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## Comparison of Methods of Recording the Vertical Dimension in Edentulous Patients: A Literature Review

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## **INTRODUCTION**

Complete dentures are constructed to function in the mouth as an integral part of the masticatory apparatus, and, therefore, they should be designed to conform to the patient's physiologic jaw relations, who have lost their remaining natural teeth or soon to lose them (1). The loss of teeth tends to result in the alteration of vertical dimension, due to changes in soft and hard tissues of face and jaw region. Vertical dimension is defined as: - "The distance between two selected anatomic and marked points (usually one on the tip of the nose and the other upon the chin) one on a fixed and one on the movable member" – GPT 8. Vertical dimension of occlusion is established by the natural teeth when they are present and in occlusion. In denture wearer, it is established by the vertical height of the two dentures when the teeth are in contact. Methods such as Silverman's closest speaking space, swallowing method, finger method, craniofacial landmarks and more, have been used by clinicians since years. A simple method which is more precise and accurate, less time consuming and inexpensive should be preferred. The outline of this review article revolves around finding a clinically reliable and suitable method for determining VDO in edentulous patients.

This paper aimed to render a comprehensive literature review of methods of recording the vertical dimension in edentulous patients. A search was made through MEDLINE database and Google scholar search engine. The keywords; 'Vertical Dimension', 'edentulous' were searched in title/abstract of publications; limited to 2012 to 2022, restricting to past decade. The inclusion criterion was the technical researches that predominately included studies performed on various methods of recording vertical dimension in completely edentulous patients. The exclusion criterion was studies done on dentulous patients. A total of 128 articles were retrieved, recited by authors and only 21 met the specified inclusion criteria for this review.

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Short listed articles had used various methods of recording VD in edentulous patients. This review portrayed numerous methods employed in recording VD and confirmed that which ones are reliable and better than rest.

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