both the crowns and the provisional dental bridges allow the healing of the post-extraction and peri-implantation remaining tissues, establish the occlusal relationships and the vertical dimension of occlusion, prevent the dental migrations and last but not least, by fixing them with the provisional cement they stimulate the repair processes in the tissue.

Conclusions. The provisional prosthesis in fixed prosthetics has a privileged place. It is true that it raises costs, but in developed countries, it is no longer possible to design fixed prosthetics without provisional prosthetics.

Key words: fixed constructions, provisional prosthetics.

386. PROSTHETIC TREATMENT OF PARTIAL EDENTULISM KENNEDY CLASS III WITH PORCELAIN FUSSED METAL BRIDGES

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Introduction. According to the data of the World Health Organization of September 2018 "oral diseases affects half of the world's population (3.58 billion people)". The oral diseases "are the most common noncommunicable diseases" that "affect people throughout their lifetime, causing pain, discomfort, disfigurement and even death". Among the harmful factors that affect the stomatognathic system which guides to the partial edentulism are the endogenous factors such as metabolism disturbances, endocrine glands dysfunction, hereditary factors and neurodystrophy of hard tissues. As exogenous factors can be pointed out the harmful professional working conditions with acids, alkaline substances and dust. Among the risk factors are some behavioral habits to keep different objects in the mouth and unhealthy diet habits of individuals such as alcohol, tobacco, usage of products with high concentration of acids, or sugars that can provoke carries and can lead to the extractions.

Aim of the study. The purpose of our study was to determine the advantages and disadvantages of prosthetic treatment of partial edentulism III-rd by class Kennedy by PFM fixed partial dentures (porcelain fussed metal).

Materials and methods.. For our purpose, 21 articles were revised and analysis of advantages and disadvantages of III-rd class by Kennedy rehabilitation by porcelain fussed to metal fixed partia denture was made.

Results. In the revised articles, the highest incidence of edentulism was Kennedy class III and it varied from 41.1% to 56.7%, prevailing on the maxilla. Among the advantages of porcelain fussed metal fixed partial dentures we would like to mention: the low cost, preservation of periodontal integrity of abutments, stabilization, restoration of the lost supporting structures and relatively easy fabrication and modification. As disadvantages of this method were marked out the difficulties in maintaining of oral hygiene, undue load on abutment teeth, sometimes changes, or dislodgement of the molar bands and plaque accumulation that can cause periodontal damage.

Conclusions. Taking into consideration the economic point of view and duration of treatment results, treatment by porcelain fussed metal fixed partial dentures of III rd class by Kennedy should be named as one of the most suitable and widely used method.

Key words: treatment, partial edentulism, porcelain fussed metal bridges