		
Upper	Lower	0°	10°	LOP
S2	L2	029	130	28M
S3	L5	029	130	/
S4	L7	029	130	/
S5	L5	029	130	/
T1	L1	029	130	28M
T3	L6	029	130	30M
T4	L6	029	130	/
T5	L7	029	130	32
T6	L7	029	130	32
T7	L7	029	130	/
T9	L11	029	130	/
T11	L11	031	132	/
T12	L14	031	132	/
O5	L8	031	132	/
O8	L14	033	134	/

Bluebell anteriors		Seniors posteriors	
Upper	Lower	0°	10°
S1	L2	029	130
S2	L4	029	130
S3	L7/L8	031	132
O1	L3	029	130
O3	L6	031	132
S4	L9	033	132
O4	L10	033	132
SS3	L9	031	132
SS4	L9	033	132
T2	L5	029	130
T3	L7	031	132
T4	L10	031/033	132
T5	L12	033	134
T6	L13	033	134

KAILI anteriors		Seniors posteriors	
Upper	Lower	0°	10°
S2	L2	029	130
S4	L4	029	130
S6	L6	029	130
S8	L8	031	132
T2	L2	029	130
T4	L4	029	130
T6	L6	029	130
T8	L8	031	132
T10	L10	033	134