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# LuxaBite



With the friendly cooperation of :

David Hornbrook, DDS, FAACD, La Mesa, Calif. (USA)

Ross Nash, DDS, Charlotte, NC (USA)

Mark Montgomery, DMD, Salem, OR (USA)

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### Introduction

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Communicating a patient's bite relationship to the dental laboratory for the mounting of casts is one of the most, if not the most, critical step in the fabrication of indirect restorations. Mounting of models for the purposes of diagnosis, fabrication of removable appliances, fabrication of restorations, and/or fabrication of prostheses all require the most accurate transfer of the patient's bite relationship possible.

Dentistry has long realized the value of a rigid bite registration. Over the years many materials have been utilized from plaster to zinc oxide paste to acrylic to wax compounds and, most recently, polyvinyl siloxanes.

**Rigid bite registrations provide the unique combination of the following advantages:**

- no compression on mounting
- highly accurate to the models

- can be used with or without bite registration trays
- the ability to mount several sets of models to the same bite

**Ideally a bite registration material would have**

- little or no resistance to closure of the teeth
- a minimum of expansion and contraction
- be fast setting and easy to trim

**LuxaBite fulfills these requirements.**

Problems have existed with the ability to trim acrylic, polyvinyl, compound, or plaster registrations. LuxaBite overcomes this with its bis-acryl chemistry that is commonly used in temporaries. It is a breeze to trim with high-speed diamonds. LuxaBite also overcomes many of the problems of polyvinyl bites by being rigid and not allowing for a spongy mount. Its rigid nature and resistance to normal temperature variations also overcome the distortion problems of wax bites and make it the ideal bite material for today's required shipping and handling.

**In short, LuxaBite is the bite registration material of choice for the most accurate and stable bite registrations in dentistry today!**

## Indications

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LuxaBite is indicated for bite registrations for all types of bite relationships. It is an invaluable tool in checking the accuracy of plaster models. And it can be used for single tooth, quadrant, or full mouth dentistry.

## Contra-indications

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Known hypersensitivity to bis-acryl products. LuxaBite should not be used to register directly against the tissue of edentulous areas.

## Technical data

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Total working time	45 seconds after start of mix
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Rubbery phase	2:00 to 2:30 min after start of mix
End of setting	4:00 minutes after removal from the mouth
Barcol hardness	25 after 1 h

## Troubleshooting potential problems

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### Cannot remove material or material breaks upon removal

- ▶ Block out undercuts prior to registration.
- ▶ Lubricate bis-acryl temporaries or resin based restorations with glycerin or KY Jelly.

### LuxaBite does not fit model

- ▶ Trim LuxaBite to »cusp tip only« registration.
- ▶ Evaluate accuracy of models and remove any »positives« from the model.
- ▶ Allow full set time of LuxaBite prior to removal from the mouth.

- ▶ Keep LuxaBite limited to four teeth per segment (do not register full arch at one time with one continuous LuxaBite).

### **LuxaBite does not set in normal time**

- ▶ Bleed the tubes 1/4 inch prior to placing mixing tip.

## **Directions for Use**

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### **Single Tooth or Quadrant Restorative Dentistry**

1. Assure even flow of base and catalyst by slightly bleeding the cartridge appr. 1/4 inch each side.
2. Attach tip to LuxaBite cartridge.
3. Block out any potential undercuts such as bridge pontics or open gingival embrasures with polyvinyl or wax materials.
4. Lubricate any bis-acryl temporaries or resin based restorations with thin layer of glycerin or K-Y jelly.

5. Apply adequate amount of LuxaBite to the prepared arch over the prepared teeth and close to desired bite (Fig. 01 & 02).



Fig. 01



Fig. 02

Many laboratories prefer registration over the preparations and no registration over the areas to be facet mounted.

6. Add additional material under the buccal cusps of upper teeth to ensure complete registration of occlusal surfaces (Fig. 03).



Fig. 03

7. Allow material to set 45-60 seconds and have patient slightly separate teeth and then re-close to ensure that the bite registration is not locked on.
8. Wait additional 2 minutes to final set and remove using gloved fingers or gently with a hemostat.
9. After adequate LuxaBite registration is achieved, use an acrylic bur or a high speed diamond to trim bites to a »cusp tip only« registration (Fig. 04).

Remove all deep grooves and occlusal embrasures that may not be well registered in the model work (Fig. 05).



Fig. 04



Fig. 05

10. Mount models with LuxaBite records. Accurate models are required for complete seating of LuxaBite record on the model.

### Taking Fully Closed Bite

1. Assure even flow of base and catalyst by slightly bleeding the cartridge appr. 1/4 inch each side.
2. Attach tip to LuxaBite cartridge.
3. Block out any potential undercuts such as bridge pontics or open gingival embrasures with polyvinyl or wax materials.
4. Lubricate any bis-acryl temporaries or resin based restorations with thin layer of glycerin or K-Y jelly.
5. Apply adequate amount of LuxaBite to the posterior teeth on one side (Fig. 01 & 02)



Fig. 01



Fig. 02

and then apply to posterior teeth on the other side (Fig. 03 & 04).



Fig. 03



Fig. 04

6. Have patient close to full intercuspation. Add additional material under the buccal cusps of upper teeth to ensure complete registration of occlusal surfaces (Fig. 05 & 06).

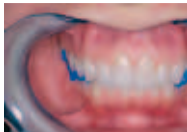


Fig. 05



Fig. 06

7. Allow material to set 45-60 seconds and have patient slightly separate teeth and then reclose to ensure that the bite registration is not locked on.
8. Wait additional 2 minutes to final set (Fig. 07) and remove using gloved fingers or gently with a hemostat.



Fig. 07



Fig. 08

9. After adequate LuxaBite registration is achieved, use a high speed coarse diamond to trim



bites to a »cusp tip only« registration (Fig. 8). Remove all deep grooves and occlusal embrasures that may not be well registered in the model work (Fig. 09).

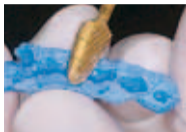


Fig. 09

10. Mount models with LuxaBite records. Accurate models are required for complete seating of LuxaBite record on the model.

### Taking an Open Bite Centric Record

- ▶ Follow Steps 1-4, then chose either Anterior NTI/Pankey Jig Technique (see page 9) or Anterior Ball Technique (see page 11).
1. Assure even flow of base and catalyst by slightly bleeding the cartridge approximately 1/4 inch each side.
  2. Attach tip to LuxaBite cartridge.

3. Block out any potential undercuts such as bridge pontics or open gingival embrasures with polyvinyl or wax materials.
4. Lubricate any bis-acryl temporaries or resin based restorations with thin layer of glycerin or K-Y jelly.

### Anterior NTI/Pankey Jig Technique

1. Place the jig (NTI) and adapt it to allow for slight open contact in the posterior when patient closes into the jig (Fig. 01).



Fig. 01

Fig. 02

2. The LuxaBite is applied to the occlusal surfaces of the posterior teeth (Fig. 02 & 03). The patient is placed into the correct condylar position and closes into the LuxaBite (Fig. 04).



Fig. 03

Fig. 04

3. Additional LuxaBite is placed under the buccal cusps after closure (Fig. 05).
4. The patient remains closed for 45-60 s (Fig. 06).



Fig. 05

Fig. 06

The anterior jig is then removed (Fig. 07).

5. An anterior LuxaBite registration is then made to establish a tripod bite stabilization registration (Fig. 08 & Fig. 09).



Fig. 07

Fig. 08

Allow anterior material to set 45-60 seconds and have patient slightly separate teeth and then reclose to ensure that the bite registration is not locked on.

6. Wait additional 2 minutes to final set and remove using gloved fingers or gently with a hemostat (Fig. 10).



Fig. 09

Fig. 10

7. Using an acrylic bur or a high speed diamond the bite registrations are trimmed to provide a »cusp tip only« registration (Fig. 11 & 12).



Fig. 11

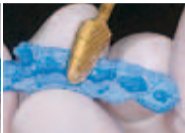


Fig. 12

The tripod bite registrations are used to accurately mount the models (Fig. 13).



Fig. 13

## The Anterior Ball Technique

1. A flowable composite resin is used as a wetting agent prior to placing a composite resin ball. The composite resin ball will provide an anterior stop. A resin ball is formed and placed over the flowable resin on the mandibular anterior teeth. The patient closes into the anterior resin ball at the desired concylar position with the posterior teeth slightly out of contact.
2. The LuxaBite is applied to the occlusal surfaces of the posterior teeth (Fig. 01 & Fig. 02).



Fig.01



Fig.02

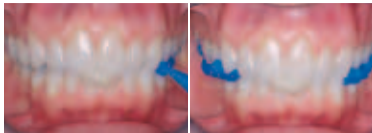


Fig. 03

Fig. 04

3. Additional LuxaBite is placed under the buccal cusps (Fig. 03).
4. The patient remains closed for 45-60 seconds (Fig. 04). Have patient slightly separate teeth and then reclose to ensure that the bite registration is not locked on.
5. Wait additional 2 minutes to final set and remove using gloved fingers or gently with a hemostat (Fig. 05).
6. Using an acrylic bur or a high speed diamond the bite registrations are trimmed to provide a »cusp tip only« registration (Fig. 06).

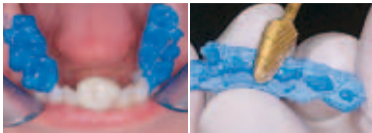


Fig. 05

Fig. 06

The anterior resin ball and posterior LuxaBite registrations are used to establish a stable tripod bite and accurate mounting (Fig. 07).



Fig. 07

## Disinfection

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LuxaBite registrations can be disinfected with standard disinfection solutions. We recommend alcohol-based products, as this will also remove the oxygen inhibited layer.

## Composition

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Glass filler in a matrix of multifunctional methacrylates. Free of methyl methacrylate and peroxides.

## Storage of bite registration

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There is no need of special storage conditions. The stability in storage of the registration has no time limitation.

## Storage of cartridge

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- ▶ Do not store above 25 °C/77 °F.
- ▶ Do not use after expiry date.

## Packaging

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1 cartridge @ 50 ml paste	
15 Automix-tips	REF 110560

Keep away from children! For dental use only!







**DMG** Chemisch-Pharmazeutische Fabrik GmbH

Elbgaustraße 248

22547 Hamburg

Germany

Fon: + 49. (0) 40. 84 006-0

Fax: + 49. (0) 40. 84 006-222

[www.dmg-dental.com](http://www.dmg-dental.com)