



HEB

**Journal of Prosthodontics Dentistry (JOPD)**  
**An Official Publication of Bureau for Health & Education Status Upliftment**  
 (Constitutionally Entitled As Health-Education, Bureau)

JOPD

## Palatal obturator prosthesis: A clinical case report

*Dr. Shital D. Nile Patil, Dr. Saleha I. Shaikh, Dr. Ashwini V. Bharsakle, Dr. Ranjeet N. Doltade,  
 Dr. Satyajeet Y. Londhe*

Department Of Prosthodontic Crown & Bridge & Implantology, Aditya Dental College, Beed, Maharashtra.  
 Department Of Prosthodontic Crown & Bridge & Implantology, Aditya Dental College, Beed, Maharashtra.  
 Department Of Prosthodontic Crown & Bridge & Implantology, Aditya Dental College, Beed, Maharashtra.  
 Department Of Prosthodontic Crown & Bridge & Implantology, Aditya Dental College, Beed, Maharashtra.  
 Department Of Prosthodontic Crown & Bridge & Implantology, Aditya Dental College, Beed, Maharashtra.

**Email ID: serviceheb@gmail.com**

### ABSTRACT

This clinical report describes the details of a prosthodontic rehabilitation of an elderly patient who was diagnosed with mucoepidermoid carcinoma. The palatal defect has caused problems in phonetics and mastication. A previous obturator was made using conventional Polymethyl methacrylate (PMMA). This obturator has caused some discomfort due to food impaction and irritation of the fitting surface over the tissue defect areas. This had resulted in frequent erythema of the areas. Therefore, a new palatal obturator was made still using PMMA but with an addition of an indirect soft acrylic resin over the defect areas. The soft acrylic resin serves to reduce painful irritation of the obturator over the soft tissues around the defect areas. The review appointments up to 6 months revealed satisfactory results with no deterioration in the prosthesis. However, upon the follow-up appointment at 9 months, we could see some stains on the fitting surface where the indirect soft acrylic resin was placed. Swabs were taken from the black area on the obturator and the related mucosa intraorally. The swabs were sent for a culture and sensitivity test to find microorganisms that caused the staining. The result confirmed that there were no microorganisms at both areas. This condition suggested that stain could occur on the surface of soft acrylic resin despite good oral hygiene practised by the patient. Further reviews will be made to monitor the condition.

**Keywords:** Obturator, mucoepidermoid carcinoma, maxillary defect, prosthesis, clinical report.

### *Access this Article Online*

Website: <http://heb-nic.in/jopd-issues/>

Quick Response Code:

Received on 26/06/2023  
 Accepted on 01/07/2023 © HEB All rights reserved

